

The Crucifixion and Death of Jesus in the Qur'an and Islamic Scholarship: The "Swoon Theory"
and the Medical Perspective.

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Introduction

The crucifixion and death of Jesus Christ is a profound event that holds immense theological significance within Christianity. However, the Islamic perspective as presented in the Qur'an, offers a distinct portrayal of this event, giving rise to an argument known as the Swoon Theory. This theory suggests that Jesus did not die on the cross but instead survived the crucifixion, prompting various interpretations and implications. This thesis aims to explore the depiction of the crucifixion and death of Jesus in the Qur'an, focusing specifically on the swoon theory and its relationship with the medical perspective. By examining relevant Qur'anic verses and exploring medical knowledge and historical context, this research will delve into the plausibility and implications of the Swoon Theory from a medical standpoint.

The Qur'an serves as the central religious text of Islam and provides essential insights into the Islamic understanding of Jesus' crucifixion. Surprisingly, the Qur'an presents an alternative narrative, asserting that Jesus was not crucified but that someone else was made to resemble him. This deviation from the Christian account has sparked significant scholarly interest and debate. One of the main sources for the Islamic interpretation of the crucifixion of Jesus is Surah 4:157–158, which states,

And [for] their saying, "Indeed, we have killed the Messiah, Jesus, the son of Mary, the messenger of Allah." And they did not kill him, nor did they crucify him; but [another] was made to resemble him to them. And indeed, those who differ over it are in doubt about it. They have no knowledge of it except the following of assumption. And they did not kill him, for certain. (Sahih International)

It is from verses like this that Islamic scholars such as Ahmed Deedat conclude that Jesus did not die by crucifixion.¹ Considering this verse Deedat and others argue for alternative explanations for the Crucifixion. The main idea is that while the Jews may have attempted to kill Jesus, they

¹ Ahmed Deedat, *Crucifixion or Cruci-Fiction?* (Peace Vision: International Islamic Pub House, 1984), 59.

failed. Deedat further asserts that after Jesus' crucifixion, he sought refuge in the tombs as a means of recuperating from the arduous experience he had recently had.²

The primary argument put up by Deedat and other scholars is that the crucifixion event, as supported by the aforementioned text, was a deeply agonizing experience in which Jesus was on the verge of death. However, the subsequent act of a Roman soldier piercing Jesus with a spear served to rejuvenate him, enabling his survival and further interaction with his disciples. This occurrence was intended to demonstrate Jesus' triumph over death and his indomitable nature.³ Deedat also derives this reasoning from the account presented in the Gospel of Luke, the responses exhibited by the followers of Jesus, and the scriptural passage found in Deuteronomy 18:20.⁴

The crucifixion and the subsequent death of Jesus on the cross is regarded as a central tenet of the Christian faith and is one of its pivotal points.⁵ This is because of its link to the resurrection. In Christianity, the resurrection is crucial as it is one of the main bases on which the faith hinges. However, if there was no crucifixion and subsequent death of Jesus on the cross then there could not have been a resurrection. Due to the significance of the crucifixion in the Christian religion, it is of little wonder that skeptics and followers of other religions have always found it convenient to focus their criticism on this aspect. This thesis aims to explore the depiction of the crucifixion and death of Jesus in the Qur'an, focusing specifically on the swoon theory and its relationship with the medical perspective. By examining relevant Qur'anic verses

² Ibid., 61.

³ Ibid., 60.

⁴ Ibid.

⁵ Mark D. Baker and Joel B. Green, *Recovering the Scandal of the Cross: Atonement in New Testament and Contemporary Contexts*, Second edition, (Downers Grove, Illinois: InterVarsity Press, 2011) 18.

and exploring medical knowledge and historical context, this research will delve into the plausibility and implications of the swoon theory from a medical standpoint.

Importance of the Topic

This study seeks to explore the theological implications of the Islamic account of Jesus' crucifixion. By analyzing different interpretations and commentaries from Islamic scholars throughout history, the research aims to uncover the theological significance attributed to this event within Islamic theology. It will address questions such as the nature and purpose of Jesus' crucifixion. Moreover, this research aims to contribute to interfaith dialogue by promoting a deeper understanding and appreciation of the shared beliefs and differences between Christianity and Islam. By engaging in a scholarly analysis of the crucifixion narrative, the research intends to foster mutual respect and promote productive conversations between adherents of both faiths.

A comprehensive examination of the crucifixion and death of Jesus in Islamic theology will be provided, focusing on the swoon theory and its theological implications, while incorporating a medical perspective. Through an analysis of relevant Qur'anic verses, historical context, medical evidence, and theological interpretations, this research aims to contribute to a nuanced understanding of this significant event within Islamic theology and facilitate interfaith dialogue and theological discourse.

Limitations of the Study

When contemplating the extensive body of knowledge pertaining to the crucifixion, it would be superfluous to reiterate the efforts that have already been undertaken. Hence, this thesis will not solely address a singular perspective put forward by a medical expert concerning the crucifixion but will also examine the potential occurrence of many complications that may arise during this particular form of capital punishment. Additionally, it is crucial to acknowledge that

the medical evidence provided can only be presented as probabilistic due to the constraints of time. This document should be employed in connection with other historical evidence, as well as appropriate hermeneutical defenses.

A set of predetermined exclusion criteria were utilized in order to identify relevant papers that would address the study inquiries. In light of this the following materials were omitted from the analysis: The study articles that have not been peer-reviewed, the research studies that involve contemporary individuals who volunteered to face crucifixion, the explanatory notes found in Study Bibles, the psychological assessments conducted on individuals who are on death row, the Greek, Hebrew, and Arabic materials that have not been translated, all of these are due to limitations imposed on the capacities of the researcher.

The thesis will not encompass the interpretative processes encountered while studying Scripture, but it will necessitate the identification and emphasis of specific portions of Scripture as points of reference. Regarding the delimitations, a deliberate choice was made to exclusively concentrate on the medical facets of the crucifixion, while excluding any discussion of the resurrection, as the primary objective of the argument does not center around the resurrection. The focus of this analysis will be only on the ancient Near Eastern societies in relation to their practices of capital punishment. The reader is advised to anticipate that this paper will encompass not only theology but also delve into medical terminology and statistics. Furthermore, it will explore the issue of interpreting medical evidence within the context of contemporary knowledge.

The thesis will focus on the sectarian disparities in eschatology across Sunni, Shi'ite, and Ahmadiyya beliefs. The denial of the crucifixion as a creedal conviction originates from eschatological tensions within the sectarian context that influenced Islamic thought. The Sunni

Hadith does not mention the crucifixion, but the Shi'ite Hadith outright denies it. This rejection is particularly strong in Shi'ite ideology, especially within the Twelver strand, which links Jesus to the Twelfth Imam (Mahdi). Both people are expected to play crucial roles in the cataclysmic return in this theological development. Shi'ite belief in the non-occurrence of the crucifixion is consistent with their belief in occultation, where Jesus and the Twelfth Imam have remained concealed, anticipating their future return. Sunni eschatology rejects the concept of another Mahdi and instead recognizes the Twelfth Imam as a fictitious person, seeing Jesus as the only eschatological figure. This difference results in a focus on protecting Jesus from death, particularly by rejecting the idea of the crucifixion. Both major Islamic sects use the rejection of the crucifixion to support their differing beliefs about the end times, which interestingly agree on the idea that Jesus, as a redeemer in the end times, should not experience the shame of being crucified. In Ahmadiyya Islam, Jesus (Isa) is viewed as a mortal man who is fully human and acknowledged as a prophet of God. According to Ahmadiyya Islam, Jesus did not die on the cross, he is thought to have died naturally in India, reaching old age and eventually passing away in Srinagar, Kashmir, where his tomb is now located at the Roza Bal shrine. Jesus is thought to have moved eastward after delivering his message to the Israelites in Judea to avoid persecution and to keep spreading his teachings to the Lost Tribes of Israel. The belief in Jesus' survival of the crucifixion is based on the accounts found in the canonical Gospels, the Qur'an, hadith literature, and revelations received by Mirza Ghulam Ahmad (who is believed to be the *Mahdi*, that was supposed to return after Jesus).

Summary of Chapters

The objective of the first chapter is to create the grounds for the discussion, as it is vital to do so at the beginning of any discourse. In this chapter, we will talk about how the crucifixion

is described in the Qur'an. The Qur'an is clear that the Jews neither killed nor crucified Jesus (Surah 4:157–159).⁶ This chapter focuses on the grounds for the Islamic assertion of the crucifixion. The emphasis will be placed on what the Qur'an has to say on the subject. A discourse will also be incorporated about the Qur'an as the final authority in Islamic thought and its role in a Muslim's life.

In the following chapter, we shall investigate the Swoon Theory from an Islamic point of view. Especially as an explanation for the statement in the Qur'an that asserts that the Jews did neither kill Jesus nor crucify him (Surah 4:157–159). As an explanation for the crucifixion and subsequent death of Jesus on the cross, the Swoon Theory has received support from a significant number of Muslim academics. Many Islamic academics, including Shabir Ally, hold the belief that Jesus was crucified but was able to survive the experience of being crucified. He defends his position by arguing that Jesus did not hang on the cross for a long enough period of time for him to be considered dead.⁷ In addition, Muhammad Din utilized this same line of reasoning that Ally does when he explained that the oozing of blood from the side of Jesus was a sure sign of the fact that he did not fully die.⁸ He further asserted that, the body of Jesus was given to one of his devoted disciples, and rather than being buried in the regular cemetery, he was placed in a chamber in the side of a rock that had been particularly built for the purpose.⁹ This chamber was more like a hall than a place for burial.

⁶ Ibid.

⁷ Ibid.

⁸ Muhammad Din, "The Crucifixion in the Koran the Moslem Point of View." *The Muslim World* (Hartford) 14, no. 1, 1924.

⁹ Ibid.

The third chapter of this discourse is going to be devoted to a discussion on the crucifixion and the subsequent death of Jesus on the cross from a medical point of view. The crucifixion and the physical death of Jesus will be discussed in this chapter from the perspective of medical science. A discussion will be made into the events that took place in the hours preceding up to the crucifixion of Jesus, going into specifics and making use of medical language, regarding the physical pain that he underwent prior to being nailed to the cross. It will be discussed that “the cause of death from crucifixion, which typically occurred between six hours to four days later, was highly complex pathology including the effect of four scourging and the maiming hemorrhoids and dehydration which led to hypovolemic pain and apprehension”.¹⁰ It will be pointed out that in the case of Jesus, prior to his crucifixion, he would have been close to death from the beatings he endured. The goal of this chapter is to assess the possibility of surviving a crucifixion from a medical standpoint. This chapter will interact with professional medical discourses on the crucifixion.

In the fourth chapter, we will discuss the crucifixion as it occurred during Jesus' time, which was during the reign of the Roman Empire. The Romans had perfected crucifixion for 500 years until it was abolished by Constantine I in the fourth century AD.¹¹ Death was most likely caused by cardiac arrest, which was caused by vasovagal reflexes triggered by severe anoxaemia, severe pain, body blows, and breaking of large bones.¹² It will be discussed that in the Roman crucifixion process the victim was not simply nailed to the cross, the victim was initially beaten

¹⁰ William D. Edwards, Wesley J. Gabel, and Floyd E. Hosmer, "On the physical death of Jesus Christ." *Jama* 255, no. 11 (1986): 1455-1463.

¹¹ Martin Hengel, *Crucifixion in the Ancient World, and the Folly of the Message of the Cross*. 1st American ed. (Philadelphia: Fortress Press, 1977), 29

¹² Joseph W. Bergeron, "The Crucifixion of Jesus: Review of Hypothesized Mechanisms of Death and Implications of Shock and Trauma-induced Coagulopathy," *Journal of Forensic and Legal Medicine* 19, no. 3 (2012): 112.

and then forced to carry their own beam that they would eventually be crucified on. After the crucifixion it was common for the victim's knees to be broken to hasten the process of death. It.¹³ The attending Roman guards were only allowed to leave the site after the victim died, and they were known to cause death by deliberately breaking the tibia and/or fibula, spear stab wounds into the heart, sharp blows to the front of the chest, or asphyxiating the victim with a smoking fire built at the foot of the cross.¹⁴ The objective of this chapter is to offer a historical framework for the crucifixion. This will provide a context from which to discuss the crucifixion as it occurred to Jesus and in the day that he lived.

The discussion will be brought to a close in the conclusion by addressing the assertions made by the Islamic interpretation of the swoon hypothesis as it relates to the crucifixion and the death of Jesus on the cross while depending on the medical and historical data. This chapter will discuss the prevalent facts, both medical and historical, as well as scientific, that attest to the practicability of the crucifixion and the death of Jesus on the cross.

Literature Review

In the Qur'an, the Islamic holy scripture, the crucifixion of Jesus is mentioned in a few verses. The general idea of the crucifixion in the Qur'an is that Jesus, known as Isa, was not crucified, but rather a likeness of him was made to appear as if he was crucified.¹⁵ One of the main verses that addresses this topic is found in Surah 4:157-158. As previously stated, the clearest idea in this verse is that the Christian assertion about the crucifixion of Jesus is a distortion. This dilemma generates a significant contradiction between the Bible and the

¹³ Edwards, William D., Wesley J. Gabel, and Floyd E. Hosmer, "On the physical death of Jesus Christ," *Jama* 255, no. 11 (1986): 1455-1463.

¹⁴ *Ibid.*

¹⁵ Khouri, *The Crucifixion in the Qur'an*, 158.

Qur'an.¹⁶ According to some Islamic belief, Jesus was not subjected to crucifixion and death, but was taken up to Allah and will return in the future as a sign of the Last Day.¹⁷ This understanding is significant in the Islamic faith and has theological implications regarding the nature of Jesus and his role as a prophet.¹⁸

In discourses about Islamic beliefs and ideologies, the place of the Qur'an cannot be under-emphasized. Khouri points out that "as the most authoritative source of Islamic scholarship, the Qur'an is essential to the formation of Islamic beliefs and practices. As a result, it is frequently the subject of contentious debates and disputes."¹⁹ This statement reveals that to the Muslim, the Qur'an is the ultimate lens through which the world is viewed. However, this often results in misunderstanding among different Muslim sects since interpreting the Qur'an is not always easy.²⁰ To remedy this *Tafsirs* (Qur'anic exegesis and interpretation) are often engaged in order to address subjects in the Qur'an that Muslims may find complicated.

To have a genuine understanding of the Islamic perspective on the crucifixion, it is crucial to examine specific *Tafsirs* on this topic. Among Islamic Sunni scholarship, al-Tabari is considered a very prominent and renowned scholar. His collection of Qur'anic *Tafsirs* is highly praised and considered to give a very detailed understanding into the Qur'anic text.²¹ In his commentary on Surah 41:57, al-Tabari presents various stories and explanations that some modern scholars still depend on to account for the crucifixion of Jesus. Al-Tabarsi, who is a

¹⁶ Ibid.

¹⁷ Mayeser M. Peerzada, and P. S. Jamali, "How Can We Reconciliate Jesus Christ of The Bible and Prophet Jesus of The Quran?" *Research Journal of Humanities and Social Sciences* 9, no. 4 (2018): 937

¹⁸ Ibid.

¹⁹ Khouri, *The Crucifixion in the Qur'an*, 163

²⁰ Ibid.

²¹ Khouri, *The Crucifixion in the Qur'an*, 158-174

Shi'ite scholar, also presents an explanation based on stories that ran in line with the Sunni assertion of the events that took place during the crucifixion of Jesus. While his account is different from the account of Al-Tabari, the idea still holds that Jesus was not crucified. The importance of these tafsirs lies in the fact that they serve as a confirmation for the Qur'anic assertion that Jesus did not die by crucifixion. They further strengthen the Islamic argument for the swoon theory.

The Islamic perspective of the crucifixion, as previously stated is unambiguous and is found in Surah 4:157–158. In essence, this passage asserts that Jesus was neither slain nor crucified. Numerous Islamic apologists have presented a multitude of apologetic responses in an effort to elucidate this matter. Professor Mahmoud M. Ayoub, a distinguished scholar in the field of Islamic studies, presents a thorough examination of the Qur'an, delving into many interpretations put forth within the Islamic tradition, in order to distill its fundamental meaning. Ayoub asserts that the Qur'an does not explicitly reject the notion of Christ's death, instead, it presents a challenge to those who hold the misguided belief that they can triumph against the divine message that is personified in Jesus, who is regarded as the Messenger of God.²² This argument posits that the crucifixion of Jesus can be interpreted as endeavors aimed at subverting the authority of Allah, a notion that is deemed unattainable. Hence, it might be argued that Jesus's crucifixion is implausible.²³ In his book titled, *Demystifying Islam: Tackling the Tough Questions*, Zafar Harris aligns himself with the perspective that Jesus was spared from death at the crucifixion. Harris supports this viewpoint by asserting that, based on the Hebrew text, individuals who perish on the cross are considered accursed. Nevertheless, given that Jesus is not

²² Mahmoud M. Ayoub, "Towards an Islamic Christology, II: the death of Jesus, reality or delusion," *The Muslim World* 70, no. 2 (1980): 91.

²³ Ibid.

seen as cursed, it might be inferred that his death did not occur on the cross.²⁴ This assertion is quite important for this discussion as it alludes to the swoon theory. Khaled M. Abou El Fadl argues that Jesus' ascension to heaven by Allah, rather than his crucifixion as claimed by Christians, is a valid perspective.²⁵ Numerous explanations, including the swoon theory, have been put out by some Muslim apologists in an attempt to address the Christian claim regarding the crucifixion.

The Swoon Theory, also known as the Apparent Death Theory, posits an explanation for Jesus' survival on the cross, suggesting that he was in a state of unconsciousness rather than deceased when he was removed from the cross. Mohammed Din emerged as a prominent Islamic scholar who advocated the aforementioned argument as a plausible elucidation for the crucifixion event. Din posited that with regards to the crucifixion event, Jesus did not truly perish on the cross, but rather underwent a state like death, from which he eventually emerged and was revived.²⁶ Din utilized biblical passages as a means of reinforcing his argument. The author suggested that, based on the account in Mark 15:44, the demise of Jesus occurred expeditiously. One of his primary arguments was around the notion that the individual in question, who was subjected to crucifixion, experienced a remarkably swift demise, to the extent that it even surprised Pontius Pilate. According to Din's perspective, the sole rationale for this phenomenon is that Jesus was not truly deceased. Din argued that the sole indication of Jesus' death in his vegetative state on the cross would have been the physical disintegration of his body.²⁷ In a

²⁴ Harris Zafar, *Demystifying Islam: Tackling the Tough Questions*, (Lanham: Rowman & Littlefield, 2014), 153.

²⁵ Khaled Abou El Fadl, *The Great Theft: Wrestling Islam from the Extremists*, (New York: Harper San Francisco, 2005), 82.

²⁶ Muhammad Din, *The Crucifixion in the Koran the Moslem Point of View*, 25.

²⁷ *Ibid.*, 25.

similar way, Ahmed Deedat presents a very compelling interpretation of the crucifixion and resurrection of Jesus in his literary work titled *Crucifixion or Cruci-fiction?* Din uses the Christian Bible to substantiate his assertions and objectives arguing that the swoon theory is a more plausible explanation of Jesus' crucifixion experience rather than his demise on the cross.²⁸

When examining the discourse surrounding the crucifixion of Christ, it is also crucial to engage in a discussion on the arguments presented by Christians in support of their claims. It is noteworthy to acknowledge that the Christian justification for the crucifixion predominantly adopts a discourse that encompasses both biblical declarations and historical grounds. Many Christian apologists commonly employ historical evidence and biblical arguments to support the veracity of Jesus' existence and crucifixion. In his scholarly work titled *The Case for the Resurrection of Jesus*, Dr. Gary Habermas posits that the crucifixion and subsequent demise of Jesus can be regarded as a minimal truth.²⁹ Meaning that in the context of historical analysis, it is widely acknowledged that the crucifixion of Jesus holds an indisputable significance. According to Darrell Bock, the crucifixion held significant significance throughout the Roman Empire, serving not only as a legal punishment for criminals but also as a demonstration of governmental authority and a means of reinforcing that authority through exemplification.³⁰ Hence, in the crucifixion of Jesus, akin to other instances of crucifixion, it was of utmost importance that the individual subjected to this kind of execution did not survive.³¹

²⁸ Deedat, *Crucifixion or Cruci-Fiction?*, 59–63.

²⁹ Gary R. Habermas, and Mike Licona, *The Case for the Resurrection of Jesus*. (Grand Rapids, Mich: Kregel Publications, 2004), 48-49.

³⁰ Darrell L. Bock, *Studying the Historical Jesus: A Guide to Sources and Methods*. (Grand Rapids: Baker Academic, 2002), 120.

³¹ Ibid.

In his book titled, *The Resurrection of Jesus: A New Historiographical Approach*, Mike Licona asserts that the narrative surrounding the disciples' behavior before and after the death of Jesus is incongruous with the plausibility of Jesus surviving the crucifixion.³² The present argument posits that the disciples of Jesus experienced profound sorrow upon his death, yet thereafter claimed that he had been resurrected from the dead. If Jesus had indeed survived the crucifixion, it would be implausible for him to have fully recuperated within a few days following such a harrowing incident. Consequently, it would have been unfeasible for Jesus to persuade the disciples of his triumphant reappearance, a claim that was extensively propagated by the disciples. In alignment with B. McCain's concept regarding the burial of Jesus, Craig concurs that the burial of Jesus holds significance as it provides historical evidence supporting the claim of Jesus' death. Moreover, it demonstrates that this particular form of crucifixion held significance beyond mere humiliation within the context of Jesus' contemporaries.³³ Ultimately, the argument of Christian apologists is that historical evidence supports the notion that Jesus had a fatal crucifixion, and his burial was acknowledged by Jewish authorities and other contemporaries. According to Christian theologian Mark Smith, the Romans had no compelling grounds to refrain from executing Jesus through crucifixion, as they perceived him merely as an average Jewish individual.³⁴ Consequently, the crucifixion would be executed without any hesitation, resulting in the ultimate outcome of death.³⁵ The Christian argument for the crucifixion is substantiated by a substantial reliance on historical material. One potential

³² Mike Licona, *The Resurrection of Jesus: A New Historiographical Approach*. (Downers Grove, Illinois: IVP Academic, 2019).

³³ William Lane Craig, "Was Jesus Buried in Shame? Reflections on B. McCane's Proposal." *Expository Times* 115, no. 12 (2004): 404–9.

³⁴ Mark D. Smith, *Summum Supplicium; The Death and Burial of Jesus: The Final Days of Jesus*. (Cambridge (GB): The Lutterworth Press, 2018), 181.

³⁵ *Ibid.*, 181.

explanation for this phenomenon could be the prevalence of numerous charges frequently levied against the resurrection of Jesus. Hence, a significant number of Christian apologists' present arguments supporting the historical veracity of Jesus' death. The assessment of the legitimacy of Jesus' death on the cross is crucial for this thesis.

The scholarly discourse around the medical analysis of Jesus' crucifixion has shown a steady growth and development over an extended period. While certain scholarly works support the notion that Jesus indeed perished on the cross, there exist conflicting literary sources that challenge this perspective. Matthew Maslen and Piers Mitchell published a paper titled, *Causes of Death by Crucifixion: A Comparative Analysis of Medical Theories* in 2006 in the *Journal of the Royal Society of Medicine*. In it they explored several medical hypotheses pertaining to the factors contributing to death in crucifixion cases. Upon presenting a comprehensive assortment of several possibilities, it was ultimately determined that there exists an insufficient amount of evidence to confidently ascertain the precise manner in which individuals perished as a result of crucifixion throughout the era of ancient Rome.³⁶ It is plausible that various persons perished due to distinct physiological factors, and it is reasonable to anticipate that the manner in which they were crucified would play a pivotal role in this regard.³⁷ The key concept being discussed is that while it may be argued that individuals subjected to crucifixion perished, the specific manner or method of their demise exhibited variability. Habermas et al. in their article, *Medical and scholarly perspectives on the crucifixion of Jesus Christ*, conducted a comprehensive analysis

³⁶ Matthew W. Maslen and Piers D. Mitchell, "Medical Theories on the Cause of Death in Crucifixion," *Journal of the Royal Society of Medicine* 99, no. 4, (2006): 185-188.

³⁷ *Ibid.*, 188.

into the crucifixion of Jesus. This article examined various viewpoints and ultimately determined that Jesus indeed perished on the cross.³⁸

The prevailing consensus among experts is that asphyxiation, particularly theories emphasizing asphyxiation, played a significant role in causing Jesus' demise.³⁹ However, there exist certain schools of thought that present arguments against the crucifixion and demise of Jesus from a medical perspective. In contrast to preceding medical explanations, Davis and Davis assertively asserted that Jesus' demise did not occur on the cross.⁴⁰ Conversely, they assert that the infliction of torture upon Jesus by the Roman centurions, such as repeated strikes to the cranium, lashings, and physical assaults, caused a debilitation of his physical condition and induced a state of shock which further resulted in a state of unconsciousness.⁴¹ The crux of this argument posits that, despite the Gospel narratives detailing the crucifixion, there exists an insufficiency of medical evidence to adequately explain the demise of Jesus on the Cross.⁴² Davies and Davies propose the notion of potential resuscitation, suggesting the plausibility of Jesus' recuperation subsequent to his crucifixion agony.⁴³ This perspective is widely supported among adherents of the Islamic faith. In contrast to the aforementioned perspective, Joseph W. Bergeron, a medical doctor, posits in his work titled *The Crucifixion of Jesus: Review of Hypothesized Mechanisms of Death and Implications of Shock and Trauma-Induced*

³⁸ Gary Habermas, Jonathan Kopel, and Benjamin C. F. Shaw, "Medical Views on the Death by Crucifixion of Jesus Christ," *Baylor University Medical Center* 34, no. 6 (2021): 748–752.

³⁹ *Ibid.*, 751.

⁴⁰ Margaret Lloyd Davies, Lloyd Davies T.A, *Resurrection or resuscitation?* J R Coll Physicians Lond. 1991 Apr;25(2):168.

⁴¹ *Ibid.*, 167.

⁴² *Ibid.*, 168.

⁴³ *Ibid.*

Coagulopathy, that the evidence strongly supports the notion that Jesus endured a profoundly agonizing death as a result of torture and crucifixion.⁴⁴

In her paper titled *The Physical Death of Jesus Christ: The 'Swoon Theory' and the Medical Response*, Kate Hill posits that the assertion of Jesus merely "swooning" on the cross becomes logically untenable in light of the medical facts pertaining to the Crucifixion.⁴⁵ The intense physical suffering he faced prior to being nailed to the cross, along with the ensuing cardiovascular difficulties he encountered, would have rendered his survival unattainable.⁴⁶ Bart Ehrman, a New Testament scholar who identifies as an atheist and non-Christian, asserts with conviction that the discussion of the belief in Jesus' resurrection poses no challenge for historians, as it pertains to a widely documented event.⁴⁷ It is an established historical reality that a subset of individuals who adhered to Jesus began to hold the belief that he had experienced resurrection shortly following his crucifixion.⁴⁸ This observation appears to allude to the concept of Jesus' crucifixion and subsequent death.

Methodology

The discourse pertaining to Jesus Christ and the event of his crucifixion has been a topic of interest and discussion among adherents of both the Islamic and Christian faiths. The primary objective of this thesis is to examine the viability of human survival during a conventional Roman crucifixion. This will be done through the exploration of historical accounts,

⁴⁴ Bergeron, *The Crucifixion of Jesus*, 112.

⁴⁵ Kate Hill, "The Physical Death of Jesus Christ: The 'Swoon Theory' and the Medical Response," *Faith and Science* 1, (2015): 14.

⁴⁶ *Ibid.*, 13.

⁴⁷ Bart D. Ehrman, *Jesus, Apocalyptic Prophet of the New Millennium*. (Oxford: Oxford University Press, 1999), 230.

⁴⁸ *Ibid.*, 231.

archaeological evidence, and scholarly works on Roman crucifixion. Also, an examination will be made into medical literature and forensic studies related to the physical effects of crucifixion on the human body. Finally, a discussion will be made in to the religious and theological perspective on the crucifixion. The findings of this investigation have significant consequences for evaluating the probability of Jesus's survivability during the crucifixion event. Following this, the research examines the medical feasibility of such survival. The present study aims to investigate these queries to provide insights into the historical backdrop and potential medical implications of Jesus' crucifixion, by enhancing the overall comprehension of this momentous occurrence. The research methodology involves the examination of Roman antiquity and medical literature in order to acquire a deeper understanding of the mechanisms and consequences associated with a Roman crucifixion. While the available historical sources suggest that the practice of crucifixion predates the Romans, their contributions to its refining offer valuable insights. Although the findings from research conducted during Roman antiquity and medical examinations may not offer a clear correlation to every detail of Jesus' crucifixion, they play a crucial role in comprehending the overall characteristics of a typical crucifixion event.

The research draws from an array of primary sources, such as the Qur'an, the Hadiths, and the Bible. In addition to these scholarly sources including but not limited to prominent historians such as Dr. Habermas, esteemed medical researcher Dr. Zugibe, and Muslim apologist from the Ahmadiyya sect, Zafar Harris. Their contributions form a foundational basis for the exploration of historical, medical, and theological aspects pertaining to the crucifixion event. The findings of this research have significance for individuals who regard Jesus Christ as their spiritual leader, members of the Muslim community who maintain their distinct understanding of Jesus, and those who seek a comprehensive grasp of the historical and medical dimensions of

Jesus of Nazareth's crucifixion. By examining the survivability of a Roman crucifixion and its potential medical implications, this study endeavors to foster informed dialogue and deeper comprehension among diverse perspectives. This methodology entails a systematic exploration of historical and medical data to assess the possibility of surviving a Roman crucifixion, offering insights into the crucifixion event itself and its broader implications. The incorporation of primary and secondary sources from various disciplines aims to enrich the understanding of this critical historical and theological subject.

Chapter One

The Crucifixion as depicted in the Qur'an and Islamic Scholarship

The ongoing theological discourse pertaining to Jesus Christ and his crucifixion on the cross is a significant topic of reflection among Muslim and Christian circles. In Islamic discourse the Qur'an is viewed as the supreme source of authority, this is emphasized by its profound impact on the religious practices and beliefs of Muslims.⁴⁹ This chapter explores the depiction of the crucifixion in the Qur'an and its portrayal in the historical records of Islamic scholarship. The Qur'an, in Surah 4:157–159 explicitly states that Jesus was not killed or crucified. Diverse theological interpretations arise within the realm of Islamic scholarship, wherein some scholars adhere to the Swoon Theory, asserting that Jesus did not die on the place on the cross, he simply swooned and resuscitated days later, suggesting that Jesus underwent crucifixion but did not die.⁵⁰

⁴⁹ Khouri, *The Crucifixion in the Qur'an*, 158-174.

⁵⁰ Hill, *The Physical Death of Jesus Christ*, 14

The Qur'an as the Final Authority in Contemplations

The significance of the Qur'an in discussions pertaining to Islamic beliefs and ideologies cannot be overstated. According to Khouri, the Qur'an holds significant importance in shaping Islamic beliefs and practices, as it is regarded as the foremost authoritative source of Islamic learning.⁵¹ The primary significance of this argument posits that the Qur'an holds ultimate authority in all deliberations. In essence, when the Qur'an addresses a certain subject, adherents of Islam are required to comply. The Qur'an conclusively settles any discussion on a given subject. For adherents of the Islamic faith, the Qur'an holds significance beyond its role as a mere text to be perused. It possesses a profound ability to effect change and mold the mindset of the individual who embraces its teachings.⁵² This perspective allows adherents of Islam to perceive the world within a divine framework. Moreover, the Qur'an functions as a moral foundation for adherents of Islam, exerting influence on their ethical discernment and judgment.⁵³ It provides a framework by which Muslims can assess morality and traverse the intricacies of contemporary society. The Qur'an functions as a guiding principle for Muslims in all aspects of life.

Dr. Seyyed Hossein Nasr, a renowned researcher in the field of Islamic studies, elucidates the pivotal role played by the Qur'an in developing the Muslim perspective of reality. Nasr highlights that the Qur'an serves as more than a mere literary work, but rather functions as a lens through which Muslims gain their perception of the world.⁵⁴ He states that “the Qur'an has

⁵¹ Ibid.

⁵² Ziauddin Sardar, *Reading the Qur'an: the Contemporary Relevance of the Sacred Text of Islam*. (Oxford: Oxford University Press, 2011), 273.

⁵³ Ibid.

⁵⁴ Seyyed Hossein Nasr, *Islamic spirituality: foundations*. (New York: Crossroad Publishing Company, 1997), 9.

created a whole cosmos within which the Muslim lives and dies”.⁵⁵ The Qur'an offers a transcendent viewpoint on the nature of reality, serving as a guiding source for Muslims in comprehending the overall purpose and significance of human existence.⁵⁶ The significance of this view offers a compelling portrayal of the Muslims' connection to the Qur'an. The Qur'an serves as more than a mere collection of religious texts; rather, it functions as a guiding principle for ethical conduct and a lens through which individuals perceive and interpret the world. According to the Muslim perspective, the Qur'an serves as the ultimate depiction of reality. Hence, any beliefs or ideas that conflicts with the teachings of the Qur'an must be analyzed and interpreted within the framework of its principles, or alternatively, disregarded. Hence the diverse Muslim contemplation and conclusions on the issue of the crucifixion.

The Discourse of the Crucifixion in Islamic Scholarship and its Implication

In order to acquire a comprehension of the Islamic viewpoint of the crucifixion, it is imperative to undertake a meticulous analysis of certain *tafsirs* (Qur'anic exegesis and interpretation) pertaining to this subject matter. Within the realm of Islamic Sunni scholarship, al-Tabari is widely regarded as an eminent and esteemed scholar. The collection of Qur'anic tafsirs authored by him is widely acclaimed and regarded as providing an extensive comprehension of the Qur'anic text. In his scholarly analysis of Surah 4:157-158, al-Tabari provides a range of narratives and interpretations that continue to be utilized by contemporary academics in their efforts to elucidate the crucifixion of Jesus. In one of his narratives concerning this particular verse, al-Tabari provides an account detailing the circumstances wherein Jesus and his seventeen disciples found themselves encircled by the Jewish community within a dwelling

⁵⁵ Ibid.

⁵⁶ Ibid.

they had sought refuge in. Nevertheless, by a perceived act of supernatural intervention, the image of Jesus was bestowed upon each and every one of the disciples.⁵⁷ One of the disciples offered to assume the role of Jesus, this individual asserted his identity as Jesus, and owing to the divinely ordained similarity, the Jewish community remained unaware.⁵⁸ As a result, the individuals in question was apprehended, and subjected to the crucifixion.⁵⁹

Al-Tabarsi, a prominent Shi'ite scholar, provides a narrative that aligns with the Sunni perspective of the occurrences surrounding Jesus' crucifixion. Although there are discrepancies between his story and that of al-Tabari, the notion persists that Jesus was not subjected to crucifixion.⁶⁰ According to al-Tabarsi, the Jews assembled in the vicinity of Isa and proceeded to inquire of him. Issa responded by stating Allah's disapproval for the Jewish community.⁶¹ Consequently, they approached him with the intention of killing him. However, Jibril, an angel of the Allah, proceeded to escort him into the dwelling and subsequently elevated him to heaven. Judah, the leader of the Jewish community, dispatched a someone named Titanus with the intention of infiltrating the residence and executing Issa. Upon entering the premises, this individual failed to locate Isa. The form of Jesus was divinely put on Titanus by Allah. Upon venturing outdoors, Titanus was mistakenly identified by his acquaintances as Isa, resulting in his untimely demise and subsequent crucifixion.⁶² The perspective presented in this account

⁵⁷ Muhammad Ibn Jarir al-Tabari, *Tafsir al-Tabari: Jame' Al-Bayan An Ta'weel Ay Quran*, accessed Oct 15, 2023, <http://quran.ksu.edu.sa/tafseer/tabary/sura4-aya157.html>.

⁵⁸ Ibid.

⁵⁹ Ibid.

⁶⁰ Khouri, *The Crucifixion in the Qur'an*, 158-174.

⁶¹ Abu 'Ali al-Fadl ibn al-Hasan ibn al-Fadl al-Tabarsi, *Majma' al-Bayan fi Tafsir al-Qur'an*, vol. 3, (Beirut, Lebanon: Dar al-Murtadah, 2006), 194

⁶² Ibid.

diverges from the Sunni account, however it shares a common thread in asserting that Jesus was neither killed nor crucified, but rather was miraculously saved and ascended to heaven.

The primary concept conveyed in this verse is that the Christian claim regarding the crucifixion of Jesus is a misrepresentation. One of the main contenders for the claim that the Christian assertion of the Crucifixion is a misrepresentation is Ahmed Deedat, a Sunni Muslim apologist. In his book, "*Crucifixion or Cruci-fiction?*" Deedat, delves into an analysis of the events surrounding the crucifixion and resurrection of Jesus. Originally designed as a pamphlet, Deedat subsequently enlarged his work into a book in order to disseminate his insights derived from his research. It is worth noting that Deedat's approach deviates from the conventional reliance on the Qur'anic narrative, as he largely relies on the Bible to support his assertions and goals. The main aim of Deedat's work is to provide a comprehensive understanding to the general reader regarding the events that unfolded in the life of Jesus subsequent to his crucifixion. His literary composition serves as an expansion of the widely recognized Swoon Theory or Apparent Death Theory, which proposes that Jesus endured the crucifixion and remained in a condition of unconsciousness after being taken down from the cross. According to this idea, it is posited that Jesus experienced a subsequent return to consciousness while still within the confines of his tomb, hence obviating the necessity for a miraculous resurrection. This viewpoint poses a challenge to fundamental Christian doctrines like the divinity of Jesus Christ and the notion of a savior who is eternal. Deedat's idea, despite facing opposition from other apologists and evangelicals, maintains its appeal among persons who prefer the Swoon theory as a preferred explanation for Jesus' crucifixion, as opposed to alternative explanations.

The Ahmadiyya sect also offers an alternative viewpoint, asserting that Jesus did not perish on the cross, but rather migrated to India with the aim of preaching to the lost tribes of

Israel. To the Ahmadiyya Jesus is viewed as a prophet of Allah who was sent to the Jews and thus could not have died on the cross for two reasons. Firstly, he was sent by Allah on a mission and Allah would not let him die before this mission is completed.⁶³ Also, since the Jews were dispersed, his death on the cross would mean that he did not reach all of them thereby failing to fulfill his mission from Allah.⁶⁴ Deedat's perspective of the crucifixion is predominantly based on his biblical understanding, whereas the Ahmadiyya rely on a range of literature originating from their society.⁶⁵ Deedat argues that the insertion of the spear into Jesus' side was a pivotal factor in his deliverance. Based on the proposed idea, it is posited that Jesus, who was exhausted and had compromised blood circulation as a result of crucifixion, underwent a revival of blood flow and subsequent regaining of consciousness upon the insertion of a spear into his side, so inducing bloodletting.⁶⁶ Scholars such as Deedat, who offer different interpretations of the crucifixion event, have gained considerable support within the Muslim community.

Shabir Ally, also a Sunni Muslim apologist apologist who possesses expertise in the field of Religious Studies, subscribes to this view. Ally argues that inside the Qur'an, the term "crucifixion" denotes a method of execution, deviating from the conventional portrayal of being hung on a cross.⁶⁷ He posits that the Gospel narratives may not correctly depict the extent of the penalty.⁶⁸ In similar fashion Zafar Harris, from the Ahmadiyya sect, examines in his article titled

⁶³ Ahmad Najib Burhani, "The Ahmadiyya and the Study of Comparative Religion in Indonesia: Controversies and Influences," *Islam and Christian-Muslim Relations*, 25: no 2 (2014): 141-158.

⁶⁴ Ibid.

⁶⁵ Simon J. Joseph, "Jesus in India? Transgressing Social and Religious Boundaries," *Journal of the American Academy of Religion* 80, no. 1 (2012): 161-99.

⁶⁶ Deedat, *Crucifixion or Cruci-Fiction?*, 46.

⁶⁷ Shabir Ally, "What Does the Quran REALLY Say About the Crucifixion of Jesus?," *Let the Quran speak*, January 13, 2016. YouTube video, 5:13, <https://www.youtube.com/watch?v=FxJEZI8Tp5s>.

⁶⁸ Ibid.

"*Demystifying Islam*," various aspects pertaining to Jesus and his crucifixion. He focuses particularly on elucidating the Qur'anic perspective on Jesus' role as a messenger to the children of Israel. Harris posits the notion that Jesus could not have died of the cross because the Hebrew scriptures says that anyone that is put on a tree as punishment is cursed but Jesus is not cursed, hence he could not have died on the cross.⁶⁹ Harris reinforces this notion by incorporating additional theories, such as the substitution theory, which proposes that a disciple of Jesus assumed his position on the cross.⁷⁰ The presence of several perspectives, such as those put forth by Ahmed Deedat, Shabir Ally, and Zafar Harris, serves as a demonstration of the complex and numerous interpretations that exist in current Islamic scholarly discussions on the crucifixion of Jesus. These questions encompass theological, historical, and scriptural aspects, hence stimulating continuous intellectual and theological dialogues.

According to Khaled M. Abou El Fadl, Jesus, prior to his ascension to heaven as described in Islamic tradition, gathered his twelve disciples in a house. He addressed his followers, stating that some among them would disbelieve in him multiple times despite having initially believed.⁷¹ Jesus then asked which disciple would be willing to assume his appearance, be sacrificed in his stead, and attain the esteemed position designated for him by the divine.⁷² The youngest disciple initially volunteered, but Jesus instructed him to remain seated. Repeating the inquiry, the same young disciple stood up once more, prompting Jesus to declare him as the

⁶⁹ Harris Zafar, *Demystifying Islam: Tackling the Tough Questions*. (Lanham, Maryland: Rowman & Littlefield, 2014), 153.

⁷⁰ Ibid.

⁷¹ Khaled Abou El Fadl, *The Great Theft: Wrestling Islam from the Extremists*. (New York: Harper San Francisco, 2005), 82.

⁷² Ibid.

chosen one.⁷³ Subsequently, the selected disciple underwent a transformation to resemble Jesus, while Jesus himself ascended to heaven. Subsequently, the Jewish authorities apprehended the disciple who bore a striking resemblance to Jesus, subsequently executing him and crucifying him.⁷⁴

This statement affirms the belief in the ideology that a disciple of Jesus replaced him and took his place on the cross. Overall, it still enforces the idea that is carried in the Qur'an that Jesus was not crucified. The Muslim camp evidently recognizes the historical existence of Jesus and admits his status as a divinely inspired figure. However, their acceptance of Jesus' significance is limited in scope when compared to Christian worldview. The dissemination of the Christian message, which asserts that Jesus underwent crucifixion and was thereafter raised by God after three days, encounters diverse perspectives in Islamic scholarship. These Islamic claims bear resemblance to the Gnostic gospels, which presented unorthodox narratives about Jesus' teachings and crucifixion. Upon considering the assertions put forth by the Muslim party, a substantial body of evidence may be discerned regarding their beliefs pertaining to the Swoon Theory.

In a nutshell the significance of these *tafsirs* and opinions is in their role as corroborating evidence for the Qur'anic claim that Jesus did not die through crucifixion. The proponents of the Swoon Theory find additional support for their case within this Islamic context.

Chapter Two

The Islamic and Naturalist Perspectives of the Swoon Theory

In this chapter, we shall investigate the Swoon Theory from an Islamic point of view, examining the Qur'anic verse that asserts that the Jews neither killed nor crucify Jesus (Surah

⁷³ Ibid.

⁷⁴ Ibid.

4:157–159). The Swoon Theory has received support from a significant number of Muslim academics as an explanation for the crucifixion and subsequent death of Jesus on the cross. Many renowned Muslims, including Mohammed Din, held the belief that although Jesus was crucified, he was able to survive the experience of being crucified. He defends his position by arguing that Jesus did not hang on the cross for a long enough period of time for him to be considered dead.⁷⁵ In addition, Ahmed Deedat used the same line of reasoning that Din did when he explains that the oozing of blood from the side of Jesus was a sure sign of the fact that he did not fully die.⁷⁶ He further asserts that, the body of Jesus was given to one of his devoted disciples, and rather than being buried in the regular cemetery, he was placed in a chamber in the side of a rock that had been particularly built for the purpose.⁷⁷ This chamber was more like a hall than a place for burial. The argument is that it would possibly be quite airy and comfortable enough to aid in recuperation.⁷⁸ This chapter will also explore the naturalistic origins of the Swoon Theory, which have been utilized to bolster Islamic claims regarding the crucifixion and death of Jesus. In addition to drawing upon the Qur'an and other Islamic scholarly sources, Muslims frequently reference naturalist scholars who advocate for the plausibility of the Swoon Theory.

To provide a more comprehensive analysis of the Swoon Theory, it is important to evaluate the genesis and underlying principles that contributed to its development. The genesis of the Swoon Theory can be attributed to two primary schools of thinking. One perspective is the Islamic viewpoint, while the other is the naturalistic explanation proposed to elucidate the purported miracle of resurrection. The fundamental motivation behind the development of this

⁷⁵ Din, *The Crucifixion in the Koran the Moslem Point of View*, 25.

⁷⁶ Deedat, *Crucifixion or Cruci-Fiction?* 59–63

⁷⁷ Ibid.

⁷⁸ Ibid.

theory was to provide a response to the Christian doctrine and belief surrounding the miraculous resurrection of Jesus Christ. Christianity asserts that Jesus transcends the status of a mere mortal or prophetic figure. In the context of Christianity, it is believed that he is the divine son of God. Hence, if he died by crucifixion and was subsequently resurrected, as he had previously asserted, this would serve to validate the Christian assertions about him. The Swoon Theory seeks to rectify this notion. From an Islamic standpoint, the objective is to validate the assertion made in the Qur'an that Jesus was not killed or crucified.

The Islamic Arguments for the Swoon Theory

One of the main Islamic scholars to argue this theory as an explanation for the crucifixion was Mohammed Din. Din argued that in relation to the crucifixion, Jesus did not actually die on the cross but rather experience a death like coma after which he subsequently emerged and recovered.⁷⁹ Din referred to biblical scriptures to buttresses his point. He argued that according to Mark 15:44 the death of Jesus was rather swift. One of his main contentions was that for someone who had been executed by crucifixion his death was so quick that even Pontius Pilate was astonished.⁸⁰ The only explanation for this in the view of Din was that Jesus was not actually dead. Din insisted that the physical decomposition of the corpse would have been the only indicator of death in Jesus' comatose state on the cross.⁸¹ In this view it would be illogical to accept that Jesus died since this was not seen. This premise has been and is still widely used by skeptics and critics today to buttress the notion that Jesus did not actually die on the cross.

⁷⁹ Din, *The Crucifixion in the Koran the Moslem Point of View*, 25.

⁸⁰ Ibid., 26.

⁸¹ Ibid.

To explain what happened after the crucifixion of Jesus on the cross, Din opines that Jesus regained consciousness in the tomb.⁸² To buttress this he points out that the making of the tomb would allow air which made it possible for Jesus to survive.⁸³ Earthquakes, which were common in the day could also account for the rolling away of the stone making the exit of Jesus possible.⁸⁴ Din argues that considering these circumstances, the Swoon Theory is highly probable. Ahmed Deedat echoes Din's arguments as an explanation for the crucifixion of Jesus. Just like Din, Deedat relies on biblical passages to argue his point. One of the main verses he uses is John 19:31-34, ESV,

Since it was the day of Preparation, and so that the bodies would not remain on the cross on the Sabbath (for that Sabbath was a high day), the Jews asked Pilate that their legs might be broken and that they might be taken away.³² So the soldiers came and broke the legs of the first, and of the other who had been crucified with him.³³ But when they came to Jesus and saw that he was already dead, they did not break his legs.³⁴ But one of the soldiers pierced his side with a spear, and at once there came out blood and water.

Deedat, affirms the view that “the oozing of blood from the side of Jesus was a sure indication of the fact that He was alive. . . The body of Jesus was handed over to a loving disciple of His and instead of being buried in the common graveyard was put in a specially prepared chamber in the side of a rock which was more like a hall than a place for burial.”⁸⁵ Most people that believe in the Swoon Theory appear to think that Jesus was able to survive the crucifixion because of a Christian plot. For instance, Din states that, “In all post-crucifixion appearances Jesus is found concealing and hiding as if He feared being discovered.”⁸⁶ This comment appears to argue that

⁸² Din, *The Crucifixion in the Koran the Moslem Point of View*, 25.

⁸³ Hill, *The Physical Death of Jesus Christ*, 2.

⁸⁴ Ibid.

⁸⁵ Deedat, *Crucifixion or Cruci-Fiction?* 59–63.

⁸⁶ Din, *The Crucifixion in the Koran the Moslem Point of View*, 26.

the disciples seemed to be hiding something. Barbara Thiering asserts that Jesus was able to escape from the tomb with the help of his disciples after regaining consciousness. The idea here seems to be that there is more to the biblical assertion about the crucifixion and resurrection of Jesus than meets the eye.

Although there are different variations of the theory, Islamic scholars who argue this theory seem to agree on two major points: the first Jesus dying more rapidly than other crucifixion victims suggests that he was still alive when he was taken down from the cross.⁸⁷ The second is that the blood and water that flowed from his side demonstrated that he had not died when the spear punctured his side.⁸⁸ Although the concepts put out by swoon theorists seem incredibly captivating and interesting, it has been argued that they are rarely supported by medical and historical facts.⁸⁹ The contention is that swoon theorists frequently downplay the seriousness of Jesus' physical condition before being crucified, a crucial aspect to comprehending the circumstances surrounding his death.

Naturalistic Explanations of the Swoon Theory

Heinrich Paulus, an 18th century German theologian and critic of the Bible, was among the early proponents of this theory. Paulus dedicated his life to providing rational and naturalistic interpretations of biblical themes and beliefs. Paulus put up the contention that the phenomenon of miracles can be rationalized through the lens of the theory of misperception.⁹⁰ Noting that assertions of miracles are merely a result of a misinterpretation of actual events. Regarding the

⁸⁷ Ibid., 25.

⁸⁸ Ibid.

⁸⁹ Gary R. Habermas, "The Late Twentieth-Century Resurgence of Naturalistic Responses to Jesus' Resurrection." *Trinity Journal* 22, no. 2 (Fall, 2001): 191.

⁹⁰ Hill, *The Physical Death of Jesus Christ*, 2.

concept of resurrection, Paulus arrived at the deduction, following an examination of several scientific and naturalistic theories, that Jesus did not truly die on the cross but rather entered a death-like state, from which he later emerged and was restored.⁹¹ Paulus utilized biblical verses as evidence to support his argument. He suggested that, based on the biblical passage Mark 15:44, the demise of Jesus occurred expeditiously.⁹² The primary argument put forth by Paulus was that despite being subjected to crucifixion, Jesus' demise occurred with such rapidity that it even surprised Pontius Pilate.⁹³ According to Paulus, the sole rationale for this phenomenon is that Jesus was not dead. Paulus maintained that the sole indication of Jesus' death in his vegetative condition on the crucifixion would have been the physical disintegration of his body.

In his perspective, it would be irrational to embrace the notion of Jesus' demise due to the absence of empirical evidence. The aforementioned proposition continues to be extensively employed by skeptics and critics in contemporary discourse, serving to reinforce the contention that Jesus' death on the cross did not occur. Paulus postulated that subsequent to the crucifixion of Jesus on the cross, Jesus experienced a revival of consciousness within the confines of the tomb.⁹⁴ Additionally, he highlights that the construction of the tomb facilitated air circulation, hence enabling his survival.⁹⁵ Earthquakes, a phenomenon frequently observed at that period, could also explain the displacement of the stone, thereby facilitating the departure of Jesus.⁹⁶

⁹¹ Ibid.

⁹² Ibid.

⁹³ Ibid.

⁹⁴ Ibid.

⁹⁵ Ibid.

⁹⁶ Ibid.

Paulus concurred that given these characteristics, the Swoon Theory emerges as a notion of considerable likelihood.

One contemporary historian who similarly arrived at the conclusion that the Swoon Theory presents a more convincing explanation for the resurrection is Barbara Thiering. One notable aspect of Thiering's argument is her reliance on scriptural verses as the foundation for her conclusions. One of the primary biblical passages employed by Thiering is Matthew 27:47-50. In regard to this passage of scripture, Thiering expressed the viewpoint that the vinegar offered to Jesus during his crucifixion may have been contaminated with poison.⁹⁷ She opines that although the typical onset of this poison's effects is delayed by several hours, Jesus' physical and emotional distress rendered him more vulnerable to its toxic properties, resulting in his prompt descent into a comatose condition subsequent to its administration.⁹⁸ According to Thiering's interpretation, Jesus managed to survive the effects of the crucifixion, potentially due to the ingestion of the poison, and subsequently evaded confinement within the tomb with assistance from his disciples.⁹⁹ One contention raised in relation to Thiering's argument concerning the Swoon Theory is that similar to the arguments put forth by many proponents of the Swoon Theory, Thiering's assessments are predicated upon a set of highly ambiguous assumptions.¹⁰⁰ The prevailing belief among proponents of the Swoon Theory posits that Jesus' survival of the crucifixion can be attributed to a purported conspiracy by his disciples and followers.¹⁰¹ The

⁹⁷ Barbara E. Thiering, *Jesus & the riddle of the Dead Sea scrolls: unlocking the secrets of his life story*. (San Francisco, CA: Harper, 1992).

⁹⁸ Ibid.

⁹⁹ Ibid.

¹⁰⁰ Hill, *The Physical Death of Jesus Christ*, 2

¹⁰¹ Ibid.

underlying notion posited is that the biblical affirmation of the crucifixion and resurrection of Jesus encompasses a deeper significance beyond initial observations.

Chapter Three

A Medical Examination of the Crucifixion

The focus of the third chapter will center on a comprehensive analysis of the crucifixion and subsequent death of Jesus on the cross, employing a medical perspective. It will further explore the medical, scientific, as well as the physiological viewpoint of the crucifixion of Jesus. A rigorous examination will be made into the circumstances that preceded the crucifixion, offering comprehensive analysis using medical terminology to clarify the intense physical pain experienced by Jesus before being nailed to the cross. The objective of this chapter is to elucidate the complex pathological factors that contribute to fatalities resulting from crucifixion. This encompasses the significant influence of scourging, bleeding, and dehydration, resulting in hypovolemic pain and fear. Moreover, it will analyze the ideas that Jesus, prior to his crucifixion, was in a profoundly weakened condition as a result of the intense physical abuse he suffered. The primary aim of this chapter is to assess the feasibility of survival following crucifixion by means of a thorough medical examination. In order to accomplish this objective, the chapter will actively interact with the preexisting corpus of scholarly medical discourse pertaining to the crucifixion.

Medical Discussions on the Crucifixion

In discussing the crucifixion, it is important to begin with the physical ordeal of Jesus prior to the cross. Jesus encountered his initial physical ordeal at the hands of the Roman soldiers during the preceding evening. According to Dr. Truman Davis, a highly esteemed medical authority specializing in the crucifixion, it has been documented that subsequent to Jesus'

apprehension, palace guards subjected him to the distressing acts of blindfolding, verbal abuse, spitting, and physical assault targeting his face.¹⁰² She further asserts that this initial experience served as a harsh initiation to the forthcoming physical challenge he was about to face.¹⁰³ Upon Jesus being sentenced to death, the initial phase involved the implementation of Roman flogging, which entailed the utilization of a *flagrum* whip consisting of leather straps infused with bone and lead particles.¹⁰⁴ Jesus underwent a process in which his garments were removed, and he was afterwards fastened to a stand.¹⁰⁵ It has been noted that at the outset, the whip's implanted shards would incise the dermis, resulting in hemorrhaging from the capillaries and veins within the integumentary system.¹⁰⁶

As the act of flogging persisted, the inflicted wounds progressed to the deeper layers of skeletal musculature, resulting in a significant outflow of arterial blood.¹⁰⁷ In accordance with Jewish legal principles, the practice of flogging was subject to a prescribed limit of forty lashes.¹⁰⁸ Conversely, Roman legal norms did not impose any comparable constraint on the number of lashes administered during floggings.¹⁰⁹ The extent of severity was contingent upon the disposition of the guard, and it is plausible that the pervasive anti-Semitic feelings among

¹⁰² Hill, *The Physical Death of Jesus Christ*, 2.

¹⁰³ *Ibid.*

¹⁰⁴ Retief and Cilliers, *The History and Pathology of Crucifixion*, 939.

¹⁰⁵ *Ibid.*

¹⁰⁶ *Ibid.*, 940.

¹⁰⁷ *Ibid.*, 939.

¹⁰⁸ *Ibid.*, 940.

¹⁰⁹ *Ibid.*

Roman troops may have exacerbated the level of violence.¹¹⁰ According to Retief and Cilliers, Jesus' shoulders, back, and legs were subjected to numerous strikes from the weighty whip. In the initial stage, the incision traversed the dermis, subsequently infiltrating the subcutaneous tissues, resulting in hemorrhaging from the capillaries and veins inside the dermis, and ultimately leading to arterial bleeding from the underlying muscular structures.¹¹¹ The lead spheres caused significant contusions that were further aggravated by successive impacts. The integumentary covering on his dorsal region had a fragmented arrangement, resulting in a conglomeration of lacerated and hemorrhaging biological material.¹¹²

The infliction of punishment was terminated upon the determination of the overseeing centurion that the victim was in a state of imminent death. The contempt exhibited by the Roman soldiers towards Jesus would result in his exclusion from any form of preferential treatment. The Roman soldiers' contempt for Jesus was clearly manifested by their following behaviors. They derided him by the act of adorning his shoulders with a cloak, presenting him with a counterfeit scepter, and fashioning a crown composed of thorns.¹¹³ The aforementioned actions, in conjunction with the preceding act of flogging, intensified the Jesus blood loss, particularly due to the forceful insertion of the crown into their head.¹¹⁴ The continuous and forceful physical aggression inflicted upon Jesus, who was regarded as a rebellious figure within the political landscape, would have brought him to the verge of incapacitation.¹¹⁵

¹¹⁰ Ibid.

¹¹¹ Ibid.

¹¹² Ibid.

¹¹³ Hill, *The Physical Death of Jesus Christ*, 2.

¹¹⁴ Bergeron, *The Crucifixion of Jesus*, 114.

¹¹⁵ Ibid.

While Jesus was eventually suspended on the cross, he would have experienced significant hemorrhaging and respiratory distress, leading to the buildup of carbon dioxide in his pulmonary system.¹¹⁶ The depletion of oxygen levels in his bloodstream would have resulted in the emergence of pericardial effusion and pleural effusion, which are distinguished by the accumulation of fluid around the heart and lungs, correspondingly.¹¹⁷ There exists a hypothesis suggesting that Jesus underwent a significant and troubling sensation in his thoracic region as a result of the accumulation of fluid within the pericardial sac, thereby exerting pressure on his myocardium.¹¹⁸ Based on an analysis of the available physical evidence, Bergeron posits that the principal determinant leading to the demise of Jesus was the occurrence of shock, in conjunction with trauma-induced coagulopathy (TIC).¹¹⁹

Investigations conducted on crucifixion victims reveals a strong resemblance between Jesus' physiological state during the crucifixion and that of an individual experiencing shock.¹²⁰ Jesus would have experienced symptoms consistent with dehydration, profuse sweat resulting from heightened anxiety, substantial blood loss, acute respiratory challenges, and presumably developed pericardial and pleural effusions, which disrupted the overall equilibrium of internal bodily fluids.¹²¹ Bergeron postulates that traumatic hemorrhagic shock is a distinct form of shock that could potentially have impacted Jesus.¹²² Hemorrhage is a commonly seen phenomenon that

¹¹⁶ Ibid.

¹¹⁷ Ibid.

¹¹⁸ Ibid.

¹¹⁹ Ibid.

¹²⁰ Ibid., 115.

¹²¹ Ibid.

¹²² Ibid.

contributes to a decrease in circulatory capacity, and there is a widely held belief that Jesus may have experienced this physiological state during the Crucifixion event.¹²³ This form of shock, characterized by tissue ischemia, systemic inflammation, and coagulopathy, has the potential to cause the dysfunction of several organ systems and eventual heart failure, eventually resulting in the mortality of the patient.¹²⁴

Brian S. Kauffman, shows a direct correlation between a patient's mortality and reductions in oxygen consumption in persons experiencing circulatory shock, akin to the association shown in the case of Jesus.¹²⁵ The drop in oxygen consumption observed during hypovolemic shock is believed to be a result of a concomitant reduction in oxygen delivery.¹²⁶ Shock is characterized by a decrease in circulatory volume and blood flow, resulting in an increased heart rate and constriction of vascular beds, which further worsens the drop in blood supply to biological tissues.¹²⁷ Tissue ischemia can lead to the occurrence of tissue edema, exacerbating the detrimental effects of hypoperfusion and thus diminishing the overall blood circulation.¹²⁸ In the absence of appropriate medical intervention, this particular ailment has the potential to result in enduring cellular malformation and the death of bodily tissues.¹²⁹ Ischemic tissue generates lactic acid and free radicals, resulting in localized toxicity and inflammation,

¹²³ Ibid.

¹²⁴ Ibid.

¹²⁵ Brian S. Kaufman, Eric C. Rackow, and Jay L. Falk, "The Relationship Between Oxygen Delivery and Consumption during Fluid Resuscitation of Hypovolemic and Septic Shock." *Chest* 85, no. 3 (March 1984): 336–40.

¹²⁶ Bergeron, *The Crucifixion of Jesus*, 115.

¹²⁷ Ibid.

¹²⁸ Ibid.

¹²⁹ Ibid.

hence impairing the regular functioning and longevity of erythrocytes.¹³⁰ The exacerbation of metabolic acidosis arising from tissue ischemia in the instance of Jesus would have been intensified by respiratory acidosis.¹³¹

The presence of excessive acid in the body, along with prolonged inadequate blood flow, as previously mentioned, could have led victims of crucifixion to an irreversible condition of shock, even when the most effective treatment approaches are employed.¹³² It is probable that Jesus would have subsequently encounter multi-organ system failure as a result of protracted ischemia.¹³³ In the event that ischemia occurs concurrently with coagulopathy, capillary leakage, or hypovolemia, there is a potential for swift mortality.¹³⁴ This particular manifestation of acute traumatic shock, distinguished by its irreversible nature, has the potential to result in mortality within a few hours, as exemplified by the astonishingly rapid death of Jesus on the cross.¹³⁵

An investigation conducted on the medical hypotheses regarding the causes of death in individuals subjected to crucifixion revealed the viability of death in crucifixion victims.¹³⁶ The study's findings indicated that the available data is insufficient to definitively ascertain the precise causes of death in cases of crucifixion throughout Roman times.¹³⁷ However, it can be

¹³⁰ Ibid.

¹³¹ Ibid.

¹³² Ibid.

¹³³ Ibid.

¹³⁴ Ibid.

¹³⁵ Ibid.

¹³⁶ Maslen and Mitchell, *Medical Theories on the Cause of Death in Crucifixion*, 188.

¹³⁷ Ibid.

established that individuals subjected to this form of execution did not survive.¹³⁸ The extant body of scholarly literature provides compelling evidence indicating that the likelihood of survival for persons who have been subjected to crucifixion is exceedingly improbable.

Specifically, to the case of Jesus a comprehensive analysis was conducted on a variety of medical literature in order to ascertain the findings pertaining to the crucifixion of Jesus. These are outlined in Table 1, as presented in the article “Medical Theories on the Cause of Death in Crucifixion,” by Maslen and Mitchell.

Table 1 A representative selection of medical hypotheses for the cause of death of Jesus, or crucifixion in general

Cause of Death	Background of Author	Reference
Cardiac rupture	Physician	Stroud, 1847
Heart failure	Physician	Davis, 1965
Hypovolaemic shock	Forensic pathologist	Zugibe, 2005
Syncope	Surgeon	LeBec, 1925
Acidosis	Physician	Wijffels, 2000
Asphyxia	Surgeon	Barbet, 1963
Arrhythmia plus asphyxia	Pathologist	Edwards, 1986
Pulmonary embolism	Haematologist	Brenner, 2005
Voluntary surrender of life	Physician	Wilkinson, 1972

¹³⁸ Ibid.

Did not die

Physician

Davies and Davies, 1991¹³⁹

Table 1 presents an extensive range of medical hypotheses pertaining to the origin of death in the context of Jesus or crucifixion in a broader sense. The text encompasses a variety of death causes put forth by professionals with varying medical expertise. The table displays a diverse array of possibilities put forth by medical experts, including physicians, surgeons, forensic pathologists, and a hematologist. The presence of diversity in this context is indicative of the intricate nature of the subject matter and the multitude of viewpoints that exist within the medical field. The table encompasses a range of references spanning from the nineteenth century through contemporary writings in the twenty-first century. This phenomenon underscores the persistent fascination and ongoing discourse surrounding the subject throughout the years. In contrast to the other medical explanations, the table reveals a distinct assertion by Davies and Davies, suggesting that Jesus did not die on the cross.

Davies and Davies argue that the head injuries, floggings, and beatings inflicted by the Roman centurions rendered Jesus debilitated and in a state of shock.¹⁴⁰ The aforementioned circumstances, in conjunction with reduced cerebral and cutaneous blood perfusion, resulted in a state of unconsciousness and a pallid complexion.¹⁴¹ Davies and Davies also referred to Jesus' final exclamation on the cross as a pronounced expiration approaching syncope.¹⁴² According to Davies and Davies, it is postulated that certain variables could have potentially led to the

¹³⁹ Maslen and Mitchell, *Medical Theories on the Cause of Death in Crucifixion*, 186.

¹⁴⁰ Margaret Lloyd Davies, and T.A Lloyd Davies, "Resurrection or Resuscitation." *Journal of the Royal College of Physicians of London* vol. 25,2 (1991): 167.

¹⁴¹ *Ibid.*

¹⁴² *Ibid.*

misinterpretation of Jesus' death by Roman centurions, the Jewish Sanhedrin, and others who witnessed the crucifixion.¹⁴³

Davies and Davies postulated that the removal of Jesus from the cross would have resulted in the restoration of blood circulation upon his placement on the ground, notwithstanding the limited supply of blood to the brain.¹⁴⁴ Subsequent exposure to lower evening temperatures could potentially induce hypothermia, hence perhaps safeguarding the brain and cardiovascular systems.¹⁴⁵ The idea posited by the Davies and Davies suggests that the maltreatment Jesus endured at the Praetorium may have been a contributing factor to his subsequent collapse, premature removal from the cross, and subsequent resuscitation.¹⁴⁶

Nevertheless, the table presents evidence indicating that a significant portion of the medical literature and professional community support the notion that Jesus died on the cross. It offers a comprehensive collection of medical theories proposed by a broad panel of professionals regarding the underlying factors contributing to the demise of Jesus. These explanations include cardiac rupture, heart failure, hypovolemic shock, syncope, acidosis, asphyxia, arrhythmia combined with asphyxia, pulmonary embolism, and even the notion of voluntary self-sacrifice. The presence of these divergent ideas serves to underscore the intricate and multifaceted nature of crucifixion as potential cause of death. The table's findings indicate that there exists sufficient evidence to substantiate the investigation into the post-crucifixion survivability of Jesus. The table functions as a visual representation of the many medical ideas pertaining to the cause of Jesus's death during crucifixion. It effectively showcases the range of opinions and perspectives

¹⁴³ Ibid.

¹⁴⁴ Ibid., 168

¹⁴⁵ Ibid.

¹⁴⁶ Ibid.

within the medical profession, underscoring the historical and scholarly importance of this subject matter.

Medical Theories on the Causes of Death in Crucifixion

To delve into the intricate medical hypotheses that aim to shed light on the circumstances surrounding the crucifixion of Jesus, conducting a comprehensive examination of both historical and modern medical literature is of utmost significance. Furthermore, it is crucial to thoroughly explore the varied viewpoints presented by physicians and biblical scholars. When evaluating the medical literature pertaining to the crucifixion of Jesus, it is crucial to acknowledge that the literature predominantly supports the notion that Jesus died on the cross.

William Stroud and the Ruptured Heart Theory

A medical professional, William Stroud, put up a notion known as the Ruptured Heart Theory, to account for the possible cause of the death of Jesus on the cross. This theory, established by William Stroud in the 19th century, offers an initial medical interpretation of the crucifixion event. Drawing from the narrative in the Gospel of John (John 19:34) which describes the flow of blood and water from Jesus' side upon being stabbed by a spear, Stroud postulated that the demise of Jesus can be attributed to heart rupture.¹⁴⁷ As per Stroud's explanation, the crucifixion subjected Jesus to severe stress and physical trauma, resulting in a cardiac rupture that ultimately led to his demise.¹⁴⁸ This theory occupies a prominent position in the historical medical analysis of the crucifixion, representing an early endeavor to establish a connection between the biblical narrative and a medical interpretation. Stroud's work bridges the

¹⁴⁷ William Stroud, *A Treatise on the Physical Cause of the Death of Christ*. (London: Hamilton & Adams, 1847), 153.

¹⁴⁸ *Ibid.*

domains of theology and medicine, illustrating the complex interplay between faith and empirical inquiry in understanding this profound event.

The Cardiovascular Collapse Theory

In distinction to Stroud's theory that focuses on the cardiac aspect, the contemporary idea of cardiovascular collapse has garnered significant recognition among researchers and medical practitioners. According to this argument, it is proposed that Jesus underwent a profound state of shock, ultimately resulting in his final demise.¹⁴⁹ The hypothesis posits that Jesus endured severe physical mistreatment, such as scourging, beatings, and crucifixion, which led to profound dehydration, a deteriorating bodily state, and acute sickness.¹⁵⁰ The convergence of these circumstances ultimately resulted in the occurrence of cardiovascular collapse.¹⁵¹ This concept is more congruent with the physiological and medical comprehension of how severe trauma can result in shock and death. Furthermore, it highlights the importance of the crucifixion procedure itself, acknowledging the profound levels of stress and trauma that Jesus would have experienced.¹⁵²

The crucifixion of Jesus holds significant importance in Christian theology and has elicited several interpretations, including medical hypotheses aimed at elucidating the underlying cause of death. The Ruptured Heart Theory, as posited by William Stroud, and the current Circulatory Collapse Theory are two notable medical hypotheses that have made significant contributions to the scholarly discourse. These theories not only serve to emphasize the historical

¹⁴⁹ Reid W. Litchfield, "The Search for the Physical Cause of Jesus Christ's Death," *Brigham Young University studies*, 37, no. 4 (1997): 99.

¹⁵⁰ *Ibid.*

¹⁵¹ *Ibid.*

¹⁵² *Ibid.*

and contemporary methodologies employed in reconciling faith and science, but also underscore the multidisciplinary character of comprehending significant historical and religious occurrences. These instances serve as a reminder that even occurrences of profound theological importance can undergo thorough academic investigation, thereby establishing connections between various domains of knowledge in the quest for comprehension.

Pierre Barbet on the crucifixion of Jesus

Pierre Barbet, a prominent French physician, put out a notable notion in regard to the crucifixion of Jesus that has garnered much attention from religious and medical circles alike. According to the proposed notion, it is suggested that Jesus intentionally loosened his muscles during the crucifixion in order to facilitate the inhalation required for pronouncing his final words, despite enduring considerable physical anguish and experiencing hypoxia resulting from tiredness.¹⁵³ Barbet's concept, which is based on extensive medical and anatomical knowledge, is intriguing for several compelling reasons. The preceding assertion underscores the complex nature of examining the crucifixion from a medical perspective, while simultaneously acknowledging its profound religious and historical significance. Barbet's hypothesis centers on the physiological elements associated with crucifixion, a mode of death renowned for causing severe bodily distress.¹⁵⁴

The preferred theory proposed by Pierre Barbet regarding the cause of death in the crucifixion of Jesus Christ centers on the notion of shock.¹⁵⁵ Barbet suggests that the death of Christ could perhaps be attributed to the occurrence of shock, which encompasses a range of

¹⁵³ Pierre Barbet, *A Doctor at Calvary: The Passion of Our Lord Jesus Christ as Described by a Surgeon*. (Harrison, N.Y: Roman Catholic Books, 1953), 123.

¹⁵⁴ Ibid.

¹⁵⁵ Ibid.

possible manifestations, each stemming from unique causes.¹⁵⁶ This analysis proposes that during the climax of Christ's crucifixion, various types of shock, including traumatic shock resulting from significant tissue damage and intense pain, hypovolemic shock caused by the loss of circulating fluids due to severe bleeding and dehydration, and cardiogenic shock resulting from the heart's inability to efficiently pump blood to essential organs, may have occurred.¹⁵⁷

Barbet's argument highlights the intricate nature of the crucifixion and the several physiological elements that perhaps had a role in Christ's eventual death.¹⁵⁸ This prompts a nuanced view of the multiple character of the crucifixion process, as it introduces medical and pathophysiological concerns that reflect the intense pain and physical damage experienced throughout this historical event.¹⁵⁹ By undertaking this endeavor, the theory serves as a means of connecting medical examination with theological explanations, so presenting a scholarly and thorough investigation of the plausible medical foundations of the crucifixion of Christ.

Forensic Pathology Inquiry into the Crucifixion

Frederick Zugibe, an esteemed forensic pathologist, made substantial contributions to the scholarly inquiry of the circumstances surrounding the crucifixion of Jesus by employing rigorous and innovative investigative techniques. The methodology Zugibe employed entailed the implementation of an extensive investigation, necessitating the involvement of volunteers possessing pre-established weights. These volunteers were deliberately positioned at designated angles in order to replicate certain elements associated with the act of crucifixion. The primary objective of this research was to conduct a quantitative assessment of the force applied to the

¹⁵⁶ Ibid.

¹⁵⁷ Ibid.

¹⁵⁸ Ibid.

¹⁵⁹ Ibid.

hands, while considering variables such as the utilization of foot restraints.¹⁶⁰ The experiments yielded significant insights into the physiological factors related to crucifixion, contributing greatly to the advancement of our comprehension of this historical occurrence.¹⁶¹ The utilization of forensic pathology by Zugibe within the framework of the crucifixion serves as evidence for the interdisciplinary character inherent in the examination of past occurrences.

The field of forensic pathology, which commonly focuses on the examination of the factors contributing to death, is employed in a unique and nontraditional fashion in this context, showcasing the versatility of scientific disciplines in tackling intricate historical inquiries. Zugibe's methodology in this instance facilitates the empirical investigation of the physical pressures and tensions endured by those who underwent crucifixion, thereby elucidating the potential causes that contributed to their demise. Zugibe's research has made a noteworthy addition by providing a quantification of the force exerted on the hands and feet of the persons involved in his study. In order to closely reproduce the conditions of crucifixion, Zugibe endeavored to utilize volunteers who possessed predefined weights and were positioned in a specific manner.¹⁶²

The application of scientific rigor facilitated a more precise comprehension of the physiological impact that crucifixion would have imposed on the human anatomy. Zugibe's research offers empirical data that supplements the historical and biblical narratives surrounding the crucifixion, so facilitating a more thorough understanding of this significant occurrence. The discoveries from this experiment have made notable contributions to the understanding of the

¹⁶⁰ Zugibe, *The Crucifixion of Jesus*, 111.

¹⁶¹ Ibid.

¹⁶² Ibid.

physiological elements associated with crucifixion. The analysis of Zugibe's research regarding the crucifixion of Jesus provides a thorough understanding of the profound suffering and bodily injury endured during this occurrence. The research findings strongly support the assertion that those who undergo crucifixion ultimately perish while affixed to the cross.

A Medical Analysis of Jesus' Crucifixion

The scholarly article, prepared by William Edwards and a team of physicians, and published in the *Journal of the American Medical Association*, presents a substantial contribution to the medical analysis of Jesus' crucifixion. Their endorsement of a synthesis of various views leads to a hypothesis that posits circulatory collapse, particularly hypovolemic shock and fatigue asphyxia, as the primary factors contributing to Jesus' death.¹⁶³ This explanation aligns with the mention in the Gospel of John regarding the effusion of water from the side of Jesus, commonly interpreted as symbolizing pericardial fluid. The suggested hypothesis, which centers on the occurrence of circulatory collapse and the compounded impact of hypovolemic shock and fatigue asphyxia, highlights the intricate nature of comprehending crucifixion from a medical perspective.

The act of crucifixion encompassed various aspects of execution, resulting in a diverse range of physiological reactions and ultimately leading to death.¹⁶⁴ The concept posits the significance of considering various elements while interpreting crucifixion, rather than reducing it to a singular cause of mortality.¹⁶⁵ The significance of medical expertise in comprehending

¹⁶³ Edwards, *On the Physical Death of Jesus Christ*, 1455.

¹⁶⁴ Ibid.

¹⁶⁵ Ibid.

historical events is underscored by the proposition that circulatory collapse resulting from hypovolemic shock and fatigue hypoxia may have played a pivotal role.

Their provided analysis presents a more tangible and empirically supported viewpoint about the crucifixion, enabling a more accurate understanding of the physiological obstacles and processes that ultimately resulted in mortality. This methodology makes a valuable contribution to the continuing scholarly discourse surrounding the topic of crucifixion, so enhancing our comprehension of this intricate historical occurrence. The hypothesis put forth by William Edwards et al., positing that circulatory collapse, encompassing hypovolemic shock and fatigue asphyxia, was a crucial factor in the demise of Jesus during crucifixion, constitutes a noteworthy advancement in the medical comprehension of this form of execution.¹⁶⁶

Retief and Cilliers on the Medical Dimensions of Roman Crucifixion

Retief and Cilliers undertook a study that provided a thorough examination of the historical and clinical dimensions of Roman crucifixion, thereby illuminating the complex characteristics inherent in this merciless form of capital punishment.¹⁶⁷ The research conducted by the authors highlights the intricate interaction between historical, physiological, and cultural elements that influenced the outcome of crucifixion, thereby questioning the belief that death was not an inevitable outcome of this kind of execution. Retief and Cilliers' work establishes the intricate amalgamation of factors that impact mortality in the context of crucifixion. The act of crucifixion was not a standardized or universally applicable type of capital punishment. It encompassed a variety of factors, including the physical state of the individual being executed,

¹⁶⁶ Ibid.

¹⁶⁷ Retief and Cilliers, *The History and Pathology of Crucifixion*, 938–941.

the length of time they were exposed to the elements, and the precise techniques employed throughout the crucifixion process which points to the fact that survival was improbable.¹⁶⁸

The significance of the prohibition put on Roman guards, which mandated their attendance at the crucifixion site until the time of death,¹⁶⁹ cannot be overstated. The implementation of this decree insured that the Roman authorities retained jurisdiction over the procedure of execution, while also introducing a heightened level of intricacy in determining the timing of death.¹⁷⁰ This observation emphasizes the historical Roman tradition of employing crucifixion as a kind of public exhibition, intended to communicate a deterrent message, while also shedding insight on the political and cultural aspects associated with this particular method of capital punishment.¹⁷¹

The Probability of Surviving the Crucifixion

Analyzing the crucifixion from a medical point of view it has been assessed and concluded that survival was highly improbable. The cause of death resulting from crucifixion is a multifaceted pathology, involving several factors such as pre-crucifixion scourging, the infliction of hemorrhoids, dehydration, and subsequent hypovolemic agony and fear.¹⁷² The time frame for death to occur commonly ranges from six hours to four days.¹⁷³ Nevertheless, one of the main factors that is believed to contribute to the outcome of death is increasing hypoxia resulting from compromised respiratory function, this would potentially result in an exacerbated state of

¹⁶⁸ Ibid.

¹⁶⁹ Ibid.

¹⁷⁰ Ibid.

¹⁷¹ Ibid.

¹⁷² Bergeron, *The Crucifixion of Jesus*, 115

¹⁷³ Ibid.

hypoxemic shock, leading to anoxia.¹⁷⁴ Death was commonly believed to be often caused by cardiac arrest, which was induced by vasovagal reactions.¹⁷⁵ Additionally, death may be brought about by abrupt anoxia, severe pain, physical trauma, and fractures of major bones.¹⁷⁶

In the events involving Jesus before to his crucifixion, the severe beatings inflicted upon him would have brought him to a state of near fatality. There is a prevailing opinion that Jesus' shoulders, back, and legs were repeatedly subjected to the forceful impact of a weighty whip, which initially incised solely the dermal layer.¹⁷⁷ Subsequently, when the repeated strikes persisted, they penetrated farther into the subcutaneous tissues, resulting in an initial seepage of blood from the capillaries and veins located inside the skin, and ultimately causing forceful arterial bleeding from the arteries situated within the underlying muscles.¹⁷⁸ The initial impact of the small lead projectiles resulted in the formation of significant contusions, characterized by their considerable size and depth, which are then aggravated by consecutive strikes, leading to their rupture.¹⁷⁹ Ultimately, the integumentary layer located in the posterior region would be suspended in elongated strips, resulting in a whole region that is indistinguishable due to the presence of lacerated and hemorrhaging biological material.¹⁸⁰ In the cases of Roman

¹⁷⁴ Ibid.

¹⁷⁵ Ibid., 114.

¹⁷⁶ Ibid.

¹⁷⁷ Ibid.

¹⁷⁸ Ibid.

¹⁷⁹ Ibid.

¹⁸⁰ Ibid.

crucifixions, as Jesus was subjected to, the cessation of the beating occurred when the centurion in authority deemed that the prisoner is in a state of imminent demise.¹⁸¹

In an experimental investigation aimed at stimulating the crucifixion, a group of medically fit student volunteers consented to being suspended by their wrists, while their respiratory and circulatory functions were continuously monitored. Within just a six minute timeframe, the tidal respiratory volumes of the participants exhibited a reduction of around seventy percent, accompanied by a nearly fifty percent decrease in blood pressure and a doubling of pulse rates.¹⁸² Significant cardiorespiratory breakdown became apparent, with respiration being solely diaphragmatic after twelve minutes and there were indications of impaired consciousness.¹⁸³ The use of intermittent weight-bearing for a duration of twenty seconds resulted in a notable enhancement in cardiovascular collapse among the participants.¹⁸⁴ The experiment was limited to a duration of thirty to forty minutes due to the emergence of wrist pain, which consequently required the experiment to be terminated.

The examination of medical theories pertaining to the crucifixion of Jesus yields a comprehension of the intense agony and physical harm sustained during this event. The prevailing consensus in the medical literature, encompassing both historical and contemporary sources, overwhelmingly affirms the veracity of the claim that individuals subjected to crucifixion ultimately succumb to death while nailed to the cross. Several hypotheses, like the Ruptured Heart Theory and the Circulatory Collapse Theory, have been proposed to elucidate the various etiologies of these fatalities. The analysis of medical professionals and experts in biblical

¹⁸¹ Ibid.

¹⁸² Retief and Cilliers, *Physiognomy in Graeco-Roman Times*, 941.

¹⁸³ Ibid.

¹⁸⁴ Ibid.

studies indicates that many circumstances, such as circulatory collapse, hypovolemic shock, and tiredness asphyxia, likely had a role in the death of Jesus. The results of this study are consistent with the narrative in the Bible regarding the discharge of water from Jesus's side, which has generally been understood to refer to pericardial fluid.

The likelihood of survival during crucifixion, as evaluated from a medical perspective, is exceedingly unlikely due to various conditions such as scourging, dehydration, and progressive hypoxia. The duration of the dying process is subject to variation, but commonly spans from several hours to a few days. The significance of vasovagal responses and intense pain in relation to cardiac arrest highlights the inhumane nature of this method of execution. The intense physical assaults suffered by Jesus before to his crucifixion would have resulted in a condition approaching near-fatal levels. The depiction of the vigorous impact of the whip and its resultant effects on the body vividly portrays the physical anguish endured by the individual. The rapid decrease in respiratory volumes, blood pressure, and the onset of altered awareness within a few timeframes underscore the significant physiological strain experienced by the body during this challenging situation. In summary, the amalgamation of medical theories and historical sources offers a comprehensive viewpoint about the crucifixion of Jesus, ultimately leading to the conclusion that the likelihood of his survival is relatively minimal.

Chapter Four

The Crucifixion and the Roman Empire

This chapter will go into the crucifixion event as it transpired within the historical context of Jesus' day, specifically during the governance of the Roman Empire. The practice of crucifixion had been refined by the Romans over a span of five centuries until its discontinuation by Constantine I in the fourth century AD. The chapter will address the fact that during the Roman crucifixion procedure, the individual subjected to this form of execution was not just

affixed to the cross by the use of nails. Rather, the victim would first undergo a severe beating, followed by the imposition of carrying their own wooden beam, which would subsequently serve as the platform for their crucifixion. Following the crucifixion, it was a customary practice to deliberately fracture the knees of the crucified individual in order to speed up dying.

The attending Roman guards were permitted to depart from the location solely upon the death of the victim, and it was discovered that they would cause death through intentional fractures of the tibia and/or fibula, or by subjecting the victim to asphyxiation using a smoldering fire built at the base of the crucifix. The primary aim of this chapter is to provide a historical context for the crucifixion. This will establish a framework within which to analyze the crucifixion as it transpired in the historical context of Jesus' time.

The Historicity of the Crucifixion

During ancient times, crucifixion was widely recognized as a method of capital punishment that was notorious for its exceptionally cruel and dishonorable nature. The historical roots of this practice may be traced back to the Assyrians and Babylonians, with the Persians adopting and implementing it in a systematic manner from the sixth century BC.¹⁸⁵ The practice of crucifixion was perpetuated by Alexander the Great, who introduced it to the eastern Mediterranean territories in the fourth century BC. The Phoenicians facilitated its adoption in Rome during the third century BC.¹⁸⁶ The Romans gradually refined the practice of crucifixion over a period of 500 years, ultimately leading to its discontinuation by Constantine I in the fourth century AD. During the period of ancient Rome, crucifixion was predominantly employed as a means of punishment for specific groups, including slaves, disgraced soldiers, Christians, and

¹⁸⁵ Retief and Cilliers, *Physiognomy in Graeco-Roman Times*, 938.

¹⁸⁶ *Ibid.*

foreigners.¹⁸⁷ The phenomenon of death, which generally occurs over a span of six hours to four days, has been ascribed to a diverse spectrum of clinical conditions. Significantly, it was imperative for the Roman guards responsible for supervising the crucifixion procedure to be present until the prisoner had succumbed.¹⁸⁸

In the first century, the region of Palestine experienced a significant occurrence of crucifixions, primarily directed against individuals who rebelled against Roman rule, with a specific focus on those of Jewish descent.¹⁸⁹ It is worth mentioning that the execution of Jesus Christ has been suggested as a potential reaction to accusations of provoking Rome, so associating him with figures such as Zealots and other individuals involved in political activism.¹⁹⁰ According to Kuhn, a considerable majority of individuals who were crucified, despite being labeled as robbers, were likely driven by political aims rather than being authentic criminals.¹⁹¹ The crucifixion procedure underwent changes and advancements as time progressed. During the Persian era, crucifixions were initially performed using trees or basic pole structures, rather than the more elaborate cross-shaped apparatus.¹⁹² Although the Romans occasionally employed trees, referred to as *infelix lignum*, or posts, known as *crux simplex*, they eventually adopted many standardized cross designs, such as the X-shaped cross, also known as *crux*

¹⁸⁷ Ibid.

¹⁸⁸ Ibid.

¹⁸⁹ Ibid.

¹⁹⁰ Ibid.

¹⁹¹ Heinz-Wolfgang Kuhn, Die Kreuzesstrafe während der früher Kaiserzeit. In: Haase W, ed. *Aufstieg und Niedergang der Römischen Welt*. Band 25.1, Hrsg. Berlin: Walter de Gruyter, 1982: 648-793.

¹⁹² Edwards, *On the Physical Death of Jesus Christ*, 1455.

decussata.¹⁹³ Nevertheless, the most commonly observed arrangements consisted of the well-known Latin cross *crux immissa* and the *Tau cross crux commissa*.¹⁹⁴

The application of the stripes typically transpired prior to the crucifixion of the victim, whereas the affixation of the patibulum occurred subsequent to the victim's immobilization through either nailing or binding.¹⁹⁵ A commemorative plaque referred to as the *titulus* was securely attached to the vertical post positioned above the individual who was subjected to the execution.¹⁹⁶ At times, a wooden structure designed to provide support for the buttocks, commonly known as a *sedile* or *sedicula*, was affixed to the stipes, in rare instances, a footrest, referred to as the *suppedaneum*, was also incorporated.¹⁹⁷ As per the legal framework of ancient Rome, those who were sentenced to death, including the method of crucifixion, were mandated to endure the process of scourging prior to their execution. The act of scourging, with the exception of certain exemptions granted to women, Roman senators, and soldiers (except cases of desertion), was an exceptionally harsh torture.¹⁹⁸ The process entailed the removal of the individual's clothing, followed by their restraint to a vertical structure, and subsequent exposure to flagellation across several regions of the body, including the back, buttocks, legs, and occasionally the anterior aspect, facilitated by one or two military personnel referred to as *lictores*.¹⁹⁹

¹⁹³ Retief and Cilliers, *Physiognomy in Graeco-Roman Times*, 939.

¹⁹⁴ *Ibid.*

¹⁹⁵ *Ibid.*

¹⁹⁶ *Ibid.*

¹⁹⁷ *Ibid.*

¹⁹⁸ Edward Peters, *Torture: An Expert's Confrontation with an Everyday Evil*. (University of Pennsylvania Press, 2018), 35.

¹⁹⁹ Retief and Cilliers, *Physiognomy in Graeco-Roman Times*, 939.

In Roman legal practice, the act of scourging was not subject to any limitations in terms of intensity, whereas in Jewish legal tradition, it was specifically confined to a maximum of forty lashes.²⁰⁰ The extent of the scourging was largely determined by the lictores' discretion, with the primary objective being the extreme incapacitation of the individual, resulting in deep lacerations, intense suffering, and excessive bleeding.²⁰¹ On numerous occasions, individuals subjected to this merciless procedure experienced episodes of syncope, while untimely demise was a prevalent consequence.²⁰² Afterwards, the individual who had been sentenced was exposed to verbal harassment, and then required to carry the *patibulum*, which was fastened over their shoulders, to the location where the execution would take place.²⁰³ The victims who had been sentenced were accompanied by a contingent of Roman guards, under the command of a centurion, to the designated location for their execution.²⁰⁴ These guards maintained their presence until the moment of the condemned individual's death. The procession commenced with a herald leading the path, accompanied by spectators lining the route who subjected the condemned individual to ridicule and scorn.²⁰⁵

Jesus and the Roman crucifixion

The practice of crucifixion in ancient Rome was distinguished by distinct aspects that rendered it particularly cruel. In the case of Jesus, it can be seen that the extent of his suffering prior to his crucifixion surpassed that experienced by the majority of victims, hence augmenting

²⁰⁰ Ibid., 940.

²⁰¹ Edwards, *On the Physical Death of Jesus Christ*, 1455.

²⁰² Ibid.

²⁰³ Retief and Cilliers, *Physiognomy in Graeco-Roman Times*, 940.

²⁰⁴ Ibid.

²⁰⁵ Ibid.

the probability of a comparably expeditious demise.²⁰⁶ In his work titled, “The Resurrection Factor,” Josh McDowell conducts a thorough analysis of the crucifixion of Jesus, so exposing the lack of plausibility of Jesus’ survival on the cross. According to McDowell, the Romans demonstrated a high level of proficiency in their techniques and implemented several measures to minimize the mortality rate among individuals subjected to crucifixion.²⁰⁷ In the instance of Jesus, a series of comprehensive measures were implemented, encompassing six trials (three conducted by Jewish authorities and three by Roman authorities), the positioning of a substantial stone to obstruct the entrance of the tomb, the deployment of a Roman guard, the application of a Roman seal, and, naturally, the act of crucifixion.²⁰⁸ The act of crucifixion, due to its intrinsic severity, exhibited a fatal capacity, and the crucifixion of Jesus was characterized by notably harsh conditions.

In accordance with historical practices, after to being sentenced and subjected to physical punishment, Roman captives were obligated to convey their *patibulum*, a horizontal beam weighing 110 pounds, to the designated location for execution.²⁰⁹ This happened in the case of Jesus as per the Gospel records. Due to the tremendous debilitation inflicted by the flogging, Jesus found himself unable of completing the arduous trek without assistance. An individual who happened to be passing by was enlisted to assist the subject, thereby emphasizing the severity of his injuries.²¹⁰ It has been argued that Jesus was already on the brink of death prior to the application of any nails. Historical documentation has long indicated that the Romans employed

²⁰⁶ Ibid.

²⁰⁷ Edwards, *On the Physical Death of Jesus Christ*, 1455.

²⁰⁸ Ibid.

²⁰⁹ Ibid.

²¹⁰ Ibid.

a method of affixing criminals to the cross by the use of binding, rather than employing nails.²¹¹ However, the unearthing of the skeletal remains of a juvenile Jewish male probably named Yehohanan ben Hagkol, who was subjected to crucifixion during the Roman Era, in the 1960s within what is now Israel, provided evidence of the utilization of iron nails.²¹² The elongated spikes were employed to securely affix the lower extremities of the victim in question to the vertical posts, while simultaneously attaching their wrists to the horizontal beam.²¹³

It is probable that the nails penetrated the space between the carpal bones of the wrist, resulting in intense discomfort and nerve impairment. Jesus had experienced the infliction of flogging, the placement of a crown made of thorns onto his head, and was presently affixed to the cross, enduring intense agony and significant bloodshed. In order to comprehend the significance of this, it is imperative to consider the magnitude of the suffering he endured prior to crucifixion. Jesus' flesh, which had already been shredded, would have experienced friction against the coarse wooden cross, as he endured excruciating feelings in their limbs. This was due to the alternating pressure exerted by the nails piercing their wrists and feet. Throughout the course of the day, Jesus would have experienced a gradual accumulation of muscle weariness, which would intensified his suffering and rendered the act of lifting his own body extremely arduous.²¹⁴

²¹¹ Maslen and Mitchell, *Medical Theories on the Cause of Death in Crucifixion*, 186.

²¹² Joseph Zias, and Eliezer Sekeles, "The Crucified Man from Giv'at Ha-Mivtar: A Reappraisal," *Israel Exploration Journal* 35, no. 1 (1985): 22–27.

²¹³ *Ibid.*

²¹⁴ *Ibid.*

Historical Allusions to the Crucifixion of Jesus

In his historical account titled "*Antiquities of the Jews*," Josephus, a prominent Jewish historian, documented in approximately ninety-three AD that Jesus was subjected to crucifixion during the tenure of Pilate.²¹⁵ Josephus portrayed Jesus as a sagacious individual who garnered a following from both Jewish and Gentile adherents, ultimately leading to his condemnation and eventual crucifixion.²¹⁶ The chapter, commonly referred to as the Testimonium Flavianum, is widely acknowledged by modern scholars as having seen subsequent alterations but nevertheless preserving an initial central mention of Jesus's crucifixion under the authority of Pontius Pilate.²¹⁷ According to James Dunn, there exists a widespread agreement among scholars on the authenticity of the crucifixion reference in the Testimonium.²¹⁸

During the early second century, Tacitus, a highly esteemed Roman historian, added an additional reference to the crucifixion of Jesus. In the literary composition titled, *The Annals*, which was composed 116 AD. Tacitus provided an account of the persecution endured by Christians under the rule of Nero.²¹⁹ Tacitus corroborated the historical fact that the execution of Jesus was ordered by Pilate.²²⁰ The present excerpt possesses significant historical reliability as an independent Roman account supporting the crucifixion of Jesus, a perspective commonly supported by scholars.²²¹

²¹⁵ Flavius Josephus, *Jewish Antiquities XII*. 256. Trans. L. H. Feldman. (Cambridge Mass.: Harvard University Press, 1981).

²¹⁶ Ibid.

²¹⁷ Ibid.

²¹⁸ James D. G. Dunn, *Jesus Remembered*. (Grand Rapids, Mich: W.B. Eerdmans Pub., 2003), 141

²¹⁹ Tacitus, *Annals*. 1, 61, 4. Trans. C. H. Moore, (Cambridge, Mass.: Harvard University Press, 1979).

²²⁰ Ibid.

²²¹ Ibid.

The crucifixion of Jesus is alluded to in an early non-Christian context, as evidenced by Mara Bar-Serapion's letter to his son. This letter was written sometime after AD seventy-three but prior to the third century AD.²²² The authorship of this epistle, which lacks any discernible Christian motifs, is commonly ascribed to an individual believed to be neither of Jewish nor Christian affiliation.²²³ This correspondence establishes a connection between retribution and the unfair treatment experienced by three notable individuals: Socrates, Pythagoras, and the esteemed ruler of the Jewish community, commonly referred to as the wise king.²²⁴ While some historians declare with strong certainty that the allusion to the execution of the king of the Jews corresponds to the crucifixion of Jesus, others express a degree of skepticism, given the ambiguity within the reference.²²⁵

When confronted with the extensive body of historical data pertaining to the crucifixion the argument that suggests Jesus did not die on the cross but rather fell into a state of unconsciousness and subsequently regained consciousness, encounters significant obstacles. There exists a substantial body of historical records, originating from sources both within and without the Christian faith, that establishes a strong basis for the conviction of Jesus's crucifixion. The confluence of these several sources, in conjunction with medical and historical factors, substantially diminishes the plausibility that Jesus did not die on the cross. From a historical perspective, it is noteworthy that the comprehensive depictions of the crucifixion procedure, which encompass the act of piercing Jesus's side with a spear as documented in the gospels and

²²² Andreas J. Köstenberger, Leonard Scott Kellum, and Charles L. Quarles, *The Cradle, the Cross, and the Crown*. (Nashville, Tennessee: B&H Publishing Group, 2009), 110.

²²³ Ibid.

²²⁴ Ibid.

²²⁵ Ibid.

other relevant sources, are consistent with the customary methods seen during Roman crucifixions. This convergence of evidence serves to strengthen the story surrounding Jesus's death. In addition, it is worth noting that the crucifixion of Jesus is corroborated by historical sources of non-Christian origin, as noted earlier.

The amalgamation of historical accounts from both Christian and non-Christian sources provides a robust historical framework for the crucifixion of Jesus, so significantly limiting the plausibility of the argument that Jesus did not die by crucifixion. The act of crucifixion was a merciless kind of capital punishment renowned for its effectiveness in inducing mortality by means of a confluence of variables including suffocation, trauma, and systemic organ dysfunction. The infliction of physical pain upon Jesus during the process of crucifixion, encompassing the scourging, the placement of the crown of thorns, and the crucifixion proper, would have resulted in a considerable debilitation of his physical condition. The proposition that Jesus may have endured the injuries, regained consciousness within the tomb, and then manifested to his disciples as resurrected is deemed historically implausible. Islamic scholars and proponents of the Swoon Theory overlook the historical details leading up to Jesus being crucified. Din and Deedat overlook the possibility that Jesus' suffering before the crucifixion may have contributed to his early death on the cross, when they claim he did not spend enough time on it to ensure his death.

It can be further asserted that the Roman soldiers who were tasked with the supervision of the crucifixion process possessed a high level of proficiency in the art of execution. The historical records place significant emphasis on the soldiers' verification of Jesus's demise prior to permitting the removal of his body from the cross. The act of piercing Jesus's side with a spear, as shown in the Gospel accounts, can be seen as a customary Roman procedure employed to

confirm mortality. According to medical professionals, the presence of both blood and water emanating from the wound suggests a discernible segregation between the serum and blood constituents, which is indicative of a post-mortem event. The historical evidence presented is consistent with the accounts found in the Gospel narratives, so refuting the idea that Jesus only had a temporary loss of consciousness while on the cross. The conventional interpretation of Jesus's crucifixion is supported by a combination of historical, scriptural, and medical evidence, which collectively diminishes the plausibility and persuasiveness of the argument that Jesus did not die on the cross.

Conclusion

In the course of this thesis, a number of comprehensive objectives were meticulously taken into account to provide guidance for the study. This study sought to examine the feasibility of Jesus' survival following the crucifixion. The underlying objective of this study is to facilitate readers, irrespective of their religious affiliations, in recognizing the crucifixion and death of Jesus of Nazareth, in terms of the medical and historical data, is viable.

The study uses a holistic perspective, highlighting the multifaceted nature of the factors that cumulatively contributed to the death of Jesus, rather than ascribing it exclusively to one specific symptom. Moreover, the study highlights the profound agony and distress experienced by Jesus, including challenges in respiration, torment, and bodily illnesses such as hemorrhage and shock. Based on scriptural records, it is certain that Jesus experienced the entirety of the crucifixion procedure, which involved being subjected to Roman whipping resulting in significant bodily harm to His body. Following this, he had to bear his cross prior to his crucifixion, as delineated in the Gospels and in Roman historical accounts. The Roman manner of death might be characterized as lacking in mercy and simplicity, instead being marked by

brutality, horror, bloodshed, and deep sadness. Despite the affirmation made by the Roman governor Pilate that he found no justifiable reason for crucifying Jesus, this particular mode of death was inflicted upon him, as it was originally intended for individuals of his social standing.

The thesis set out to provide the tools necessary to assess why, from a historical and medical standpoint, it is impossible for Jesus to have survived the crucifixion. The study provides a helpful resource for persons who have a genuine desire to comprehend the life of Jesus but may meet difficulties in reconciling the narrative with the scriptural account. The study aims to assist these folks in reaching well-informed judgments. The examination of the medical aspects surrounding the crucifixion event is not characterized by a lack of clarity or relevance to the historical context. The idea here is that in analyzing the crucifixion of Jesus, worked hand in hand to ascertain the viable of this event.

It is noteworthy to acknowledge that within the realm of Islamic academia, a prevailing conviction exists that Jesus did not die on the cross: nevertheless, a paradox of opinions arises within the teachings of individuals who uphold this viewpoint. In Deedat's scholarly discourse, an intriguing proposition is put out, positing that the act of stabbing may have played a role in the revival of Jesus. A crucial aspect of the discourse revolves around the composition of the bodily fluids, including plasma and blood, that were released from Jesus during the crucifixion. Based on recognized medical criteria, it can be inferred that these effusions indicate the initiation of the dying process rather than serving as an indication of rejuvenation. Therefore, from a historical and medical perspective, the very points that Islamic apologists like Din and Deedat present to support the validity of the Swoon Theory invalidate their case. Moreover, the proposition that Jesus may have withstood the crucifixion, accompanied by the piercing of his side, and thereafter survived needs a protracted duration of rigorous medical attention. It is

crucial to acknowledge that the provision of medical care for Jesus's wounds and the cavity in his side was not easily available during the specific historical period under consideration. This was due to the lack of provisions by the Roman authorities for convicted Jewish captives. Given the Gospel narratives that validate Jesus's progression through these perilous circumstances, the subsequent investigation centers on the plausibility of his resurrection from the sepulcher.

In this particular situation, Jesus experienced significant physical damage, prolonged lack of nutrition and hydration, and had open wounds that made him particularly vulnerable to severe infection while he was within the tomb. Given the prevailing conditions, it is quite unlikely that Jesus possessed the physical strength required to move the substantial stone barrier of the tomb, unless one were to consider the possibility of supernatural intervention. In addition to the difficulties associated with escaping or the theft of the body, Roman sentinels were strategically positioned at the entrance of the tomb in order to protect its sacredness. Islamic scholarship generally asserts the notion that Jesus managed to survive the crucifixion; however, a medical examination of the evidence overwhelmingly favors the indisputable certainty of his death. Jesus was unequivocally unable to free himself from the consequences of the crucifixion without resorting to supernatural means.

A comprehensive analysis of the New Testament, Greek language and medical information pertaining to the crucifixion was undertaken by esteemed medical authorities, namely W. D. Edwards, W. J. Gabel, and F. E. Hosmer. The study provided a detailed account of the series of events involving Jesus of Nazareth, including his trials under both Jewish and Roman authorities, the infliction of severe lacerations through flogging, significant blood loss, and his eventual demise due to hypovolemic shock and fatigue asphyxia.²²⁶ The primary cause of

²²⁶ Edwards, Gabel, and Hosmer, *On the physical death of Jesus Christ*, 1455-1463.

his death is mostly attributable to the physiological disturbances caused by crucifixion, which greatly impede regular respiratory function.²²⁷ The conclusive demise of Jesus is established by the penetration of a soldier's spear into his side, providing support for contemporary medical analyses that validate Jesus' state of lifelessness upon being taken down from the cross.²²⁸

The Swoon Theory has also been strongly contested by forensic pathologist Frederick T. Zugibe based on medical evidence. Zugibe emphasizes the intense agony and death resulting from the extended duration of the elongated spikes that pierced Jesus' feet during the act of crucifixion.²²⁹ According to Zugibe, it is posited that the aforementioned pain would have become apparent within the first hour of being crucified.²³⁰ This would have resulted in significant swelling and subsequent infection during the following days, ultimately rendering Jesus physically incapable of assuming an upright position or engaging in ambulation for a substantial period of time.²³¹ The estimated duration of this incapacitation is believed to be at least one month, if not more.²³² Zugibe asserts with conviction that the feasibility of survival in such circumstances would have been unviable, as there were no medicinal interventions available during that time period that could effectively mitigate the intense agony or induce a profound state of slumber to mimic death.²³³

The Swoon Theory, albeit a captivating hypothesis, has been argued to be insufficient as a comprehensive explanation for the crucifixion of Jesus when considering the perspectives put

²²⁷ Ibid.

²²⁸ Ibid.

²²⁹ Zugibe, *The Crucifixion of Jesus*, 161-162.

²³⁰ Ibid.

²³¹ Ibid.

²³² Ibid.

²³³ Ibid.

forth by medical and historical researchers. The proposition of a naturalistic and Islamic alternative to the conventional interpretation of Jesus' death encounters substantial obstacles and contradictions when examined via historical and medical lenses. From a historical perspective, the available evidence found in the New Testament and other relevant historical records seem to provide compelling indications that Jesus' demise occurred through crucifixion. The convergence of witness testimony, the conduct exhibited by the Roman troops, and the later observance of funeral customs collectively provide compelling evidence of Jesus' demise.

It can be argued that the Swoon Theory is incongruent with the historical backdrop of crucifixion, which was widely recognized as a merciless and lethal method of capital punishment. The Swoon Theory faces substantial challenges from a medical perspective. The act of crucifixion was a method of capital punishment specifically devised to inflict severe agony and ultimately result in the demise of the one subjected to it. The act of scourging, followed by the process of nailing to the cross, coupled with the severe physical suffering inflicted, would have rendered the chances of surviving quite remote. It had been argued that in the event that Jesus had hypothetically endured the crucifixion, the Swoon Theory lacks an explanation for how he could have manifested signs of life subsequent to sustaining extensive injuries and in the absence of medical intervention.

The Swoon Theory fails to provide a satisfactory explanation for the subsequent occurrences documented in the New Testament, including the vacant tomb and the post-crucifixion sightings of Jesus by his disciples. These occurrences hold significant importance within the Christian story and pose difficulties for the proposition that Jesus just fainted on the cross. Given the historical, physical, and theological factors at play, it might be argued that the swoon argument lacks the same degree of persuasiveness and plausibility as the conventional

interpretation of Jesus' crucifixion and subsequent resurrection. Examining diverse viewpoints and theoretical frameworks is crucial in scholarly discourse. However, the preponderance of empirical data indicates that the crucifixion and subsequent resurrection of Jesus have profound historical and religious foundations.

The research that has been undertaken for this thesis has highlighted a number of topics on which further research would be beneficial. It is crucial to acknowledge that the medical evidence provided was analyzed and presented within the time allocated for this thesis. Future studies might, for example, look into more medical evidence concerning crucifixion victims.

There are a number of additional areas for further research that have been highlighted by the studies undertaken for this thesis. This could include longitudinal studies, which could be conducted as part of a comprehensive thesis to carefully track the development of interpretations and attitudes towards the Swoon Theory within Islamic scholarship throughout different historical periods. This method has the potential to provide a dynamic viewpoint that clarifies the adaptive changes of religious ideas throughout history. Incorporating these methodological suggestions into future studies on the crucifixion and death of Jesus in the Qur'an and Islamic scholarship has the potential to advance scholarly comprehension, reduce disparities between different fields of study, and significantly contribute to promoting meaningful interfaith discussions.

Subsequent scholarly inquiries could thoroughly examine the historical context of the swoon theory within Islamic scholarship. Researchers are encouraged to thoroughly investigate the various interpretations and discussions related to this thesis throughout different historical periods, considering the ever-changing theological viewpoints and cultural impacts. It is necessary to thoroughly examine the complex details that define the reception and influence of

the Swoon Theory in relation to different Islamic traditions and schools of thought in order to develop a comprehensive understanding of this theological idea.

A recommendation for further studies could be to integrate interdisciplinary cooperation among theologians, historians, and medical experts in order to enhance the quality of research in this particular field. By facilitating a dialogue between Islamic studies experts and medical historians and practitioners, scholars can enrich the investigation of the swoon hypothesis with a thorough and all-encompassing viewpoint. This interdisciplinary effort has the potential to improve the division between religious stories and scientific investigation, therefore enabling a more detailed understanding of the events being examined.

A thorough examination could be conducted into Qur'anic passages related the crucifixion, which involves a detailed investigation of the linguistics and textual aspects. An extensive inquiry into the understanding and rendering of crucial verses has the potential to shed light on the many nuances of interpretation that have influenced various viewpoints in Islamic academia. It is crucial to include comparative studies that examine different translations and commentary to understand how linguistic choices affect the nuanced interpretation of the narrative.

In conclusion, the thesis posits that Jesus died on the cross and did not survive the trauma of crucifixion as the Swoon Theory suggests. This conclusion is supported by the overwhelming medical considerations elucidated in this study. Given the extensive body of medical data pertaining to the crucifixion, it is untenable to posit the notion that Jesus just "swooned" while on the cross. The intense physical suffering he experienced before his crucifixion, along with the subsequent cardiovascular issues, would make survival unattainable. The Swoon Theory, unfortunately, exhibits a tendency to neglect the severity of Jesus' bodily ailments prior to the

crucifixion and sometimes fail to consider the medical implications of being nailed to a cross. Therefore, it can be argued that these ideas are lacking in empirical evidence to support their plausibility as explanations for the events that transpired during the crucifixion. Based on the evidence offered, it is evident that the crucifixion of Jesus is an incontrovertible event. The consequences of his death and later resurrection undoubtedly carry significant repercussions and continue to stimulate controversial discussions. However, it is undeniable that his death is an indisputable reality.

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