An Unexpected Leader: A Psychiatric Analysis of King Saul

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King Saul is arguably the most perplexing personality in the book of Samuel. The first king of Israel and the only king who preceded the Davidic dynasty, Saul faced challenges in his public leadership and in his personal life. In both these forums, Saul drastically fluctuates between bold, assertive, and courageous and meek, timid, and afflicted. These conflicting descriptions of Saul suggest that perhaps he was not simply a human with changing moods but that he had a genuine metabolic disorder. It is important to keep in mind that Saul, like many other personalities in Tanach, was an agent of G-d en route to completing a mission. Still, being part of a divinely ordained plan does not dictate that every person in that plan is perfect. In fact, a person’s flaws are often an integral part of the role that he is best fit to play. Therefore, Saul’s deficiencies do not deem him corrupt, even if they led him to act unfavorably. It is possible, then, to entertain the idea that Saul, a righteous man, was afflicted with some sort of psychiatric illness.

Scholars in the fields of both Judaic studies and medicine have proposed that Saul’s behavior matched that of a patient with clinical epilepsy. Epilepsy, a neurological disorder characterized by excessive cortical nerve cell activity and episodes of seizures, has been called the “holy disease,” because it stems from malfunctioning in the holy site called the head and was thought to be caused by supernatural forces [1]. This description points to the possibility of Saul having epilepsy, as his negative states were attributed to a “ruach ra’ah,” a seemingly supernatural cause (1 Samuel 16:14). However, epilepsy is a physiologic disease with a genetic basis. Thus, in the absence of a family history of mental disorders, the cause for the “evil spirit” may not be hereditary, which implies Saul was not epileptic [2].

Paranoia has also been proposed as a possible explanation for Saul’s peculiar behavior. Saul’s acute fear of David’s usurping of his kingship led him to pursue David frantically. Professor Joshua O. Leibowitz, a renowned doctor with expertise in the history of medicine, pointed out that “the anomalies in the behavior of King Saul belong to the domain of psychiatry.” He cited specifically the “vigor reactions and changes” in Saul’s nature [3]. The pathology that afflicted Saul is characterized by intense responses and drastic fluctuations in behavior and character. While paranoia may fall into the domain of psychiatry, it does not primarily feature the changes that Leibowitz referenced.

The same criteria, namely Saul’s extreme variation in behavior, rule out any possibility of his negative thinking being a result of major depressive disorder. Depression could explain Saul’s frequent melancholy but cannot explain Saul’s moments of heightened mood and hyperactive and aggressive interpersonal reactions. Therefore, there is likely a psychiatric disorder better suited to describe Saul’s behavior.

A less accepted but potentially more accurate explanation is bipolar 1 disorder. According to Maimonides, the biblical phrase ruach ra’ah refers to all sorts of melancholia. In describing a woman afflicted with melancholia of this sort, Maimonides notes that one cannot rely on periods of calmness in these people because, although they have periods of sanity, one can never be sure whether the periods of insanity are over [3]. Similarly, Saul’s attacks of melancholia are introduced in the text with the words “whenver” or “on the morrow” (1 Samuel 16: 16, 23). Saul was not constantly afflicted; rather, he faced sadness from time to time [2]. This periodic melancholy is an essential part of the cycle that bipolar patients experience.

Bipolar disorder is not defined solely by episodes of depression, similar to the ones Saul faced, but also includes the patient experiencing unforeseen and extreme manic or mixed episodes. During a manic episode, the patient can exhibit symptoms such as inappropriate behavior, bizarre speech, and an irritable mood [4]. The best example of one of Saul’s manic episodes is when he was once again afflicted with a ruach ra’ah. Saul raved incoherently (vayitnabeh) in the house and repeatedly attempted to kill David by hurling a spear at him (1 Samuel 18). Shortly after attempting to kill him, Saul appointed David as a military officer and proceeded to give him his daughter in marriage. Just a little while later, the ruach ra’ah came upon Saul, and he returned to his attempt to murder David (1 Samuel 19:9). Within just a few verses, Saul’s treatment of David oscillated between life threatening and emphatically encouraging.

These incidents, which occur consecutively, are symptomatic of a manic episode. King Saul exhibited a heightened irritable mood and a decreased need for sleep as he was tormented by a ruach ra’ah. He also showed aggression, disturbed thought patterns, and possibly even delusions due to the intense jealousy he felt toward David, all of which are signs of a manic episode [2]. Such an episode lasts for weeks and can include alternating periods of normal functioning and successful interpersonal relationships [4]. For instance, Saul’s appointing David as officer and handing him his daughter is a conciliatory action that he made amidst other contradictory gestures. The juxtaposition of a wide range of behaviors portrays Saul as cycling through both the sadness and mania that defines bipolar disorder.

In retrospect, it is possible to see the duality in Saul’s persona appear earlier in his life. The text introduced Saul as a timid young boy, searching for lost donkeys, when Samuel arrived to inform Saul of his destiny to be king of Israel. In this incident, Saul was portrayed as sensitive in his search for his donkeys [5]. Saul also appeared slightly self-conscious, as evidenced by his reluctance to share with his uncle what transpired - that he had been anointed king - while searching for his donkeys (1 Samuel 10:12). Finally,
when Samuel was ready to anoint him, Saul hid among the kelim, or vessels (1 Samuel 10:22). In his youth, Saul was shy and somewhat vulnerable.

Once Saul assumed kingship, the personality he displayed was almost completely unrecognizable. He took bold actions in mobilizing the nation against the Ammonites. Threatening his nation to unite, Saul distributed a cut up oxen to the tribes (1 Samuel 11). Later, stubborn in his own plans, Saul refused to submit to Samuel's instructions to wait for him before responding to the threat of the Plishtrim (1 Samuel 13). These bold and assertive gestures were contrary to the actions of Saul in his younger years.

Perhaps it is these disparate personas that lived at odds inside Saul and that converged in an inner conflict later in his life. Were an emotionally disturbed person to assume leadership today, physicians would immediately recognize this behavior as abnormal. Bipolar disease is often said to rob a person of his true self. Does the same axiom apply, however, in a case like Saul's, where one is unaware that an entirely different “self” has taken charge of him? Without the sophisticated knowledge and wide array of pharmacological treatments that modern medicine has to offer, Saul and his family were left to cope with the mood disorder, even if it meant complicating the narrative of the Jewish people as a result. Nevertheless, Saul's mental challenges did not add only to the complexity of the development of the Jewish nation but enhanced its depth and multidimensionality as well.

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References: