

## Book Reviews

**Susan C Lawrence**, *Charitable knowledge: hospital pupils and practitioners in eighteenth-century London*, Cambridge History of Medicine series, Cambridge University Press, 1996, pp. xiv, 390, £45.00, \$69.95 (0-521-36355-1).

Over the past fifteen years, many aspects of the eighteenth-century British medical world have received the attention of historians. To this already sizeable and growing literature, Susan C Lawrence's book *Charitable knowledge* makes an impressive addition. What is distinctive about her contribution is its imaginative synthesis of many strands of development and its larger aim of demonstrating why institutions, individuals, and activities in London should be part of the historical analysis of the development of modern medicine. Claimants for French pre-eminence in this process may have to temper their thinking.

Lawrence explores how clinical teaching, one of the hallmarks of modern medical education, became institutionalized in the major charitable hospitals of London by the second decade of the nineteenth century. This was no sudden transformation. One of the strengths of Lawrence's book is that it shows how the gradual accretion of changes in hospital functioning, practitioners' quest for status, and educational resources over a period of more than a century led to the major hospitals becoming recognized as sites for the production of doctors and medical knowledge. Her book also contributes to an understanding of how a unified medical profession, another distinguishing component of modern medicine, was achieved in England. What is especially interesting in the evolution of London as a centre of medical teaching and of professional life is that the city differed from Edinburgh, Paris, and other European cities in the eighteenth century in that it had no university at which an intending practitioner might obtain a medical degree. This suggests that in

analysing the development of clinical teaching more generally less emphasis on curricular reform may be appropriate.

The book is divided into two major sections after an introductory chapter laying out the themes. The time span covered is the long eighteenth century of 1700 to 1820. Part I tackles institutions and education. Lawrence first describes the purpose and organization of the general London hospitals—Guy's, St Bartholomew's, St Thomas's, the Westminster, St George's, the London, and the Middlesex—and their practitioners. Treating the hospitals as a group makes for useful contrasts and comparisons. She then tackles the evolution of the medical corporations of London. As elsewhere, the formal tripartite division of practitioners into physicians, surgeons, and apothecaries in England was becoming blurred during this period for reasons having to do with changing educational goals and delineation of responsibilities. The two informative chapters that follow cover walking the wards and London lecturing. Surprises for the reader include Lawrence's documentation of the large and increasing numbers of hospital pupils and the multiple opportunities for educational experiences, especially in public and private lectures and demonstrations, for the intending practitioner. Lawrence's research in newspapers on commercial ventures in teaching shows nicely the valuable material that can be gleaned by medical as well as cultural historians from such resources.

Part II of the book investigates the changing medical community and the generation of medical knowledge in three chapters. Lawrence posits several stages of transition. She delineates 1700 to 1760 as the period of the gentleman scholar. Then, between 1760 and 1815, the hospital practitioners in London gain special prominence in the profession. The emphasis on analysis of individual clinical cases in the first sixty years of the eighteenth century gives way to medical knowledge of broader scope. There are many factors, some

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subtle, in the process by which the doctor comes to see not the patient but the disease. In the course of her discussion, Lawrence illuminates the changing significance of case history taking—an underexplored subject; the appearance of medical societies and journals in Britain; the evolution of physician/surgeon relationships and approaches to medical knowledge; and the underpinnings of experimental medicine.

Lawrence's book is based on extensive research in manuscript and print sources conducted over at least a decade. The result amply demonstrates the worth of this investigative endeavour. The sophisticated narrative not only displays the author's erudition and awareness of historical concerns, but is enhanced by well-presented quantitative information. For those who wish to see an example of the maturation of medical history, this book is recommended.

**Caroline Hannaway**, Baltimore, Maryland

**Mark Jackson**, *New-born child murder: women, illegitimacy and the courts in eighteenth-century England*, Manchester University Press, 1996, pp. ix, 206, £35.00 (0-7190-4607-6).

This is a thoughtful and well-documented study of a subject interesting to medical and legal historians, to social historians, and to historians of women and gender. At the centre of Jackson's analysis lies the notorious 1624 Act to prevent the Destroying and Murthing of Bastard Children. This statute placed cases of suspected new-born child murder on a special evidentiary footing, greatly easing the burdens of prosecution by creating, in the author's words, a legal presumption whereby a woman who had concealed the death of her illegitimate child was presumed to have murdered it (p. 33). Jackson deals intelligently with the complex consequences of the Act, taking as his own evidentiary base an unusually complete set of archival materials from the records of the Northern Circuit

Assize. His clear guide through the maze of English legal tribunals and procedures puts the evidence into context in a way that helps the reader to appreciate both the interpretive possibilities of the materials as well as their limitations. At times this concern for precision makes the exposition somewhat laboured—a tendency which makes Jackson's occasional forays into more expansive explanatory and interpretive modes (e.g. the new cultural history, via Thomas Laqueur's discussion of humanitarian narrative, and gender history, represented by Ludmilla Jordanova's work on the feminized corpse and the masculinized medical gaze) seem out of place. Jackson's integration of recent literature in English legal history is more successful, and lends his work an interdisciplinary richness often absent in works of medical history.

Jackson's analysis is informed throughout by his critique of the two interpretive frameworks that have dominated histories of infanticide (or, as he prefers, new-born child murder): the Whiggish narrative of progressive reformism, and the scientific claims of criminological positivism. Jackson's battle with the first of these twin perils is most productive, especially in his concluding chapter, which examines the long campaign to repeal the 1624 statute (finally achieved in 1803, under the auspices of the conservative jurist Lord Ellenborough) in order to show the reformist projects' profoundly ambiguous lineage. His observation that one of the consequences of Ellenborough's 1803 Act—due to a misreading of its provisions by local officials responsible for drawing up indictments—was the false creation of concealment as a substantive crime on its own account, is particularly revealing of the dangers inherent in assuming a linear reformist logic.

Jackson's critique of positivist criminology is also salutary, though in the end not equally satisfying. By proposing to focus not on the commission of crimes by criminals but on the processes whereby certain women were suspected of, and prosecuted for, murder (p. 15) Jackson seeks to use court records not to measure the incidence of infanticide, but