

ideologically. It also suggests a moral opposition of “healthy” and “diseased” poets: according to Plato the virtuous civic poets in contrast to dangerous, self-seeking aggrandisers—the Homers and Agathons—who were crowd-pleasers. The Socratic distinction puzzled Romantic thinkers, not least those aligned with German versus British schools of thought. But this particular spatial frame permits Wallen to configure his Romantics eclectically by moving back and forth from ancient Greece to northern Europe, and then from city to country, where he will disentangle “health” and “disease” over three decades (1785–1815).

There are six chapters. The first focuses on ‘Lyrical health in Wordsworth and Coleridge’ and considers the possibility that spatial relations leading to a city of health where “they hold clear and definite relations to one another” (p. 15) sets the stage for the literary-medical analogy. Things alter in the second chapter dealing with “Coleridge’s scrofulous dejections”: this is an omnibus tour through Coleridge’s medical case history describing his health, or lack of it, especially under the weight of Thomas Beddoes whom Coleridge had read and abjured. Recently there has been a wave of discussion about this medically ailing “scrofulous Coleridge”: especially by Neil Vickers and this reviewer’s investigations (in collaboration with David Haycock) among others. Chapter three focuses on Thomas Beddoes and the “Excitability Doctor”: John Brown himself of Brunonian fame; gazing at their narratives and rhetorics more than their ideas, always with a vigilant eye to the likelihood that human health depends on factors beyond narrowly conceived medical concerns. The fourth chapter—more original than its predecessors—captures “a secret excitement” in Coleridge’s spiritualism and materialism: his search for, and disappointment over, a physical Brunonian imagination on which to base his aesthetics. The German philosopher Friedrich Schelling’s “medical singing school” is centre-stage in the fifth chapter, which describes how Schelling was also steeped in Brown’s clutches, later liberated himself, and finally imagined a Homeric-style “singing school” as the utopian hope for a new age of

science transcending the old Cartesian mind-body dichotomy. Finally, Wallen’s curtain closes on “electromagnetic orgasm and history outside the city”: a survey of the rise of German organic philosophy as a by-product of an electromagnetic history of the world that conduces towards a “city beyond health”.

No conclusion or epilogue follows and none may be needed: Socratic Greece hovers over most pages, if indelibly, as does radical Doctor Brown’s “excitement philosophy” and this may be sufficient. The book can appear disunified but demonstrates as an entity how these topics continue to consume (literally) Romantic cultural historians today who aim to exhaust their epoch’s rich resources for the cultural understanding of human consciousness. Yet they seem unable: so rich is their Romantic epoch sandwiched between high Enlightenment—about which so much has been written along these lines—and the Victorian consolidation. Where would one search for further Romantic examples? In the conjunction of medicine and politics, while new, post-revolutionary, rhetorics swamped the British Isles after the 1790s? In the new enthusiastic religions as the century’s clock ticked forward from 1799 to 1800? Or in post-revolutionary psychiatry, sexology, and the new “moral therapy” of the 1820s? These and many others offer deep troughs, and Wallen’s “fields of disease”, with its 1755 Ordinance Survey map of Spittle Fields on the dust jacket, contributes to this growing library.

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**Douglas A Wissing,** *Pioneer in Tibet: the life and perils of Dr Albert Shelton*, New York and Basingstoke, Palgrave Macmillan, 2004, pp. xvii, 334, illus., \$29.95 (1-4039-6328-2).

The American medical missionary, Dr Albert Shelton, was the David Livingstone of his day, renowned across America as a Christian pioneer in a “heathen land”. After qualifying as a doctor in 1903, Shelton and his wife joined the Foreign Christian Missionary Society. They soon set out

for the mission station at Batang, on the Sino-Tibetan frontier, from where they hoped to spread Christianity into Tibet. Apart from occasional furloughs they remained there for nearly twenty years, and if Dr Shelton had little success in converting the Tibetans, he made a considerable impact as a biomedical pioneer.

He was fortunate in this Buddhist realm that his first patient was an important Buddhist lama, who appreciated the anaesthetic qualities of cocaine when Shelton removed a needle from his hand. Shelton went on to treat many more wounded Chinese and Tibetans in this war-torn and bandit-infested region, although he found the local people were content with their own remedies for most medical conditions.

Probably Shelton's greatest achievement came in 1917, with the opening of a fifty-bed hospital at Batang, "a near-incomprehensible expression of Western technology . . . a temple of Western medicine, the only medical facility for a region the size of California" (p. 146). The opening ceremony provided the first patient, when an old man fell off a balcony and broke both of his legs. This remarkable hospital was, incidentally, one of three opened in that year in the Tibetan cultural world. In the Sikkimese capital of Gangtok the biomedical Sir Thutob Namgyal Memorial hospital opened, while in Lhasa the Men-ze-khang hospital opened, offering medical treatment with the indigenous system. While these survive, however, the Batang hospital was abandoned in 1932.

Although skilled enough to make his own smallpox vaccine during an outbreak in 1918, Shelton actually emerges as something of a reluctant medical practitioner, preoccupied with wider political and organizational issues. But his "long absences and short clinic hours" (p. 284, n.79) were apparently typical of medical missionaries, who spent much of their time on language and religious work. In Shelton's case, however, even his religious knowledge may not have been particularly deep, for like many medical missionaries he had no theological training.

Like so many missionaries, Shelton's "all-consuming dream" (p. 174) was to reach the

"Forbidden City", the Tibetan capital of Lhasa. In 1919, in recognition of his medical achievements, he received what he took to be an invitation from the Dalai Lama to visit Lhasa. After an interval in which he was kidnapped by bandits, an incident that made him a major celebrity in America, Shelton finally set out to test the invitation in February 1922. But he was soon turned back. Then on his return journey he was shot, apparently by bandits, and died soon after. As the Tibetan proverb has it; "A good man dies at the top of the pass with his boots on" (p. 229).

In addition to missionary society accounts, Shelton wrote an autobiography, and his wife and daughters have also published their memoirs of the period. Thus the need for this book might be questioned. But Wissing's work is well-researched and locates Shelton's life in its wider political and environmental setting. It provides a fair and balanced appraisal of a remarkable individual, and if it sometimes loses sight of its central character the diversions are always entertaining and informative. This is a wonderfully well written book and a joy to read. It draws no general conclusions on either the missionary endeavour or the introduction of biomedicine into this foreign environment, but it does provide valuable insights into both processes.

It may also lead readers to revise their image of missionaries. With few conversions to be made in this region, men like Shelton frequently became involved in very different activities, serving as guides and interpreters for other travellers, as spies for the European colonial authorities, and as traders in artefacts, or even horses and rifles! As the author points out, although "Christianity was central to their worldview, missionary volunteers were seldom religious zealots. Rather they were often enthusiastic young people who were attracted to an exciting life in a far-off land" (p. 25).

Wissing has given us an excellent account of one of those exciting lives.

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