

Book Reviews

As Fontenelle observed in his *éloge* of Newton, the great man had not only not made his case, but had said of the unknown cause of gravity and its manifest effects precisely what the peripatetics said of occult qualities.

These comments are offered as a gesture against the fad that ascribes to “magic” or “the magical tradition” whatever in the natural philosophy of the scientific revolution is not strictly mechanical in the Cartesian sense. Also, they are a plea that we historians use words with the meaning or meanings they had for the people in whose mouths we put them. Francesco Lana-Terzi, an elder contemporary of Hooke’s and one of the great natural magicians of the seventeenth century, attacked those who ruined the good name of his speciality by working off as natural magic the nonsense, superstitions, and trivia of the ages. He had in mind among others Giambattista della Porta, a man of the sixteenth century, whom Henry takes as an exemplar of the natural magician. In tying Hooke to the “natural-magical tradition”, does Henry intend the doctrine according to Lana, or, closer to home, Bishop Wilkins? The distinction matters. Without it, one slides easily from engineering to conjuring.

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W. F. BYNUM, ROY PORTER, and MICHAEL SHEPHERD (eds), *The anatomy of madness: essays in the history of psychiatry*, vol. 3, *The asylum and its psychiatry*, London and New York, Routledge, 1988, pp. xi, 353, illus., £35.00 (0-415-00859-X).

Though rightly resisting the temptation to see the history of psychiatry and the history of the asylum “as coterminous, indeed synonymous, with each other”, (p. 1), the editors of this volume acknowledge that one cannot avoid recognizing the defining role played by the asylum in the rise of the psychiatric profession. This is, of course, especially true for the nineteenth century, the period attended to almost exclusively here, and the book’s subtitle thus accurately reflects its contents. In fact, the boundaries are narrower than even this suggests: the papers gathered together here focus not so much on the impact on the profession and on society at large of the early nineteenth century image of the asylum as utopia, the panacea capable of banishing the scourge of madness; but rather on the implications of the collapse over the next half century of its pretensions to cure, and the associated rise of the barracks-asylum. Like the two preceding volumes in the series, the collection consists of hitherto unpublished work by some of the leading younger contributors to the field; and, again like its predecessors, despite some attention to developments elsewhere (Christine Stevenson on Danish responses to insanity; Waltraud Ernst on the treatment of the European insane in British India; Patrizia Guarnieri on Morselli and late nineteenth-century Italian psychiatry; and Ann Harrington on hypnosis and neo-mesmerism in fin-de-siècle French psychiatry), most of the essays focus closely on British materials.

Not all the essays are of an equally high standard: James Donat’s essay on the physical and mental disorders accompanying the Ulster Revival of 1859 attempts, with little success, to rescue and lend significance to a now-obscure controversy over the psychiatric casualties of a period of religious excitement in the provinces. Margaret Thompson provides a confused and confusing discussion (one cannot dignify it with the term analysis) of Thomas Clouston’s practice at the Royal Edinburgh Asylum, Morningside. And Richard Russell, in a slightly more satisfactory paper, still sheds only a limited amount of light on the place of the asylum in the making of psychiatric careers and the provision of care for its patient population.

Elsewhere, however, there is a good deal to interest both the specialist and the more general reader. Trevor Turner, demonstrating that psychiatrists can indeed contribute to a less Whiggish history of their profession, takes on the doyen of late Victorian psychiatry, Henry Maudsley. Steering a judicious course between the hagiography of an Aubrey Lewis and the more polemical sketch recently offered by Elaine Showalter, he skilfully dissects Maudsley’s ideas in relation to his career, revealing much about an arch cynic and pessimist who did his best to hamper his biographers’ task. In the process, he clarifies considerably some of the factors leading to the decline of British psychiatry in the last third of the century.

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Nancy Tomes, in a splendid essay which alone tackles the difficulties of comparative analysis, looks at the contrasting reactions of British and American psychiatry to the doctrine of non-restraint. For the British, non-restraint was elevated into the very symbol of reform and medical progress, while their American brethren, sharing the same empirical, pragmatic medical culture, vociferously attacked its practicality and desirability. Such differences, she demonstrates, should not be dismissed as the consequence of “excessive self-righteousness and nationalistic fervour” (p. 191), but rather depended on broad differences in the structural context of professional practice—most notably the differing degrees of centralization and class segregation that characterized the two countries’ asylum systems, amplified by the effects of internal professional factionalism and international rivalries on the constitution of collective identities and self-definitions. In turn, the eventual cross-national convergence on the acceptability of some degree of restraint reflected the steady growth of therapeutic pessimism from the 1880s onwards. With the efficient management of patient violence now accorded a central place, debates about the moral dangers of mechanical restraint simply died away, an irrelevance soon to become a historical curiosity.

While Tomes focuses on professional disputes about therapeutic practice in the asylum, Michael Clark concentrates on more theoretical discourse about the origins of unsoundness of mind, most particularly on the growing medical emphasis on the dangers of morbid introspection and self-absorption, which were seen as pernicious precursors and accompaniments of madness. Neglect of active pursuits and the retreat from social intercourse were seen, he argues, as inevitably tending “to weaken the will, undermine the ‘natural’ moral affections, and encourage idleness, eccentricity, and the growth of perverse or immoral tendencies” (p. 72), a process which culminated in mental disorders and breakdown. A variety of textual evidence is deployed in convincing support of this thesis, though there are only tantalizing hints of its broader ideological importance and appeal, as a means of justifying the late nineteenth-century shift “away from individual treatment towards the forcible resocialization of the insane”—a useful way of rationalizing “the very impersonality of large asylums and their internal regimes” not as an unfortunate falling away from the ideal of moral treatment, but as an “advantageous, if not actually indispensable” (p. 84), means of realizing them.

The remarkable strength of the commitment to “an expanding system of mass segregation as the preferred solution the problems posed to society by madness” (p. 248) is forcibly driven home by David Cochrane’s study of the London County Council’s administration of lunacy policy between 1890 and the outbreak of the First World War. Already having an inflated rate of lunacy in 1890, compared with the rest of the country, the LCC promptly embarked, with a measure of desperation, on “a massive asylum building programme which doubled capacity in twenty years” (p. 247). Most extraordinarily of all, perhaps, it elected to build five large institutions on a single centrally serviced site near Epsom, a complex which eventually “served” more than 10,000 inmates. The sources and effects of its Asylum Committee’s policies are carefully dissected, and in the process, Cochrane effectively demolishes earlier claims about the significance of the opening of the Maudsley Hospital. So far from marking a basic shift in policy towards an emphasis on early treatment and out-patient care, the Maudsley emerges as an essentially aberrant and marginal development, out of step with the dominant thrust of the LCC’s approach, which remained firmly and inflexibly committed to “sustained sequestration as the overriding policy objective” (p. 265).

Overall, then, despite some inevitable variability in the quality and usefulness of the individual essays, this is a welcome addition to the literature. Taken as a whole, it is a worthy companion to the two excellent earlier volumes in the series, and deserves to reach a wide audience.

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