

Book Reviews

MARY P. ENGLISH, *Victorian values: the life and times of Dr. Edwin Lankester, M.D., F.R.S.*, Bristol, Biopress Ltd (The Orchard, Clange Road, Bristol BS3 2JX, Avon), 1990, pp. xvi, 187, illus., £29.50 (0-948737-14-X).

Edwin Lankester was born into a lower middle-class family in Suffolk in 1814 and died of the complications of diabetes in London in 1874. As a young man, he embarked on a medical career by apprenticeship, and later studied at the newly-established University College in London. By the time of his death, he had achieved a position of some standing in the medical and scientific world of that city, had a large family, was overworked, apparently prosperous, and bankrupt. He had little private practice, and his career was one long struggle to obtain enough paid employment to support his family. He taught, he wrote books, he was variously and in combination a dispensary physician, a superintendent at the South Kensington Museum, a Medical Officer of Health and a coroner. He was interested in natural history, in popular education and in sanitary improvement; he dabbled, at one time, in medical politics. In all these respects, Lankester was a typical mid-Victorian medical man. As this thorough and informative biography shows, his story amply illustrates the difficulties and anxieties of metropolitan medical practice as described in Jeanne Peterson's classic *Medical profession in mid-Victorian London*.

It was Lankester's coronership that gave his career distinction. Although he was an articulate and energetic Medical Officer, there were many such, and public health work was poorly rated by contemporaries. Following in Wakley's footsteps, however, he was a pugnacious and innovative medical coroner, at a time when collective professional ambition made this an arena of acute interest to his medical colleagues. His vision of a coroner's duties extended far beyond criminal investigations, to the prevention of infectious disease and of causes of death in prisons, lunatic asylums and workhouses. He was concerned to establish proper post-mortem procedures (including forensic laboratories, mortuaries and the appointment of experienced pathologists), and the registration of still births; he was interested in regulating the franchise for the election of coroners, and for the selection of coroners' juries; he tried to obtain retirement pensions for coroners. Lankester's coronership broke him financially, but his attempts to reform the institution, and to professionalize the medical aspects of the administration of justice, were recognized by his contemporaries as his outstanding contribution to the Victorian medical world.

Anne Hardy, Wellcome Institute

JAMES H. CASSEDDY, *Medicine in America: a short history*, The American Movement series, Baltimore and London, The Johns Hopkins University Press, 1991, pp. xi, 187, £26.00 (hardback, 0-8018-4207-7), £8.50 (paperback, 0-8018-4208-5).

Short histories of large subjects inevitably run risks of omission and imbalance in the treatment of their chosen area. To cover the history of medicine in America from the earliest European settlements to the present day in 159 pages seems a risky enough undertaking, yet James Cassedy here carries it off admirably. There is as yet no definitive general study of American medical history, as Cassedy observes, but his book furnishes a most serviceable short introduction to the subject. It is clearly written; its generalizations are firmly stated; and its scope is broad. It covers not simply the development of scientific medicine, but also the traditions of alternative medicine, the social and economic environment, public health and government action.

The book is arranged chronologically. There are four chapters, an epilogue and a useful bibliographical essay. Chapter 1 deals with medicine in colonial America, and is the least successful contribution, perhaps because Cassedy's real interest lies in later periods. At all events, this chapter is marred by some historically insensitive comparative observations on the differing medical input of France, Spain and England to their respective colonies, and by some overly-modern political phraseology. The remaining chapters avoid such solecisms. Although long, they are broken up into handy sections, and are easily digested. Cassedy weaves his

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material together skilfully, and the tone of the book is uniform. He is particularly good on the social diversity of American medicine: on numerous medical sects and proponents of unorthodox medicine; on the experiences of women and blacks; on the differences in health and medical provision between distinctive American habitats—the transient, the farm, the small town and the various components of the city.

This is a modest, modern account of its subject. There are no heroics, no Whiggish inferences. Cassedy emphasizes the contrasts and contradictions, the constantly shifting character, the mixed successes, the changing expectations, of American medicine. Dispassion does not waver in telling of the years since 1940: health remains an elusive commodity, and medical priorities are increasingly determined by economic considerations. For Cassedy, modern medical technology is a mask behind which the realities of social and racial inequality, poverty, and unnecessary suffering and death continue to beset America.

Anne Hardy, Wellcome Institute

INGO WILHELM MÜLLER, *Iatromechanische Theorie und ärztliche Praxis im Vergleich zur galenistischen Medizin*, Historische Forschungen, vol. 17, Stuttgart, Franz Steiner Verlag, 1991, pp. 320, DM 72.00 (3-515-05516-9).

This solid study takes up a theme briefly touched on by Temkin in his *Galenism*, the survival of Galenic ideas on therapy into the seventeenth century and beyond. Galenic anatomy had been overthrown by Vesalius, Galenic physiology by Harvey, yet Galenic therapeutics continued, at least in part, for at least two centuries. By comparing three authors, Friedrich Hoffmann (1660–1742), Pieter van Foreest (1521–1597), and Jan van Heurne (1543–1601), Prof. Müller throws light on the later career of Galenism in medical practice. He can thus show how Hoffmann's views on iatromechanism could incorporate many of the rules for diagnosis and therapy formulated by Galen, and vigorously promoted by his adherents in the Renaissance. If the Galenists were more interested in prognosis and in individualist therapy, Hoffmann preferred to interpret the same signs and symptoms to reveal a universal cause. In the range of treatments, both sides were almost united (and Foreest and Heurne were far from unusual in their cautions about bleeding); the major difference was the introduction by Hoffmann of therapies and explanations derived from scientific experimentation.

The book is well organized; sub-headings easily permit one to compare the attitudes of the three to a variety of diseases and therapies. There is an admirable appendix which reprints the Latin case-observations of Foreest and Hoffmann on pleurisy, and a useful bibliography of sources and secondary literature. But problems remain. It is not clear why Foreest and, still more, Heurne were chosen, for they represent the Galenism of a hundred years earlier than Hoffmann. True, both wrote at length on case-histories, but that genre did not end with the sixteenth century. Prof. Müller briefly considers the question of their typicality, but reaches no conclusion on their direct relevance to Hoffmann. A practical author of the mid-seventeenth century (Beverwijk or Willis?) might have served as a better comparison for contemporary Galenism.

The relationship between Galenism and Hippocratism also requires more thought. For Prof. Müller, Foreest's Hippocratism is but a façade for Galenism. But that was not how it seemed at the time, as Iain Lonie demonstrated for the Paris school at the end of the sixteenth century. Sydenham, who forms a nice point of comparison, receives but two passing mentions, and other Hippocratic, in France and Italy, are treated equally briefly. Iatrophysicists like Pitcairne are not mentioned, even though their attempts to explain and treat fever using the findings of science provide a bridge between the two sides of Prof. Müller's argument. Historical contextualisation is virtually absent, and the contrasts between the activities of a town physician and a university teacher are not brought out.

Without its limits, this is a valuable piece of work, firmly rooted in a detailed and careful comparison of neglected texts. But a wider vision and different limits would have made this a more accessible, and a more exciting, book.

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