

Book Reviews

disabilities. Readers from many disciplines will find it informative and insightful.

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Michael Kutzer, *Anatomie des Wahnsinns. Geisteskrankheit im medizinischen Denken der frühen Neuzeit und die Anfänge der pathologischen Anatomie*, Schriften zur Wissenschaftsgeschichte XVI, Hürtgenwald, Guido Pressler, 1998, pp. 293, DM 140.00 (3-87646-082-4).

Traditional historians of psychiatry have often argued that in medieval and in early modern times madness was interpreted in theological rather than in medical categories. According to this view, it was not before the seventeenth-century rivalry between religious and secular explanations that a rationalization and naturalization of madness took over. And even then, psychiatric knowledge was mainly theoretical and was not related to medical practice. More recent approaches have modified this view, in particular the myth, according to which a progressive psychiatry replaced demonology and superstition.

Michael Kutzer's well-researched study follows this track of a more differentiated historiography of psychiatry. His analysis is based on a remarkable number of treatises from the sixteenth and seventeenth centuries, and it is Kutzer's central claim that a "somato-physiological model" of madness was widely discussed by medical university teachers and vernacular doctors long before the scientific revolution and the writings of René Descartes and Thomas Willis. The first half of the book shows at length that early modern physicians mixed psychiatric nosology as a cocktail of Galenism, humoral pathology, pathological anatomy and the medieval ventricular theory of mental faculties. Thereby they followed an ontological dualism, according

to which the immaterial mind-soul (*anima rationalis*) remained unaffected, whereas an affection of the material body-soul (*anima sensitiva*) was responsible for mental disease. Most importantly what this book shows is that the theory of localizing mental faculties (*sensus communis*, *ratio*, *memoria*) in the cerebral ventricles was—despite Vesalius' sharp criticism—widely discussed until the seventeenth century, because it was used as an explanation of various mental lesions and deficiencies.

This variety of medical theories of madness challenges Kutzer's explanation of the success of the new mechanistic physiology in the second half of the seventeenth century. Following many other historians, Kutzer states that Descartes' theory of the pineal gland as the organ of the soul was mainly rejected by his contemporaries, whereas his mechanistic model was widely accepted. In consequence, ventricular theory was abandoned and the idea of a mechanic disturbance of the animal spirits presented a new form of the age-old humoral theory. The author mentions several times that the new thought style was theoretically rather than practically driven. This is an interesting observation, but unfortunately, it remains largely unexplored. More generally speaking, the book does not address historiographic issues that might be relevant for a deeper understanding of early modern psychiatry. For example, when Kutzer claims that the "somato-physiological model" was relevant for medical practice, one would like to know more precisely what he means by that. If physicians dissected corpses of maniacs or melancholics and found irregularities like a sclerotic brain or overfilled blood vessels, this was relevant for nosology, but it does not tell us very much about the treatment of those mentally insane before their death.

Kutzer seems to hope that the analysis of anatomical, pathological and clinical treatises and what he calls medical theory will provide the background for further

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work in social history of psychiatry (p. 38). It is certainly true that social historians have too often ignored or underestimated medical theories, but they have uncovered a great deal about medicine in action. However, since the writing and publication of textbooks, treatises etc. is not a disembodied, ahistorical activity, one might turn Kutzer's claim upside-down and regard social history as a background for the interpretation of medical theories. It is true that the relation between theory and practice and between high and low (medical) culture is a tricky problem and a challenge to any historian of medicine. But a historian who aims to write a revisionist history of early modern psychiatry should at least address these issues. Despite this criticism, Kutzer's attempt to overcome traditional opinions on early modern understanding of madness is very welcome. He presents a corpus of literature that has been largely ignored hitherto.

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Christopher Lawrence and Anna-K Mayer (eds), *Regenerating England: science, medicine and culture in inter-war Britain*, Clio Medica 60, The Wellcome Institute Series in the History of Medicine, Amsterdam and Atlanta, Rodopi, 2000, pp. iii, 316, £45.00, €68.00, \$64.00 (hardback 90-420-0911-X), £15.00, €23.00, \$21.00 (90-420-0901-2).

"Regeneration" is a useful portmanteau term to describe persistent and intertwined twentieth-century and, in this case, English preoccupations with community, citizenship and national cohesiveness and vitality. Attaining cultural prominence in the 1880s, this cluster of values peaked between the 1920s and 1950s and re-emerged in evangelical New Labourite guise in the early 1990s. Lawrence and Mayer's well edited

collection confines itself to the inter-war period. In doing so, it distances itself from an ongoing debate, principally associated with the names of Steven Fielding and Nick Tiratsoo, concerned with interactions and contradictions between war-time and immediate post-war labourism, socialism and nationhood. Nevertheless, four of the contributors to this volume succeed in implicitly linking their subject-matter to at least some of these longer-term issues. Tim Boon provides an excellent in-depth reading of Paul Rotha's multi-layered *The face of Britain* (1935): the role played by largely negative perceptions of nineteenth-century industrialization in the shaping of the idea of regeneration features more convincingly in this paper than the others. Elizabeth Darling analyses relationships between environmentalism, housing reform and the construction of community. Abigail Beach, who has already contributed to the historiographical developments mentioned above, creatively revisits the potentially clichéd theme of the inter-war health centre. Mathew Thomson presents a highly original, structural account of the processes whereby mental illness and "deficiency" partially defined and were themselves negatively delimited by the idea of full and responsible membership of a national democracy.

On the crucial theme of Englishness, Michael Bartholomew's essay on H V Morton is disappointing: no single publication by this prolific author is subjected to genuinely detailed textual or sub-textual scrutiny. In contrast, the co-editors seem to be very much on home ground. Christopher Lawrence's survey of the collective *mentalité* of an inter-war "medical patriciate" concludes that his subjects' "response to the crisis years in which they lived was a cocktail of despair and hope, faith in progress and nostalgia" (p. 61). Lawrence might have added that the same could have been said of the great majority of inter-war novelists, poets, politicians and planners. Anna Mayer contextualizes Sir Arthur Keith's plea to the