

Each item consists of a black-and-white reproduction of the work (all roughly the size of the 35-mm. negative from which they were printed, which makes a magnifying glass a necessary aid for most readers) and a textual entry identifying the artist, title, medium, dimensions, and inscription (if any). The catalogue is organized thematically, with ninety-nine subject groupings arranged into fourteen main topics dedicated to different medical professions and trades, institutions, practices, diseases, therapies, and so on. This arrangement allows for the comparison of contemporary representations of the same topic—for instance, a dozen depictions of grimacing faces ingesting medicines—or even a single subject—such as seven different portraits displaying the obesity of Mr Daniel Lambert of Leicester, c.1800; as well as the examination of continuities and changes in representation over time. (The thematic arrangement, however, is insensitive to differences in medium or genre.) The excellent indexes at the end of the catalogue allow the reader quickly to navigate the collection, searching by artist, title, publisher, name, and subject.

The richness of the collection, the inclusion of a reproduction of every single item in it, and the care with which the catalogue has been edited and put together will make this a valuable tool for those interested in the intersection of art and medicine, as well as for those simply looking for striking images with which to illustrate their research or teaching.

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**Robert Richardson,** *The story of surgery: an historical commentary*, revised edition, Shrewsbury, Quiller Press, 2004, pp. vii, 304, illus., £25.00 (hardback 1-904057-46-2).

I have fond memories from graduate school of the first edition of this work; it, like this new edition, is an engagingly written story of the innovations which made twentieth-century surgery a safe and widely accepted therapeutic modality; it contains virtually all “the old, old

stories that we love to hear” and was a favourite of one of my teachers, Dr Owen Wangenstein. I have subsequently learned much more about the history of surgery and historiography and could, in good conscience, only give it to my graduate students as a case study in how *not* to do history. However, I still recommend it to medical students and surgical residents as an easy way to learn something about the heritage of their profession. In the same way that Galen, in *Anatomical procedures*, argued that anatomy had different uses for different practical interests, stories of the past have different utilities for different professions.

The original and the second edition of *The story of surgery* begin the story with the advent and impact of anaesthesia. The story of the last third of the nineteenth century continues in both volumes with Lister, early abdominal interventions and asepsis. The classic story of appendicitis and appendectomy is told in both editions. The last decade of the nineteenth century and the early years of the twentieth are considerably extended in the second edition—hernia repair, cancer, and early neurological surgery are all expanded from the original; gynaecological surgery is exceptionally enriched. The story continues through the two world wars and chest surgery, but the second edition contains more on heart surgery, arterial repair and transplantation, stories just begun in 1958. All in all the new text is a very workman like job of updating and expanding the stories told in the earlier book.

In the preface the author tells us, “The two big differences in this new edition are, first, the addition of new material which has increased the length by about a third, and second, the inclusion of the bibliographic sources, missing from its previous manifestations.” My copy of the first edition is the 1964 Collier paperback, published as *The story of modern surgery*, new and revised, a reissue of the 1958 original entitled *The surgeon’s tale*; it has no critical apparatus but does contain an appended bibliography; two pages long, listing a collection of secondary sources from which the book was essentially drawn. This bibliography is, I think, fairly named. The bibliography has disappeared from

the second edition and in its place we find 41 pages of “Sources”, connected to the text by superscript numbers as if they were notes from which the text was crafted. These are the “primary sources” of the material described at the point where the superscript number occurs in the text but there is no evidence that they were consulted by the author. There are statements in quotation marks scattered through the text which have no superscript number associated with them and for which no source is identified. I suspect I could, if pressed, identify the majority of the secondary sources from which the new material in the texts is constructed but they are not to be found in the “Sources”. I can only assume that the “Sources” were superadded from one of the excellent bibliographies of surgery available—perhaps Garrison-Morton, listed in the bibliography of the earlier addition.

In addition to the historiographic limitations of the critical apparatus, the book is a chronicle of contributions to surgical progress. It does not deal with the issues of patient autonomy and social justice now recognized as a critical component of the medical profession’s social contract as well as being the heart and soul of the important questions of the new social history which has had a profound impact on the field since the 1960s. How did these contributions become widely available while assuring quality care? How was access to the advance made possible? How was competence adjudicated? What was the professional responsibility of these innovators? are among the questions which cry out for discussion in these stories, but they cry out in vain. There are occasional lapses of judgment, where the writing outruns the data, e.g., Pasteur “discovered bacteria” and Halsted “introduced” the surgical residency, but on the whole the book is as accurate as the existing secondary sources. Richardson faithfully tells the stories he has chosen to tell. I still enjoyed the read, the stories are the ones loved by my surgical colleagues and as heritage they cannot hurt anyone; but as history they are too limited to help anyone.

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**Rahul Peter Das,** *The origin of the life of a human being: conception and the female according to ancient Indian medical and sexological literature*, Indian Medical Tradition, vol. 6, Delhi, Motilal Banarsidass, 2003, pp. xvi, 728, Rs. 1250 (hardback 81-208-1998-5).

In *The origin of the life of a human being*, Rahul Peter Das explores the fascinating subjects of conception, anatomy, and female “seed” in the Sanskrit medical corpus and in later related texts. A scholarly study that is certainly the only one of its kind, Das lays out for us a vast and staggeringly exhaustive array of materials ordered in quasi-chronological fashion, beginning with the *Carakasamhitā* (circa early to mid-second century CE) and ending with a sampling of materials from later Sanskrit “sexological” works.

First of all, I am utterly mystified by this book’s title, which is, I suspect, a “hedge” on the part of its publishers, who have had a recent spate of trouble with right-wing Hindus, and who have perhaps chosen such a title in order to mask the actual subject matter of the book, which is not about religious or philosophical formulations on the origins of human life and its “mysteries,” as the main title suggests, but is chiefly about female orgasm, ejaculation, and anatomy. The book has an identifiable “subject,” but there is no narrative or visible line of argument anywhere to be found, nor is there an attempt by the author to provide any sort of cultural context or framework for this material.

Das’s writing style is also unnecessarily verbose and obfuscatory. He rightly criticizes the importation of inappropriate terms from western medicine in existing translations and discussions of classical Indian medicine, but the book is not helped in any way by his jarring, distasteful, and juvenile criticisms of other scholars. Although Das has done a phenomenal amount of research, he has presented the material with very little imagination and in a way that is of little use to his readers. The volume is unwieldy, and the writing is inelegant, undisciplined, and profoundly difficult to follow or even to assess. Nothing is tightly or crisply reasoned, and the book is instead bursting with tangential discussions and