

Book Reviews

Dorothy and Roy Porter's book splendidly fulfills their intention to make it patient-orientated and they trawl an impressive range of contemporary sources to do so. They show that personal confidence in a medical practitioner invariably weighed heavily and provide a corrective chapter, 'The Doctor's Point of View', lest readers imagine practitioners supinely accepted criticism and slights, distracted though they were by professional rivalry with the apothecaries as well as the myriad self-helpers and quacks. In unbureaucratic eighteenth-century England there was certainly no institutionalized, womb-to-tomb approach to medicine, an attitude that some modern scholars find hard to grasp. The crucial problem for the medical historian remains one of sources, both typicality and reliability. It is impossible to assess in Georgian England how far diarists and correspondents represented patients. Clearly gender- and class-specific, such records' survival rate remains a basic worry, for they may have been particularly susceptible to destruction by descendants if the contents were thought unacceptable in some way. In addition, the substantial numbers of eighteenth-century patients treated free at hospitals, dispensaries or by the parish surgeon remain hidden from historians; only those discharging themselves from hospitals each year indicate any other response than dutiful gratitude. Not all patients expressed their worst health fears, even to their diaries, family or friends, but they were likelier to record medical fees, prescriptions, regimen, and prognosis. That medicine became increasingly authoritarian by the mid-nineteenth century is not in doubt, but the authors rightly stress that in Georgian England it was not sexual, but class politics which motivated female patients.

Predictably, practitioners' own surviving writings concentrate on patient data (medications prescribed, visits made, fees charged), only rarely noting the patient's personality, responses and the like. Some patients, especially the opulent, must often have been very trying and medical comments on this category are, for obvious reasons, scarce. Few can equal the referral note to another practitioner about a tiresome patient from Dr Henry Jephson of Leamington Spa, "I send you a fat old goose: when you have well plucked her, send her back to me!"

The authors state and fulfill their intentions; their survey, as well as being wide-ranging, is highly readable and skillfully presented, even suggesting research that remains to be tackled (contemporary female practitioners). In the last decade medical history has gained a new emphasis and importance by concentrating on patients, instead of the earlier "great-name" approach, and *Patient's progress* is a good example of this trend.

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SAUL JARCHO (transl. and ed.), *Clinical consultations and letters by Ippolito Francesco Albertini, Francesco Torti and other physicians: University of Bologna MS 2089-1*, Boston, Francis A. Countway Library of Medicine, 1989, 8vo, pp. lxxix, 356, illus., \$24.95, dist. Watson Publishing International.

These clinical consultations span the first three decades of the eighteenth century, providing us with a glimpse of what physicians believed and prescribed during that period. After bringing the *Clinical consultations of Giambattista Morgagni* (1984) to our attention, Jarcho now provides us with an annotated translation of the activities of several of Morgagni's central Italian contemporaries. Ippolito Francesco Albertini (1662-1738), lecturer at the University of Bologna and gifted clinician, published his *Animadversiones* on dyspnoea and structural impairment of the heart in 1731. Francesco Torti (1658-1741), an accomplished consultant, went on to practice in Modena after obtaining his doctoral degree at Bologna, and is known for his 1712 work on fever, the *Therapeutice specialis*. Amongst the other contributors are Sebastiano Trombelli, a lecturer who was famed for his dissections, and Vincenzo Pigozzi, who practised medicine in Crevalcore, outside Bologna, and was married to Albertini's sister Giulia.

The manuscript consultation reports contained in this volume were found in 1830 at the home of the Pigozzi family, and are now held at the Bologna University Library. It is a fascinating source, demonstrating the preoccupations of the age as well as the responses of physicians. Hence the prevalence of fever, in all its forms. If the detail in the consultations is

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sometimes meagre, this is because the descriptions were probably sent to the consultant and were not written by him. Consultants compensated for this by attempting to explain every phenomenon connected with the illness and, when unable to give complete descriptions of diseases, by relying on doctrine and experience. It is the tempering of established doctrine with contemporary developments and personal observation that is perhaps the most interesting aspect of the consultations. For example, iatrophysical and iatrochemical ideas were used to revise Greek concepts of humoral harmony. Likewise, with regard to Albertini, weakness in contemporary physical and supplementary chemical diagnosis was partially made up for by experience gained at autopsy. Also striking is the occasional expression of doubt regarding the efficacy of prescribed remedies and, in one case, the recommended use of a placebo, or "some apparent remedy that is at least harmless if not useful, since God, the weather, and the very nature of things changes matters, as sometimes happens, to our consternation" (p. 26).

This ably translated collection is thus a useful and intriguing work of reference, and Jarcho's introduction, notes, and index are detailed and informative.

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COLIN JONES, *The charitable imperative: hospitals and nursing in ancien régime and Revolutionary France*, The Wellcome Institute Series in the History of Medicine, London and New York, Routledge, 1989, pp. xiii, 317, £35.00 (0-415-02133-2).

In recent years, studies of medicine in *ancien régime* France have presented us with the image of a radical transformation of the role of the hospital. From the late eighteenth century, under the pressure of new ideas about the practice and teaching of medicine and the ambitions of the rising medical profession, the hospital allegedly shifted from a shelter aimed at the relief of various categories of the needy to a medical institution primarily devoted to the treatment of the sick and to the education and training of medical students. A challenge to this unproblematic picture of "medicalization" is the core of Colin Jones's book. Arguing that historians have restricted their analysis to changes at the level of medical ideas and aspirations of medical men, and have assumed that practices in the hospital changed accordingly, Jones focuses on what was actually going on in the hospital. He also points out the exceptionality of the well-worn case of the Parisian *Hôtel-Dieu*, turning instead to the under-explored provincial hospitals. He revises the medicalization argument through a critical reconsideration of the usual variables employed to assess the level of medical identity of the hospital. Jones shows that, despite the establishment of separate institutions for the relief of the poor (the *Hôpitaux Généraux*) in the seventeenth century, the clientele of the *Hôtels-Dieu* continued to be largely constituted by the poor, migrants, and homeless, looking for relief and rest, rather than by the clinically sick. However, this is not presented as a failure of the hospital to perform its medical role, but as a result of a definition of illness which embraced physical exertion deriving from labour, travelling or exposure to harsh weather. In this context the treatment that the religious personnel running the hospital dispensed, based on plenty of food and the opportunity to rest, appears not so unreasonable as doctors tried to suggest. The author is thus well aware of the anachronisms implicit in the distinctions between poverty and disease, or cure and care, on which the notion of medicalization widely relies. Another element, usually regarded as crucial in the transformation of the hospital into a health-factory, is the involvement of medical men in its management. Jones argues, however, that the growth of attendance by surgeons, physicians, and medical apprentices, from the mid-seventeenth century, cannot be taken as evidence for their control over the hospital. The authority of the doctor was challenged above all by the nursing staff (made up of women who had committed their life to the care of the sick under a religious rule), who succeeded in maintaining their formidable grip on hospital administration for most of the nineteenth century. In the central part of the book, Jones brings to light the key role performed by these communities of women within the system of medical provision (they controlled admissions, performed surgery, ran the pharmacy). Usually seen with condescension, and neglected by historians of medicine, the nursing sisters are fully restored,