

## Book Reviews

Setubal was a fishing and garrison town to the south of Lisbon which from the early sixteenth century was heavily dependent on the production of salt in the Sado estuary. Prosperous families of the town often made pious bequests in the form of salt works so the churches and confraternities also became dependent on the fortunes of the salt trade. This interdependence of salt and piety allows Abreu to coin the evocative image of a people whose "Purgatory had the taste of salt" (p. 87). Most of her book, however, deals with the decline of interest in Purgatory from the late seventeenth century as Setubal experienced a series of natural and political disasters that ruined the salt trade, and attitudes changed towards charity and poor relief. The dead, whose memory the living were supposed to cherish, were forgotten as the clergy relieved themselves of the burden of masses, and families struggled to extract their property from the clutches of the church. Those in the Misericórdia who had benefited—the sick poor, orphans and prisoners—saw charity towards them decline. A system of health care and public assistance which had been set up in the early sixteenth century became hopelessly inadequate for the social realities of the nineteenth century.

Abreu's book is based on her two volume doctoral thesis and this probably explains its earnest and ponderous style and a certain lack of focus. There is very little information on the Misericórdia itself and one is left wanting to know more about medical care in Setubal. Only the last part of the book—seventy pages out of over four hundred—deals with sanitation, mortality, disease, diet, and surgical and medical practice in the Misericórdia. If the book is actually meant to be an analysis of religious rather than medical practices in the town, then this last medical section sits awkwardly with the rest. For a reader who might not be familiar with Portuguese history and geography, this book presents further difficulties. Although there are many graphs, there are absolutely no maps. When

the author refers to confraternities in the region of Setubal or the foundation of convents across the town, the reader is none the wiser. Moreover, a great deal of knowledge about the history of modern Portugal is assumed. It is perhaps unusual for a social study of this sort to cover such a long period of time. This reflects the static nature of the system which funded the Misericórdia, but it produces a book bowed under by the vast amount of archival material available. Abreu's scholarship, however, is undeniable and this is an interesting regional contribution to the history of religion and charity.

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**Roger French, Jon Arrizabalaga, Andrew Cunningham and Luis García-Ballester** (eds), *Medicine from the Black Death to the French Disease*, History of Medicine in Context, Aldershot, Ashgate, 1998, pp. vii, 330, £49.50 (1-85928-382-9).

This book is the companion volume to an earlier collection of essays edited by the same team, entitled *Practical medicine from Salerno to the Black Death* (Cambridge University Press, 1994). Both volumes are the products of conferences organized by medical historians in Cambridge and Barcelona, and held in Barcelona. As their titles indicate, the first volume covered the period from the late eleventh to the mid-fourteenth century; the present volume picks up the story in 1348 and takes it down to about 1500.

The significance of the volume is not simply that it provides uniformly excellent scholarship in an often neglected period of Western medicine (although it certainly does this: see Vivian Nutton's ground-breaking account of medical teaching in the German universities). It also offers a valuable methodological corrective to some of the

more anachronistic readings of the period. Too often, “the long fifteenth century” has been treated as a period when “nothing much happened”. It was a time, so it is said, when the vitality of scholastic medicine waned and medical teaching continued in a repetitious fashion until the humanists came on the scene. An equally gross misreading is to characterize the period as a time when theoretically minded physicians lost out to practically minded surgeons and apothecaries, who showed themselves more capable of dealing with new diseases such as plague and syphilis. These historical distortions are effectively put to rest by the interpretation that emerges in this book.

One of the book’s great strengths is that it highlights the increasing complexity and sophistication of the late medieval marketplace. From learned Jewish practitioners in Mediterranean countries battling against the plague (Ron Barkai), to English alchemical physicians searching for the elixir of life (Michela Pereira), to fear in Spain and Italy of old women entrancing people (Fernando Salmón and Montserrat Cabré), a picture emerges of a world teaming with various practitioners committed to all sorts of medical and magical practices. The essays also reveal the various ways in which orthodox practitioners diversified their medical practice. Peter Murray Jones describes Thomas Fayreford, a university-trained physician practising over a wide area in south-west England who treated all manner of medical ailments, sometimes from a learned Galenic point of view and other times with simple tried and tested folk remedies. Meanwhile, Katharine Park explores the highly differentiated world of surgery in Florence, where some surgeons carved out for themselves reputations as specialists in certain procedures such as hernia operation, thus securing lucrative niches in a highly competitive marketplace.

The book also underlines the fact that learned medicine was capable of adapting to the changing circumstances of the fifteenth

century. Ann Carmichael explains that the diagnoses offered by Milanese physicians varied considerably, depending on whether they were acting as agents of the state in times of epidemic or whether they were serving as private physicians to individual clients. Roger French and Jon Arrizabalaga discuss how learned physicians developed various strategies to explain the appearance of the new epidemic known as the “French Disease”. Michael McVaugh shows how, through the multiplication of techniques for surgical procedures such as inguinal hernia, surgeons gave the impression that surgery was a progressive art offering an increasing range of therapeutic care.

The adaptability of university medicine is probably most evident in its incorporation (as far as possible) of humanist medicine. Jon Arrizabalaga’s study of printed versions of the *Articella* shows how this medieval textbook of university medicine was modified—and eventually jettisoned—to accommodate the tastes of humanist and Hellenist audiences. Roger French shows how medical masters developed a new anatomy based upon ancient Greek concepts of form and function that provided a more detailed morphology of the body than the complexional anatomy of earlier scholastic medicine. By advertising its logical, rational structure, these masters could present anatomy as a special branch of medicine with its own distinct body of knowledge.

If there is a problem with the book it is that too many of the essays focus either on the early period surrounding the Black Death (c. 1348) or on the period from the French Disease to the demise of the *Articella* (c. 1495–1534). As French rightly observes in his introduction, the current lack of detailed research into the period means that no general conclusions can yet be drawn regarding the “long fifteenth century” as a whole. Even so, by showing how different practitioners devised various strategies for operating in changing market conditions, this book does valuable service

in laying out a new approach to studying a seriously neglected period of late medieval medicine.

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**Andrea Carlino, *Books of the body: anatomical ritual and Renaissance learning*, trans. John Tedeschi and Anne C Tedeschi, Chicago and London, The University of Chicago Press, 1999, pp. xiv, 266, illus., £20.50 (0-226-09287-9).**

This English translation of the original Italian version, entitled *La fabbrica del corpo* (1994), is substantially the same text, except that it now appears with an epilogue, bibliography and index. Carlino's enterprise is a bold one. When university dissections of human cadavers began in the fourteenth century, he asks, why wasn't anatomy freed from the authority of Galen? Why was dissection used chiefly for the purpose of verifying the authoritative texts of anatomy until Vesalius showed how it could be used to acquire knowledge about the human body? In framing the issue in these terms, Carlino prescind from the traditional story of sixteenth-century anatomy and instead seeks to isolate the obstacles that prevented anatomy from advancing by means of dissection.

Chapter one deals with visual representations of dissection in early printed books. In the course of his commentary on a number of well-known illustrations, Carlino argues that university dissections were originally carried out with the primary intention of visually affirming the anatomy of antiquity. Illustrations of these formal public events depict theory (as represented by the master reading from the classical authorities) separated from practice (as represented by the dissector who cut open the body). From the early sixteenth century,

however, these images were increasingly supplemented by depictions of less formal private dissections in which students took on the role of dissectors. An even more fundamental break with tradition was reached in the frontispiece to Vesalius' *De fabrica* when the teacher stepped down from his lectern to carry out the dissection himself. This change in iconography, suggests Carlino, corresponds to an epistemological revolution in anatomical teaching. What perplexes him is why public dissections continued in their traditional form for several decades after the Vesalian revolution.

Carlino's answer forms the subject of his second chapter. Drawing upon his extensive archival research into the *Studium Urbis* in Rome during the sixteenth century, the author highlights the chief characteristics of public dissection that helped to legitimate this potentially abhorrent practice. He points out that the activities of anatomists were closely controlled by a hierarchy of authorities, and were ultimately sanctioned by the Pope himself. Public dissections took place during Carnival, when transgressive acts were tolerated in ritualized form. Candidates for dissection were selected from among those at the margins of society, invariably foreigners who were already sentenced to death, but who were treated to all the religious comforts of a Christian burial. These conventions, argues Carlino, served to protect dissection from accusations of desecration, and helped to vouch for its morality and legality.

Chapter three is devoted to the tradition of dissection in European medicine. Here Carlino discerns two prevailing—though opposing—attitudes towards anatomy. On the one hand, human dissection was encouraged by the belief that knowledge of the hidden causes of pathological states required knowledge of the natural functions of the internal organs of the body. This sort of knowledge, it was claimed, was acquired through direct observation of the organs. Yet this attitude was opposed not only by