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society. The growth of professionalism amongst Poor Law staff, the relationship of the workhouse to the community, and the neglected subject of the casual poor are amongst the subjects covered, but perhaps the most interesting chapter is that devoted to inmate life and culture. It is a difficult subject for investigation because few bothered to write about paupers, but Dr Crowther manages to convey much about the monotonous routines and stifling dullness that must have constituted the bulk of workhouse life, and was more typical than the spasmodic physical cruelty which is often seen as being widespread. She points out that boredom affected both inmates and staff alike, and created the epidemic tensions and conflicts of institutional life. Interestingly, she concludes that the "total institution" was never completely successful, and that, just as Townsend found of the aged in the 1960s, inmates in the past clung "tenaciously to their individual liberty and ideals".

Despite deterrence, the workhouse did provide an "embryonic social service" and although Dr Crowther does not venture into the wider issues of institutional versus community care, her book should be of great interest to anyone interested in such questions, as well as to students and teachers of social history.

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SHEILA COSMINSKY and IRA E. HARRISON, *Traditional medicine, Vol. II, 1976–1981. An annotated bibliography of Africa, Latin America, and the Caribbean*, New York and London, Garland Publishing Co., 1984, 8vo, pp. xvii, 327, \$39.00.

The earlier companion volume of annotated bibliography on traditional medicine appeared in 1976 and covered the years 1950 to 1975. Since then, there has been a florescence of interest in the topic. The Alma Ata Conference of 1978, resulting in a joint WHO-UNICEF guideline for the primary health care strategy, specifically advocated that national health systems collaborate with traditional practitioners. Training programmes, especially with traditional midwives, are under way in most Third World countries. A WHO Technical Report (number 622) spelled out the nature of collaboration in more detail, and a Traditional Medicine Unit has been established at WHO Geneva, along with research units in a growing number of Asian, African, and Latin American universities. At least six international journals on traditional medicine have begun publication since 1976, and established journals, both in medicine (especially tropical medicine) and the social sciences, have expanded the proportion of articles they are offering on this topic.

Against this background of interest we can assess the great value of this second volume of annotated bibliography. It is compiled by two people who have contributed substantial original work to the field themselves.

The volume begins with a concise introduction followed by three groupings of bibliography: (1) general, (2) Africa, and (3) Latin America and the Caribbean. Each of these is internally subdivided into: general, ethnomedicine, ethnopharmacology, health care delivery systems, maternal and child health, mental health, and public health. There is a further section giving an annotated bibliography of dissertations. The volume concludes with a comprehensive author index, and a country index.

Conspicuously missing is the literature from Asia. The omission of such a vast literature is not explained. We might hope that Asia will be covered in a third volume.

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STEFAN WINKLE, *Johann Friedrich Struensee. Arzt, Aufklärer und Staatsmann*, Stuttgart, Gustav Fischer, 1983, 8vo, pp. [vi], 655, illus., DM.98.00.

The latter half of the eighteenth century in the German-speaking lands truly deserves to be considered an enlightened age for one very good reason: it produced professional men whose insight into the ways and means of reform issued from a clear-sighted and hard-headed familiarity with the social problems of the day. Among these must be counted Johann Friedrich

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Struensee (1737–1772). The son of a Lutheran Pietist clergyman in Halle, Struensee studied medicine at the university there and learned early on the particular brand of reforming spirit that trusts in the righteousness of its own cause. But Struensee, whose active career of reform began after 1757, no longer felt bound to any religious motivation and moved in circles whose scepticism and political outcry against the despotic rule of kings (Prussian and Danish) was secular and professional. In Altona, near Hamburg, a traditional enclave of free thinking, Struensee began to publish on a wide range of reforming propositions whose strength was their encompassing foresight: that relief from illness and death for the population considered as a whole did not derive from individual cures, but depended on agricultural and economic change (free peasantry, a mercantile system not based on luxury goods); on fostering enlightenment in regard to unhelpful superstitious cures (abolishing certain forms of quackery), and on introducing better hygienic conditions and better education. These are traditional Enlightenment themes, and Struensee characteristically popularized his reforms in short-lived, because opposed, periodicals. He was obviously competent and rose to power, but as a rationalist on the slippery, smooth, and corrupt floors of the polished court of Christian VII of Denmark. He became Count Struensee, the *éminence grise* writing edicts for reform, mostly at night, while keeping in check a thoroughly unbalanced king, an orthodox clergy out for his blood, an unhappy military, and an aristocracy unfavourable to a rationalism upsetting the usual sources of income. He was beheaded in 1772 while the court danced and played to show its total unconcern.

These are the bare bones of a biography from which much could be gleaned about the role of a pre-revolutionary Enlightenment on the continent and its tragic commitment to reform. It is possible to extricate some of its history from Stefan Winkle's book, but only if one is well versed in reading between the lines. Unfortunately, Winkle falls for court gossip as if it were truth, not political manoeuvre. Winkle includes such a welter of confused excerpts taken from all manner of books that a student of the period can only gasp at the half-truths rewoven to support all the old clichés: the dark ages beaten back by one tragically enlightened medical man; bigoted orthodoxy; frivolous women poking for lice among their powdered and pomaded wigs – and so much more. Winkle makes much of the thrashing of the young in those cruel times, but it takes much thrashing to make a good historian. Mainly because historians, and not necessarily a physician collecting *aperçus*, learn the hard way to separate the wheat from the chaff.

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GEOFFREY EATOUGH (editor), *Fracastoro's syphilis* (ARCA Classical and Medieval Texts, Papers and Monographs, 12), Liverpool, Francis Cairns, 1984, 8vo, pp. viii, 295, £17.50.

This new text, translation, commentary, and index will, it is hoped, direct attention to the most famous poem in Renaissance Latin, Fracastoro's *Syphilis*. The translation is accurate, the notes helpful, the discussion of medical problems judicious, and Dr Eatough's work supersedes in almost every way the standard English rendering by H. Wynne-Finch, 1935.

Yet at the same time, opportunities have been lost. Little attempt is made to study the development of Fracastoro's scientific ideas on the basis of the various surviving drafts of the poem and the book *On contagion*, or to place them against the broader background of discussions about syphilis (for which Proksch's *Geschichte der venereischen Krankheiten* is fuller than Luisinus and less polemical than Bloch). It is assumed that the theory of *semina morbi* in the poem must be the same tripartite theory of contagion as revealed in the later book, an impression strengthened by the placing of the discussion of the book before that of the poem. The Lucretian phrase, as argued in this journal, 1983, 27: 27, need not be so interpreted, and it is better to see Fracastoro as being led from problem to problem over almost four decades than as formulating the whole of his theory of contagion at a single stroke. Consideration of Weidmann's study of *De antipathia* (1979) and, still more, of Pellegrini's essential *Origini . . . della dottrina fracastoriana del contagium vivum* (1950) would perhaps have saved Dr Eatough from this error of perspective.