

In the end, then, the volume confirms that psychiatry in Communist Eastern Europe was moved by most of the same dilemmas and enthusiasms faced by its Western counterparts. Volker Hess, for instance, tells us that over-crowded facilities and a lack of funding for outpatient treatments, not party doctrine, were responsible for leading authorities in East Germany to rely on sedatives for handling institutionalised patients. And Mat Savelli reveals that in Yugoslavia, where professionals enjoyed a relatively large degree of independence from Moscow, psychiatrists looked to the West, not Pavlov, to draw inspiration for innovation.

This being the case, it is left to consider where the future of historical studies of Eastern European psychiatry lies. After reading this book, two things come to mind. First, it is increasingly clear that Marxism-Leninism had only a very limited effect on the content of psychiatric thought. Where state socialism's influence was most felt, instead, was in decision-making over the funding of mental health care. More research therefore needs to be done on the ways in which planned economies shaped the structure and consumption of psychiatric services. Second, given that it is now apparent that the 'iron curtain' hardly shielded Eastern European psychiatry from long-term trends and international forces of change, specialists in the field will need to conduct more comparative histories as well as studies that explore developments over lengthier periods of time.

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Anna Katharina Schaffner, *Exhaustion: A History* (New York: Columbia University Press, 2016), pp. i, 291, \$30.00, hardback, ISBN: 978-0-231-17230-1.

'Eat often to beat tiredness. Perk up with exercise. Lose weight to gain energy. Sleep well. Reduce stress to boost energy. Talking therapy beats fatigue. Cut out caffeine. Drink less alcohol. Drink more water for better energy.' Sounds familiar? These are the some of the 'self-help tips to fight fatigue' that the UK National Health Service offers on its website.¹ Feeling constantly exhausted – also known as 'tired all the time', or TATT – affects one in every ten people in the UK, according to the Royal College of Psychiatrists.² This comes as no surprise: almost everyone has felt exhausted at some point. Work demands, immunological diseases, constant technological communication and even our political climate mean stress levels are running high in our era, resulting in physical and mental exhaustion. But is this specific to our period? Can we say that, given our technological age and work-centred lifestyles, ours is the most exhausted generation in history? In *Exhaustion: A History*, Anna Katharina Schaffner, Reader in Comparative Literature and Medical Humanities at the University of Kent, argues that this is not the case: people in the past have experienced exhaustion just as much as us, although their explanations for it might have been different.

Schaffner sets out to answer some very basic questions: What do we mean by exhaustion? Is exhaustion a subjective or objective, individual or collective experience? Is it a physical or a mental ailment? These are important issues that have a long tradition in fields like the history of psychiatry and, more recently, the history of emotions.

¹ 'Self-Help Tips to Fight Fatigue', *NHS Choices*, 21 February 2015, <http://www.nhs.uk/Livewell/tiredness-and-fatigue/Pages/self-help-energy-tips.aspx>.

² Michael Sharpe and David Wilks, 'Fatigue', *BMJ*, 325, 7362 (2002), 480–3.

Exhaustion offers an ambitious grand narrative account of the condition, from classical antiquity to the present day. Beginning with Galen, as such narratives often do, Schaffner explores historical explanations for exhaustion throughout eleven short chapters: from causes arising within the body such as humoral imbalances, immunological disorders and stress; to factors affecting willpower and the mind, such as sinful behaviour or the psychoanalytical death drive; to external influences, including the alignment of the planets, the effects of new technologies and the pressures of capitalist society. Her sources are not limited to scientific and medical treatises, but also include works by philosophers and novelists who wrote about exhaustion and its diseases.

In using both medical and literary sources, Schaffner aims not only to explore semantic and nosographic questions, but also to deal with the experience of exhaustion. In order to address both subjective and objective aspects, she discusses metaphors for exhaustion and links them to medical ideas about the body: neurasthenia, for instance, a late nineteenth-century nervous disease consisting in the over-expenditure of nervous energy caused by the particular vicissitudes of modern industrial civilisation, was described in terms of an overdrawn bank account or the depletion of a nervous battery; and chronic fatigue syndrome, an immunological disease whose causes are still under debate, is described in terms of war, like a country invaded by external enemies. These metaphors and the narratives constructed around them have consequences not just for the patient's experience, but also for the treatments that are proposed at different times, be they lifestyle changes, psychotherapy, or electricity. Furthermore, they help reflect on the extent to which 'questions of responsibility, agency and willpower' (p. 235) have been implicitly or explicitly addressed.

Given Schaffner's background in comparative literature, it is no surprise that her strength lies in weaving intellectual histories of exhaustion with literary narratives that illustrate different metaphors of the condition, revealing how the body was conceived and how the subjective experience of being exhausted was expressed. Moreover, although her chapter titles and introductions follow a chronological account of different theories about exhaustion, they are not focused on particular historical moments, but address themes that cut across them up to the present. This makes her analysis particularly engaging. Chapter 3, for instance, titled 'Saturn', offers an introduction to the astrological interpretation of exhaustion offered by the fifteenth-century Italian humanist Marsilio Ficino (1433–99), and is presented alongside an analysis of the German writer W.G. Sebald's novel *The Rings of Saturn* (1995) and the Danish director Lars von Trier's *Melancholia* (2011). This allows Schaffner to reflect on 'the emotional, spiritual, and cognitive burden that comes in the wake of self-reflexivity and as a consequence of the new avenues of rational and critical enquiry open to the early modern subject' (p. 71). Such a structure particularly benefits the first four chapters – 'urs', 'Sin', 'Saturn' and 'Sexuality' – which move from the past to the present, exploring previous accounts of exhaustion that identified external factors as its cause, and using it to reflect on modern psychological interpretations of the condition.

Schaffner's analysis is in line with traditional histories of psychiatry aimed at a non-expert audience. For instance, despite the non-conventional approach of linking past disorders with present experiences, her use of the concept of exhaustion is relatively rigid. It becomes clear from the start that her analysis of the disorder refers largely to mental exhaustion, or exhaustion as a psychological condition, which limits the exploration of the concept's boundaries. For example, Schaffner's account ends with a reflection on a current problem: the issue of global warming and the imbalance between available resources and the population demand, which she uses to conclude how our modern lifestyles and

technologies continue to affect our wellbeing, sharing a similar discourse to that articulated by George M. Beard – the proponent of neurasthenia – a century earlier. It would have been interesting to see a more developed analysis of this theme, since *Exhaustion* focuses entirely on human experiences. Looking at the exhaustion of the Earth's resources might have provided an opportunity to explore the concept more broadly, and contributed to answering some of the questions raised in the book's introduction.

Written in an engaging style, *Exhaustion* offers a comprehensive introduction to the history of the condition. It will be useful to readers interested in its particular topic, but also provides opportunities for learning about some of the principal issues in the cultural history of health and disease up to the present day.

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Olivia Weisser, *Ill Composed: Sickness, Gender, and Belief in Early Modern England* (New Haven, CT: Yale University Press, 2015), pp. ix, 281, \$85.00, hardback, ISBN: 978-0300200706.

In *Ill Composed: Sickness, Gender, and Belief in Early Modern England*, Olivia Weisser analyses approximately ninety primary sources from 1630–1730 to provide vivid pictures of how the sick thought about, experienced and communicated their sufferings. Her primary concern is to capture the voices of patients with the title phrase 'ill composed' referring to both the physical state of sickness and the act of writing about it (p. 15). This is above all a sociological study influenced by the theories of Talcott Parsons from the 1950s, and Weisser views both sickness and gender as socio-culturally constructed. In the introduction she defines sickness as 'a learned and patterned cultural exchange' (p. 2). The author argues that illness can best be viewed as stories of symptoms that came and went and needed to be interpreted and communicated by patients. This gave them varying degrees of autonomy and authority that would fade away after the 1730s with the rise of increasingly scientific or disease-based medicine. Gender as a concept is not examined in any detail but it becomes evident this book is an attempt to ameliorate the neglect of it in the historiography of early modern patients and practitioners.

The first chapter, 'Curing and Caring for the Early Modern Body', gives an overview of how patients and practitioners interacted and the considerable use of self-medication. Weisser sets this within the context of early modern humoral theory, and the theory of the six 'non-natural' causes of illness. 'Learning How to Be Ill' considers the significance of religion, morality and identity in how men and women developed narratives of sickness, as they struggled to make sense of their symptoms and sufferings. The third chapter, 'Emotional Causes of Illness', includes an interesting discussion of the role of emotions in acting as explanations for the causes of ill health. Chapter 4, 'Suffering on the Sickbed', analyses the self-writing and correspondence of Weisser's subjects for what they reveal of the experience of being bedridden in the social space of the sickroom. How they attempted to interpret and communicate bodily discomfort is then examined in 'Perceptions of Pain'.

All of these chapters are based upon findings from the author's survey of the writings of thirty men and twenty-two women from the middle to upper levels of English society from 1630–1730. Weisser is aware of the bias of her sources toward the wealthy and is careful to draw conclusions that show how gender was and was not significant in sickness.