

## Book Reviews

treatise shows that “women’s sicknesses were women’s business”, or that “women were the sole obstetricians” (pp. xv–xvi). Indeed, that a surgical manual would contain a gynaecological handbook, complete with illustrations of various foetal presentations, suggests the opposite.

The claim that this is “the first English gynecological handbook” wants qualification also, as similar works, entirely in Latin and containing much the same material as this, can be found in England as early as the thirteenth century.

The serious reader will want more information about previous scholarship on the manuscript than Rowland provides. J. H. Aveling, who, after all, did discover MS.2463 and publish an important part of it in 1874, deserves more than a brief condemnation for the incomplete nature of his work and his supposed antifeminism. The only footnote he receives is to another publication not containing his transcription. Even a male chauvinist merits a correct bibliographical entry, but Dr. Aveling’s pioneering work does not get this (for vol. 14 read 2).

If the reader does manage to discover Dr. Aveling’s article from Rowland’s meagre clues, he may well wonder why she fails to reckon with two of his major points: that the “Trotula” text (as she calls it) is part of a longer surgical work, i.e. MS.2463; and that most of it is a translation of the Latin of Roger of Parma, often verbatim. This latter is an important fact, to Middle English scholarship if not particularly to the author’s trendy feminism.

Rowland can also be taken to task for the dismal quality of her translation and transcription. Time after time, the sense of the text is distorted by rudimentary errors. A few examples: On p. 62, “bries” is not “water” or “urine”, but Middle English “breu”, meaning “eyebrow”, or “eyelid” (as a glance at Roger’s Latin would have revealed). P. 94 and elsewhere, “mete oyle” is “meat (olive) oil”, not “suitable oil”. On p. 108, keep MS. “ypericon”, which is “hypericum”, a medicinal plant, and not an error for the elsewhere unattested “empiricon”. P. 80, the MS. has “mumie”, which is a kind of gum, not “munne”. P. 134, “yf she conceyued in the fyrst of the twelue yeres” means “if she first conceived before the age of twelve”, not “if this is the first time that she has conceived for twelve years”. P. 152, “sillicie fetide” is not “fetid salt” (?), but “cotula fetida”, a flower. On the next page, “fomentatio” is “fomentation”, not “fermentation”. On p. 156, “*cor tangentis emollit*” does not mean “it weakens the pleasure of touching”, but “it (an antiaphrodisiac) makes the heart of the one who is touching gentle”; nor, on p. 158, does “*desiderium coitus et pollucionem*” mean “lasciviousness and the desire for intercourse”, but “desire for intercourse and masturbation”. The list need not end here.

The transcription contains many inconsistencies, particularly in the expansion of ambiguous contractions and in the citing of marginalia. Why some of the marginal notes added to the MS. by the rubricator are included by the editor and some are silently ignored, is never explained.

In a field as underexplored as medieval English medicine, any book attempting to give insight to both specialist and non-specialist is bound to enter into an accepted canon. The casual reader will no doubt be both entertained and informed by this book’s lively prose and illustrations; but, beware, this is a house built on sand.

Faye Marie Getz  
Wellcome Institute

BETTY COWELL and DAVID WAINWRIGHT. *Behind the blue door. The history of the Royal College of Midwives 1881–1981*, London, Bailliere Tindall, 1981, 8vo, pp. 111, illus., £2.50 (paperback).

To write the history of an institution which spans a whole century in the space of eighty-eight pages is a difficult task. To do it well, the author must set the story against the changing political, economic, and social context, explaining key events in relation to the power of political and professional pressure groups, the ruling social and moral codes, and the organization of government.

This book, unfortunately, largely fails in this task. The role of the College, or Midwives’ Institute, as it then was, in the struggle for a Midwives Act is sketchily and unreliably dealt with. (Opticians were *not* registered in 1890, but 1958.) Major conflicts are ignored. We are not told that one section of the medical profession hostile to midwives sought their restrictive

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regulation only as a step to their speedy replacement by their rival general practitioners; that the Institute faced bitter opposition from Mrs. Bedford Fenwick's Nurses' Association; and that even their medical and lay supporters often tried to persuade them to abandon their reasonable demands for *one* representative on what was to be their regulatory body. So events are mentioned but not explained. Earlier (unsuccessful) attempts at gaining registration had been made by doctors. We are told, "The men had failed to act. Now their sisters . . . would try". It was well for the English midwife that those early medical attempts did *not* succeed, since their purpose – her extinction – was only too clear.

In the same vein, we are told that in 1936 King George V died and the Institute sent a message of sympathy to Queen Mary; it was also the year of the Abdication. We are given no indication why, after all the struggles to obtain the first Midwives Act, the crucial act of 1936, *requiring* local authorities to provide an adequate *qualified* midwifery service, and empowering them forcibly to retire (with compensation) unsuitable midwives, passed without opposition. The fact of the Abdication is more important than the pro-natalist concerns of a parliament expecting a major war, and willing to foot the bill for safer childbirth and more live infants, and in so doing, raising the qualified midwife to the status of a local government servant like the Health Visitor or District Nurse!

The latter part of the book deals better with some of the burning issues of the day. Some, however, would question if continuity of patient care *can* be provided by a *team* (p. 87), and the only reference to the threat to their status many midwives feel is posed by the modern medicalization of childbirth in hospitals is an assertion that as many midwives will still be needed. The thorny question of whether these women will actually *be* midwives, or merely machine-minders for the doctor, is totally ignored.

It is a pity that this opportunity to describe the enormous difficulties which the hard-working leaders of the Midwives' Institute faced – struggles with sections of the medical profession, sometimes with the Medical Officer of Health and the health visitor, with the Local Government Board and later the Ministry of Health, and – occasionally – with the Central Midwives Board itself, has not been adequately taken. They worked hard, and they deserve better.

Jean Donnison  
Department of Applied Social Sciences  
North East London Polytechnic

ANDREW SCULL (editor), *Madhouses, mad-doctors, and madmen. The social history of psychiatry in the Victorian era*, London, Athlone Press, 1981, 8vo, pp. xv, 384, illus., £16.00.

As the soft underbelly of the medical profession, psychiatry has proved an attractive target for social theorists of various persuasions. No one has defined the reasons for their interest more clearly than Michel Foucault: "If one poses, for a science such as theoretical physics or organic chemistry, the problem of its relations with the political and economic structure of society, doesn't one pose a problem which is too complicated? Isn't the threshold of possible explanation placed too high? If, on the other hand, one takes a knowledge such as psychiatry, won't the question be much easier to resolve, since psychiatry has a low epistemological profile, and since psychiatric practice is tied to a whole series of institutions, immediate economic exigencies and urgent political pressures for social regulation? Cannot the interrelation of effects of knowledge and power be more securely grasped in the case of a science as 'doubtful' as psychiatry?"

Foucault himself, as G. S. Rousseau has observed, is essentially a philosophical poet with no more than a subsidiary interest in certain aspects of the history of medicine. Nonetheless, the heady brew of poetic understanding, erudition, and wrongheadedness which made up his *Histoire de la Folie* has loosened the tongues of medical and non-medical critics alike. For the anti-psychiatrists, it has lent support to a crude view of psychological medicine as what one of their spokesmen has called "a convenient but ultimately misguided way of evaluating the social meaning of madness", and of curing as "a sort of anti-healing – a process not entirely dissimilar to the curing of bacon". And for social scientists, it has helped to focus attention on the past as