

title-page and the opening passages of the text, it proves to be an exemplar of al-Samarqandī's *Al-Asbāb wa-l-'alāmāt* copied in 1099/1687. As other copies of this work and of al-Kirmānī's commentary upon it are described in the alphabetical list (Ar. 45, 46, 62, 67, 84, 106.i, 106.ii, 106.iii, 111; pp. 38, 71-72), this one too should have been included. Ar. 120, also marked as neither used nor identified, comprises eight different essays in different hands on different types of paper of different sizes from different periods, some in Arabic and some in Persian, on a variety of topics. All this is surely worth noting; and it is difficult to see why the last item, a fragment on medical plants (and in Arabic) has not received a proper entry.

Finally, the entries for MSS that are catalogued pose certain difficulties. The researcher is not provided with the *incipit* or *explicit* for the listed texts. Iskandar recognizes that this information is most useful and desirable, but explains that high printing costs prevented him from including it (p. vii; see also pp. 1-5 for samples of entries as the author originally hoped to prepare them). Be that as it may, earlier cataloguing efforts had already provided a provisional description of the UCLA Arabic medical MSS. Hence, further coverage of the same ground really should have been more complete.

In lieu of citations of *incipit* and *explicit*, the compiler states, he will provide detailed descriptions of the MSS. These are, of course different kinds of information, and one does not replace the other. In any case, spot checks here and there again reveal difficulties. In the detailed entry on the *Ḥalbat al-kumayt*, for example, one is advised that the text bears catchwords; but nothing is said about the far more important fact that these catchwords are sometimes wrong, or that the text as presently bound and foliated is in several places discontinuous. The marginalia are not "few", but numerous, and include (fol. 151r) an interesting multicoloured and labelled mechanical diagram. The owners' entries at the beginning of the text are noted and identified, while nothing is said of the mass of information at fols. 49r-50v, where two pages originally left blank have been filled with later owners' entries, diagrams, comments, and so forth. On a relatively minor but potentially confusing point of detail, the use of the term "receipt" in the sense of "recipe" (Ar. 73.ii, 79.ii, 115, in the Index of Manuscripts, and elsewhere) is an archaism that many even well-informed readers may fail to comprehend.

In sum, much scholarly work has undoubtedly been devoted to this handlist, the publication of which renders a major corpus of Arabic medical and scientific MSS more readily accessible. Nevertheless, it seems fairly clear that what has been published is an unfinished project in which much remained to be completed, reviewed, and rechecked. Given the importance of the UCLA collection, the problems occasioned by premature publication are all the more unfortunate.

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BEAT RÜTTIMANN, *Wilhelm Schulthess (1855–1917) und die Schweizer Orthopädie seiner Zeit*, Zurich, Schulthess Polygraphischer Verlag, 1983, 8vo, pp. xv, 272, illus. SFr.88.00.

This beautifully produced volume, with its nearly two dozen plates, is a model of medical hagiography. Written by the Chief Doctor of the Balgrist branch of the Schulthess Orthopaedic Institute, published by the Schulthess press, and printed at the Schulthess printing works, it pays homage to a minor figure on the orthopaedic stage at the turn of this century. Indeed, one suspects that Wilhelm Schulthess would long since have been forgotten had it not been for the success of the private clinic that he and the surgeon August Lüning founded in Zurich in 1883. As it is, his name endures inside his homeland partly because he was a member of one of Switzerland's most wealthy and influential families, and because his younger brother was to become the President of the Federal Republic.

Schulthess was essentially a paediatrician at a time when some of the most exciting work in that field was being conducted in the area of orthopaedics. After training at the Children's Hospital in Zurich and conducting a study tour of the major German medical centres, he completed his dissertation in 1882, shortly before joining forces with Lüning (1852–1925) - described here as "the father" of orthopaedic operations. Schulthess's reputation was based

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mainly on the corrective mechano-therapeutics that he advocated and the various mechanical appliances that he devised. It is not possible to determine from this book how much of the clinic's reputation actually hinged on Schulthess's social stature, and on the fact that he co-founded and helped to edit the *Zeitschrift für orthopädische Chirurgie*.

Much of this book is devoted to recalling the names of Switzerland's orthopaedic worthies (which grossly distorts both their national and international stature); to listing the distinguished visitors to Schulthess's clinic (which misrepresents its contemporary importance); and, above all, to furnishing a pristine and wholly uncontextualized account of Schulthess. Lacking an index, and written without much attention to chronology, the book may fascinate past and present members of the staff of the Schulthess Institute, but it is of little use to historians.

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WILLIAM BUDD, *On the causes of fevers (1839)*, edited by Dale C. Smith, Baltimore, Md., and London, Johns Hopkins University Press, 1984, 8vo, pp.xii, 164, £9.55 (paperback).

William Budd, best known as an epidemiologist, was a Victorian provincial physician of enthusiasm, sensibility and intelligence, who might well have served (in fact as well as fiction) as a model for the Lydgate of *Middlemarch*. In a period of struggle early in his career, in 1839, having produced theses on rheumatic fever and on the spinal cord, and conducted experiments on emphysema, Budd entered for a prize scraped together by the Provincial Medical and Surgical Association. The prescribed subject, continued fever, was indicative of current practical and theoretical concerns. William Davidson won with an exposition of compromise solutions, which Budd himself, characteristically, called "well overloaded". Budd came second with a "philosophical" analysis making approving reference to such authors as J. C. Prichard and Henry Holland. This essay almost brazenly presented the framework of his later views, including his dependence upon analogy, his rejection of "inclusive" modes of reasoning including the statistical, and his use of smallpox as the type of all epidemic disease. Budd's later publications show not so much changes of view as his efforts to find means of substantiation congenial to his contemporaries, who, like the judges of 1890, pressed for "facts". Until Smith's discovery of the essay, all this had to be inferred from Budd's own later use of its contents. The manuscript (80 pp. as printed) is anonymous, but, as Smith clearly shows, there can be no doubt as to its authorship. It is not simply the essay as submitted, but carries the judges' comments (rather scanty) and more lavish annotations made at different times by Budd himself. Smith's meticulous editing brings out the interest of the manuscript as a working document. His introduction (39pp.) gives Budd his honourable but not unique place in the early evolution of the distinctions between the different forms of fever, and an afterword (42 pp.) accurately recounts British developments after 1839. Smith does not attempt to give access to the contemporary mind, nor is he interested in all Budd's views. Instead, he points to the "clarity and modernity" of Budd's account of typhoid, and applauds his superior understanding of scientific reasoning. Budd's philosophical tendencies could have been more fully accounted for; Smith's commentary and the essay itself do, however, clarify the lines of influence between French and English-speaking investigators of fever, especially Budd himself. The elaborate care spent on this document can only be attributed to Budd's importance in the run-up to the germ theory and the triumph of bacteriology. In a broader sense, perhaps, it can be justified by the ramifications of the controversies over the nature of fever, and by the persistent low quality of most of the existing secondary literature.

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