

Book Reviews

antimonial cup recipe, affixed to the back of a manuscript puff for the cup and surrounded with critical comments in another hand. Nevertheless, the volume gives a useful and unusual insight into the world of unlicensed medicine in the early seventeenth century.

David Harley, Oxford

SOHEIR A. MORSY, *Gender, sickness, and healing in rural Egypt: ethnography in historical context*, Conflict and Social Change series, Boulder and Oxford, Westview Press, 1993, pp. xiv, 235, £30.00 (0-8133-8166-5).

Dr Morsy is a leading medical anthropologist who has published numerous valuable studies on her native Egypt, based primarily on field work in a Nile delta village for which she uses the pseudonym of "Fatiha". In this book, her work in this area culminates in a broad-ranging study of conceptions of sickness and healing in rural Egypt.

In Fatiha, the author argues, medical diagnosis is retrospective and focuses on social causation rather than underlying pathology. Peasant views spring from their conviction that all misfortune is connected in some way to the supernatural; and as the management of social relations is the central concern of their lives, this is where ultimate causes are usually sought. Spirit possession, the evil eye, sorcery, and the machinations of supernatural creatures dwelling underground or in rivers or ponds are almost always evoked when a villager falls ill, and in the quest for the ultimate social causes for such afflictions, gender relations play a pivotal role. "Sayeda", for example, suffered from umbilical hernia and chronic infectious bronchitis, but to Sayeda and the other villagers, the real problem was a family quarrel and mistreatment by her husband: a malicious "gaze" had brought her under the control of a spirit which not only caused her emotional and physical malaise, but also threatened to kill her husband if he beat her again. Significantly (if not surprisingly), Morsy finds that while women are deemed more susceptible to such afflictions than men, spiritual maladies are most frequent among villagers, whether men or women, who are identified as less powerful than their fellows.

Health care in Fatiha thus involves considerable recourse to charms, potions, and various other means to defend against supernatural forces, plus a variety of home remedies and locally available materia medica. Practitioners include both specialists in natural medicine (humoralists, bonesetters, and herbalists) and spiritual healers and sorcerers. The popularity of the latter reflects not the efficacy of their cures, but rather the fact that these remedies make sense in terms of the way the peasants construct their medical world. Ultimately, it is this harmony which legitimates supernatural medicine to the villagers of Fatiha.

Despite this, modern cosmopolitan medicine is highly esteemed. Beyond the family context, formally trained physicians are the peasant's first choice in about 70 per cent of the cases Morsy recorded, and are sought for acute illnesses involving bodily disfunctions. A villager will sometimes visit the doctor, wear amulets, and seek the intercession of a deceased saint, all in an effort to reverse a state of ill health, and even traditional healers will resort to cosmopolitan practitioners. The peasants see no contradiction in this behaviour, which Morsy regards as typical of the medical pluralism of rural Egypt.

The gender issues discussed by Morsy are of particular value, and she makes a major contribution to our understanding of the role of women both in health care and as patients, though some of the feminist agenda she formulates is highly doubtful. Her own book offers many examples proving that government health policy under Nasser, however laudable for the improvements it brought about in rural conditions, can hardly be characterized as "state feminism".

The arguments of this book are in the main clearly presented, and only occasionally lapse into jargon (e.g., p. 51: "a husband is likely to overindulge in the exercise of the culturally sanctioned authority with which the local organisational power structure endows him", meaning "husbands often batter their wives"). This reviewer found the translation of Arabic terms overly literal at times, and in potentially misleading ways. The *ḥāmil al-Qur'ān* (p. 51), for example, is not a "learned carrier of the Qur'ān", but someone who has memorized the whole text; a *ṣūfa mabrūka* (p. 186) is not a "blessed wool", but a vaginal suppository, of whatever drug composition (certainly not usually wool) to which some charm has been associated.

Book Reviews

This is a very important work which casts new light on traditional medical systems and beliefs, and makes vital contributions to the understanding of gender in the construction of medicine in rural Egypt. Though Morsy's research relates to the modern period, it is also relevant to the understanding of popular medicine in medieval times and in other parts of the Middle East. As there is so much of value to be pursued, it is especially unfortunate that the book has no index.

Lawrence I. Conrad, Wellcome Institute

R. GRAHAM LILLY, *An account of rural medical practice from the 18th century onwards in Long Buckby, Northamptonshire*, Dunton Bassett, Volcano Publishing, 1993, pp. 95, illus., £3.25 (1-870127-99-4).

Dr R. G. Lilly has traced the roots of Long Buckby's present medical practice to 1730 in the person of Thomas West, possibly followed by Hubert Floyer in about 1753, and Edward Swinfen who seems to have arrived in 1770. There were two independent practices running in parallel which did not amalgamate until 1954 in the time of Dr Lilly. If the author had widened his sources he would have found that West had received a bishop's licence to practise physic and surgery in 1719, and that Swinfen had been the apprentice of Richard Swinfen, apothecary of Hinckley, Leicestershire, and a member of a well known medical and pharmaceutical family in the Midlands.

The book gives an unfortunate impression that the writer's knowledge of medical history is ill digested. The Act of 1815 gave the Society of Apothecaries the right and the obligation to examine all those who intended to practise as general practitioners, not just its own members who, in any case, they had always examined if they hoped to obtain the Society's Freedom. The records of the Apothecaries show that many provincial practitioners in the seventeenth and eighteenth centuries were apprenticed to members of the Society, which disposes of his question as to where apprentices "learnt the work of the apothecary" (pp. 3, 4). It is certain the hospital physicians did not give instruction in dispensing as he suggests (p. 5). It is true that a five-year apprenticeship was a requisite for the Licentiatehip of the Society of Apothecaries, but the student also had to attend two courses of lectures on anatomy and physiology, two courses on the theory and practice of medicine, one course on chemistry and another on *materia medica*; he also had to produce a certificate to show he had had medical practice for at least six months in a public hospital, infirmary or dispensary. The Royal College of Surgeons' Diploma (MRCS) was not instituted in "about 1815" (p. 7), although it was somewhat stiffened; all members of the old Company of Surgeons were offered membership of the new College on its formation in 1800.

Nevertheless there are two particularly interesting sections in the book. Firstly, Dr Franklin Churchouse's eighteen year-long fight (1887-1905) to obtain a pure water supply for the village in which he took parish, district and county councils to task; and secondly, the re-organization and amalgamation of the two practices. It is obvious that all was not well in rural practice in the immediate post-war years. Surgeries were relegated from the doctor's own house to wooden huts in the garden and doctor dispensing was scarcely of a high order. Dr Lilly writes that there was a "reasonable range of tablets for 1949" but the mixtures had been whittled down to Nos 3, 4, and 7 plus Mist. Alba. He increased the range but nevertheless one wonders how he can describe the late 1940s as an "era of therapeutic barrenness". Surely this was the very period when a wide range of sulpha drugs was introduced and the penicillins were increasingly obtainable?

We may well feel that the National Health Service is not all that it might be but looking back over the years one can see that progress has been made. Medical history, like other forms of history, helps us to get things into perspective.

J. Burnby, British Society for the History of Pharmacy

JAMES LONGRIGG, *Greek rational medicine: philosophy and medicine from Alcmaeon to the Alexandrians*, London and New York, Routledge, 1993, pp. ix, 296, £35.00 (0-415-02594-X).

The book's stated aim is to help in "disentangling the highly complex relationship between philosophy and medicine in the classical period". It is perhaps not made clear enough for the general reader that the word "philosophy", here and throughout, means, in the first instance, the scientific