

“art” of anatomy had to be squeezed into the margins—images of dissected bodies were quite literally stretched to fill the entire visual surface of a plate or figure, leaving no room for plots, gestures, props and fun. By 1800, the fantastical aspects of anatomy had been downgraded as merely “frivolous”, banished to the extraneous realms of academic, moral and historical art, popular health and science education, political cartoons, films, fiction and, most recently, contemporary art.

Inevitably the details of his story are more complicated. For one thing, anatomical images were mostly the result of collaborations between two artists: one brandishing a pencil, the other a scalpel. Plotting the balance of power and fame between them reveals fascinating insights into instances of stylistic evolution. Printing innovations also influenced the direction of change. But it was another form of technology (the camera obscura) that suggested photographic accuracy as the most compelling visual ideal; with the resulting “relentless gaze” being perfectly embodied in the collaborative work of Jan van Riemsdyk and William Hunter, whose images almost terrorize their subjects. These new conventions of realism also encouraged artists to disentangle primary anatomical details from secondary elements of symbolism and morally suggestive contexts. Bernhard Albinus’ anatomical atlases of the 1740s, for example, with their lavish backgrounds of wild life were reprinted thirty years later without accompanying rhinoceroses and the like. Each passing style, each step in the process of “getting real”, is clearly mourned by Sappol. Efforts to give viewers unmediated access to exactly what artist–anatomists saw, inevitably, he suggests, led to pictures that were decreasingly pleasing to look at.

Produced some three years after the exhibition of the same name, *Dream anatomy* is itself a philosophical reflection upon a set of images now packed away in the drawers and shelves of a library. It works more through repeated visual assertions than any substantially marshalled body of evidence, and offers very little by way of explanation about what propelled these unfortunate changes: some combination of theology, epistemology, and economics he briefly

speculates. Even the question of who bought these atlases and prints and why, or indeed who supported their production, is barely remarked upon. But none of this matters, for it is not his subject. Instead Sappol has treated us to a passionate account of some of the most astonishing incarnations of anatomical inspiration, and for that we should be very grateful.

Ken Arnold,
The Wellcome Trust

Richard Sugg, *Murder after death: literature and anatomy in early modern England*, Ithaca and London, Cornell University Press, 2007, pp. xiv, 259, illus., £23.45, \$45.00 (hardback 978-0-8014-4509-5).

Murder after death is a study of anatomical knowledge, practice, and reference in early modern England, as explored in the plays, poems, sermons, and stories of the period. It contributes to a growing field of scholarship interested in understanding the history of the body not only through the study of scientific discovery and medical progress, but also through the close reading of the contemporary and often popular literature that seized upon such advances for its source material.

The book begins with a consideration of the impact continental anatomical works like Andreas Vesalius’s *De humani corporis fabrica* had on the English literary imagination. In particular, Sugg emphasizes how the methodology and investigative impulses of anatomy presented new rhetorical opportunities for writers. In an appendix to the book, he provides a bibliography of 120 English “anatomies” published between 1576 and 1650, and this empirical evidence provides strong support for his ensuing argument about the relationship, both etymological and epistemological, between anatomy and analysis. In the practice of both, he argues, investigators split and sort their subjects into sections for scrutiny, incrementally asserting mastery over the entire corpse / corpus. Both are involved in a quest for knowledge, its limits, and its control, and Sugg frequently returns to

this point as he takes his readers on an eclectic and enjoyable journey through topics as various as early modern stage properties, the drug trade, pornography, and vivisection.

The first two chapters investigate anatomy's links to aggression as expressed through revenge and cannibalism. Through vivid examples, Sugg explores how writers used extreme violence not only as a means of representing spectacular physical torture, but also as a device through which a victim's soul could be controlled and conquered. The following two chapters pursue questions of body–soul sympathy more explicitly, suggesting that while anatomy initially reinforced religious ideas about the soul, over time it came to endorse a view of the body as separate, secular, and mechanistic. In the final chapter, Sugg returns to the subject of violence, considering how the practice of vivisection or “live anatomy” in this period was both entangled in ontological questions about personal identity and otherness, and also influential in the development of modern medical science.

Though engagingly written throughout, one of the limitations of the book is its failure to set out and stick to what parts of anatomical discourse it wishes to explore. Sugg covers an admirable list of topics as they relate to anatomy, but at times his discursiveness weakens his argument, resulting in a sense that everything, from knowledge to power to violence to sexuality, can be read as an expression of anatomy. Furthermore, given the vast amount of scholarship in the past fifteen years that has concerned itself with unravelling the relationships among anatomy, literature, and the body, it is unfortunate that Sugg does not introduce his book with a review of the field and his place in it. Such an undertaking might have helped stave off the inevitable suggestion that the work follows too closely in the wake of Jonathan Sawday's *The body emblazoned* (1995), which over a decade ago made similar claims about the affiliation between literary and dissective enquiry in early modern English culture.

Still, Sugg's work offers its own insights, mining lesser-known dramas like Henry Chettle's *The tragedy of Hoffman* and John Stephens's *Cynthia's revenge* for new

explorations of anatomy and its metaphorical and literal uses. His chapter on cannibalism keenly probes the incongruity between early modern tales of New World savagery and the Old World belief that the consumption of mummified human flesh was a useful medical treatment. Finally, his detailed appendices illustrate the scope for anatomical rhetoric in early modern writings and will be of great use to other scholars in the field.

Erin Sullivan,

The Wellcome Trust Centre for the
History of Medicine at UCL

François Martin Mai, *Diagnosing genius: the life and death of Beethoven*, Montreal and London, McGill-Queen's University Press, 2007, pp. xviii, 270, illus., £17.99, CA \$34.95, US \$29.95 (hardback 978-0-7735-3190-4).

The events of Beethoven's life have captured the popular imagination, making him the subject of innumerable biographies and at least two recent bio-pics. One question which has puzzled his biographers is how Beethoven could compose sublime music while labouring under ill health, particularly his deafness. François Mai, a professor of psychiatry at the University of Ottawa, offers some answers. Drawing on material from a wide range of sources, Mai makes good use of both primary and secondary works. Contemporary accounts of the composer's health are accessible in Beethoven's own writings, as well as those of his many physicians. To these Mai adds modern diagnostic tools, such as a toxicological analysis of a lock of Beethoven's hair.

Despite the wide range of evidence presented, much of Mai's analysis is likely to frustrate the medical historian. In *Diagnosing genius* Mai is principally concerned with the description and interpretation of the medical evidence. Aiming at comprehensiveness, Mai endeavours to provide a more complete interpretation of the symptoms than has previously been achieved. He ranges over a wealth of conditions, from alcoholism, to syphilis, to lead poisoning, to