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to gain control, men had to “reconceptualize the phenomenon of birth and bring to it a different meaning from the one it had in the hands of the midwives.” (p. 21) Oh dear, how did they do that? By declaring the body to be a machine, rather than the natural organism the midwives considered it to be, and then constantly fiddling with the machine in order to improve its performance. Forty dreadful pages, the “scientific approach” constantly in sneering quotation marks, then a section on how the man-midwives and physicians booted the poor old woman-midwives out the door. These pages stand the historical record directly on its head. Arney says that eighteenth-century midwives, who had only “nature” to buttress their claims, were pushed out by doctors who now argued that, since birth was not a “natural matter”, only men and their instruments could attend it. In fact, as Arney could have discovered by simply reading the obstetrical textbooks of men like Fielding Ould or William Smellie, the new generation of man-midwives that flourished in London after the 1740s argued vigorously *for* nature, and for leaving the natural birth process alone. Only when the mother was obviously in trouble did they want to rescue her, and then with the relatively innocuous forceps rather than by destroying the infant. It was the midwives, not the doctors, who continued to interfere with the natural process of birth, by their ceaseless manipulations and dilatations and manual fetchings of the placenta. And because Arney is so obviously clueless about all this, the usefulness of his book is restricted to the only period he knows something about, the years after 1920.

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JEAN GUILLERMAND (editor), *Histoire de la médecine aux armées*, tome 1: *De l'antiquité à la révolution*, Paris, Editions Lavauzelle, 1983, 4to, pp. xii, 511, illus., Fr. 495.00.

This impressive work is the first volume of a study which will embrace the story of military medicine from the earliest times up to the present day. The current volume begins with the literally skeletal evidence of prehistory, and terminates at the eve of the French Revolution.

The enterprise has been officially commissioned by the French Comité d'Histoire du Service de Santé, and the editor and author-in-chief, Jean Guillermand, is himself a military doctor of considerable experience, and also, as is evident in this tome, an accomplished historian. The basic research has been assisted by a team of twenty-seven authorities on medicine, history, and archaeology, and not least of Dr Guillermand's achievements has been to re-work the material into a well-organized and readable narrative.

Guillermand defines three periods in the great span of centuries under discussion, namely 'Antiquity', 'The Middle Ages' and 'Modern Times'. Each of these sections is rounded off by a succinct conclusion and a detailed bibliography. A final chapter (which Anglo-Saxon readers will find heavy going) provides a general survey. Matters of medical interest are convincingly related to changes in society, government, and culture, and to “advances” in the art of war and weapons technology, as manifest in relics as various as the bones of Stone-Age men transfixed with slivers of flint, the hacked-about mummies of warriors who died for their Pharaoh in 2063 BC, or the neat cranial cuts inflicted by the laminated swords of the Carolingian period.

The discussion of the earlier centuries is altogether admirable, and culminates in a treatment of the Graeco-Roman worlds which is worthy of the best traditions of Continental classical scholarship. As Guillermand points out, Scribonius Largus could write about the ethics of military medicine in terms that would be considered unexceptionable today. As regards the Middle Ages, Guillermand contrasts the near-stagnation of Western Medical procedures with the phenomena of the healer-saints, the monastic houses, and the orders of hospitaliers. The advent of firearms, which lodged metal deep in tissues, accounts in part for the remarkable progress made by military medicine in the sixteenth century. The prostheses and other items of surgical hardware have a remarkably modern look to them, and the heroic medieval technique of amputation (a great blow with an axe) is replaced by procedures such as those illustrated in Hans von Gersdorf's *Feldbuch der Wundarzeney* (1513), where we see a stricken limb bound with a tourniquet and removed with a saw. No less important was the setting up of the first designated military hospitals, founded by the Spanish armies in the second half of the sixteenth-century, and widely imitated in Europe.

The author is justly proud of the establishment of the French Service du Santé in 1708. It is,

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however, necessary to point out that Guillermand's discussion of eighteenth-century military medicine is largely confined to bureaucratic developments within France, and that even here his description of the shortcomings in the care of the sick and wounded in the Seven Years War (p. 422) glosses over the abominable mismanagement that killed off forty out of every hundred soldiers admitted to hospital (see L. Kennett, *The French armies in the Seven Years War*, Durham (North Carolina), 1967, pp. 132–136). We hear nothing of the work of Van Swieten and Brady in Theresian Austria, nor of the striving of Dr Fritze in the Prussia of Frederick the Great.

With these reservations, the first volume of *Histoire de la médecine aux armées* may be thoroughly recommended to anybody who has a passable command of French and a serious interest in military affairs and the history of medicine. The typography is well set out, and the many illustrations are effectively integrated with the text.

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PATRICE CUGNETTI, *L'Hôpital de Grenoble des origines à la fin du Second Empire (XII<sup>ème</sup> siècle – 1870)*, Grenoble, Editions du Centre de Recherche d'Histoire Economique, Sociale et Institutionnelle, 1980, 2 vols., 8vo, pp. 865, [no price stated], (paperback).

This exhaustive and somewhat exhausting study proceeds in the classic fashion of the French doctoral thesis to “fill a void in local history”. The text is punctuated by numerous graphics, poorly reproduced and sometimes difficult to interpret. Drawing upon a massive bibliography comprising eighty pages of archival sources alone, Patrice Cugnetti delivers what he promises in his introduction: a systematic survey “more from the institutional than purely historical perspective” which is rich in data on administrative matters.

Cugnetti terminates the discussion of Grenoble hospital institutions with the demise of the Second Empire because he believes it is only after 1870 that profound structural changes begin to transform the hospital into something resembling its modern form. At the same time, he notes that many traditional attitudes persisted well into this century, notably the association of the French hospital with poverty. In 1926, a government circular still declared that hospitals were not intended for patients who could afford to pay for medical care.

Cugnetti distinguishes three broad chronological stages: from the medieval origins of the hospital to the end of the fifteenth century, from the sixteenth century to the end of the Old Regime, and from the French Revolution until 1870. During the first period, Grenoble hospitals were founded and supported by the charity of individual benefactors inspired by religious motives. Church administrative authority gradually yielded to secular administrators under the control of the municipality. The second period, particularly from the latter part of the seventeenth century, saw the imposition of royal direction, notably the unification of institutions for public assistance into the prison-like Hôpital Général, the establishment of the Charité, a progressive military teaching hospital run by monks, and a hardening and secularization of public attitudes toward charity now seen as a means of preserving social order.

French Revolutionary aspirations to make medical assistance a right of all citizens did not survive the constraints of a rising liberal economy. Under Napoleon, religious nursing orders returned to the hospitals from which they had been barred, and the nuns continued to be better trained than secular nurses until the end of the Second Empire. The law of 16 Vendémiaire, year V, returned the hospitals to municipal administration. During the nineteenth century, charity remained a principal source of revenue. Popular fears of hospitalization continued to be fuelled by the burial of the dead in common graves without shrouds or coffins, a practice which survived until mid-century.

Despite the mass of data provided, the reader is left largely on his own to contrast the general characteristics of the old-style hospital with its modern counterpart and to speculate about reasons for the shift to the latter. What seems to emerge from the Grenoble case study is the key significance of state financing, not only of hospitals, but of alternative institutions and mechanisms for public assistance and prevention of illness, thus permitting the modern hospital