Book Reviews


This attractive little book is presented as a detective story. Keel uncovers and then unravels a minor mystery – who was the English source of Pinel’s ideas on the inflammation of membranes? He uses this particular question to approach a general and important issue – how do we account for the birth of anatomical medicine?

The Englishman in question was J.-C. Smyth, pupil of Cullen, associate of William Hunter and of Pringle, son-in-law of Monro secundus. This representative of British medical enlightenment, in 1792, distinguished between inflammation of serous membranes and inflammation of mucous membranes. Pinel picked up the distinction in his own work on membranes and so provided one of the key themes of Bichat’s tissue theory. This in turn was central to the new medicine of Revolutionary Paris. So we move from a passing reference in Pinel to a general comparison of British and French developments.

The predominant explanation of “anatomical” or “hospital” medicine has relied on studies of the French case. Several major authors have emphasized the anatomical approach of the French surgeons and the philosophical background of medical science (Condillac’s method of analysis). They have focused on the Revolutionary upheaval, which broke the traditions of an older physic and raised a unified medicine based on hospital practice. Keel argues that anatomical medicine required no pre-conditions peculiar to France. He sees the British voluntary hospitals, plus the anatomy schools, plus the teaching at Edinburgh, as supplying all that was required.

Since this book appeared, Keel has also undertaken studies of the German states to develop his general argument that anatomical medicine was appearing in several centres because the social conditions necessary were widespread in Europe – surgeons were rising, physicians were taking note, new or re-organized hospitals (and/or military camps and/or prisons) were providing “case material”.

The questions raised are many and stimulating. The social history of medicine should be as international as its intellectual history. But we need comparison not conflation; the national traditions were different enough to afford a whole series of nice comparative studies. We need to know more about how hospitals were used for teaching in Britain – we cannot assume that medicine in hospitals was necessarily “hospital medicine”. If British arrangements produced or could have produced “hospital medicine”, why was it seen as a French invention, and imported to Britain in the 1820s by students returning from Paris? Why did the French and German developments of anatomy and pathology come to supersede the Hunterian tradition as London anatomical teaching moved into hospital and university schools?

Some would argue that the Parisians, because of the Revolutionary restructuring, formalized the new ideas more systematically and thus gained international influence. Others might see “formalization” as the fundamental shift, the rebuilding of medicine on new foundations. The latter will not wish to deny that British surgery was powerful and was penetrating medicine; but they may see in the neglect of Smyth the strength of contrary traditions. Keel fails to explain this neglect because he deals chiefly in “good ideas”. But “good ideas” alone do not restructure fields. The work of Smyth is evidence that some of the pre-conditions for anatomical medicine were fulfilled outside France, but this is only a beginning.

J. V. Pickstone
University of Manchester Institute of Science and Technology


In the first half of this interesting study, the author offers the “pathocensus” (“les états pathologiques au sein d’une population déterminée dans le temps et dans l’espace”) of the French Basque region in the eighteenth century. There were no catastrophic epidemics (the last plague outbreak here had occurred as early as 1550), and, although precise quantification is
Book Reviews

impossible, it would appear that illnesses associated with poverty, lack of bodily hygiene, bad food, and certain professions were particularly widespread. The second half of the study is an account of the overall development in the eighteenth century of the region's sanitary infrastructure (medical personnel, hospitals, etc.). Towns were less healthy than the countryside, local hospitals were few and of little utility in the fight against disease, there were few doctors and they tended to price themselves out of the reach of most of the population, there was a surprisingly dense network of surgeons (though it still seems rather hasty to talk of surmédicalisation [p. 166] and all medical practitioners, in career terms, were avid for employment (attachment to a local grandee, a hospital, etc.), which ensured them a steady income as well as local notability. Many of these findings, in themselves, are relatively unremarkable. And their value would have been enhanced had the author widened his focus to include practitioners of the "alternative medicine", which seems to have been particularly widespread in an area with a distinctive popular culture and folklore. Nevertheless, historians will be grateful for the existence of so useful and readable a study of a region well off the conventional byways of historical scholarship.

Colin Jones
University of Exeter


FREDERICK F. KAO and JOHN J. KAO (editors), Recent advances in acupuncture research, New York, Institute for Advanced Research in Asian Science and Medicine, 1979, 8vo, pp. xiv, 788, illus. [no price stated].

T. J. Kaptchuk's book is a general work on Chinese medicine, Ming Wong's is the edition of a text, and Kao's shows the practical results of research. Together they provide a good picture. Kaptchuk says: "This book is both, a presentation of Chinese medicine and a commentary on it, by a Westerner committed to a Western perspective who also knows China and is a practitioner of China's medicine... Based on ancient texts, Chinese medicine is the result of a continuous process of critical thinking, as well as extensive clinical observation and testing. It is also, however, rooted in the philosophy, logic, sensibility and habits of a civilization entirely foreign to our own. It has developed its own perception of the body and of health and disease. ... For instance, Chinese medical theory does not have the concept of a nervous system. But it can be used to treat neurological disorders. Without having an endocrine system it treats endocrine disorders. ... The Chinese doctor sees a 'pattern of disharmony' and tries to restore balance." The illustrations and diagrams in this textbook of Chinese medicine are very helpful, particularly in the chapter on the pulse where a diagram is given for each of the twenty-eight principal pulses, with the three possible positions, near the skin, near the bone, or in the middle. This cannot be found in Manfred Porkert's The theoretical foundations of Chinese medicine.

Ming Wong has translated and edited a work called Shang-han Lun by Zhang Zhong-Jing of about AD 150 to 219 – a contemporary of Galen. But, unlike the work of Galen, it has constantly been revised throughout the centuries and is still a standby for doctors. This is possible because there has never been a break in Chinese consciousness comparable to the Western Scientific Revolution. Not even recent events culminating in China's now deplored Cultural Revolution have brought about this break. Body and mind have always been regarded as an organic whole. Any technical innovations were accommodated in the system of relationships which medicine seeks to bring into harmony. The book under review deals with the symptoms of conditions and their treatment, chiefly herbal. There are good illustrations of the circulation of energies in the body and of some of the medicinal plants.

The book edited by Professor and Doctor Kao, father and son, is interesting because it reports on investigations using scientific apparatus of a procedure which cannot yet be explained satisfactorily in scientific terms. Clinical studies with follow-ups are described. Acupuncture here is not only used for analgesia but for the cure of drug dependence, cardiovascular malfunctions, asthma, and other complaints.
Detective fiction is a subgenre of crime fiction and mystery fiction in which an investigator or a detective—either professional, amateur or retired—investigates a crime, often murder. The author Julian Symons has commented on writers who see this as a detective story, arguing that "those who search for fragments of detection in the Bible and Herodotus are looking only for puzzles" and that these puzzles are not detective stories. In the play Oedipus Rex by Ancient Greek playwright Sophocles, the title character discovers the truth about his origins after a mystery; a mystery whose elements are clearly presented to the reader at an early stage.