

on gender as a category within the racial majority – whites of European extraction – in both institutions in order to study colonial ideologies of masculinity and femininity. In particular, men who apparently were too mentally and physically weak to cope with the harsh conditions of colonial life, and women who could not fulfil their functions of giving birth and raising children, caused anxieties about the viability of the colonies. Yet the prognosis of future usefulness was gendered, too: while men detained in the asylums had failed, institutionalised women could be rescued. The sixth and final chapter deals with those considered ‘the other’ on a racial basis. The Chinese in Melbourne and Maori in Auckland were small yet visible minorities both in the asylums and in the general population. By subjecting them to the process of categorisation in the casebooks, the institutions marked their difference not only in racial but also in social and cultural terms.

In her conclusion, Coleborne emphasises the power of institutions to produce categories, to subject people to them, to create social and cultural norms and, thus, to include and exclude individuals, to create social structures, attribute social status and construct racial and gender identities. She also highlights the importance of the local as well as the imperial context for these processes. Yet, despite this insistence, the results for both case studies remain amorphous and indistinct. Despite the potential for a comparative or entangled historical perspective, Coleborne homogenises Melbourne and Auckland. Thus, the data collected in the casebooks of the Yarra Bend Asylum and the Auckland Asylum serve Coleborne to mutually reinforce her conclusions about the production of a colonial white settler identity in both institutions and not to point out local peculiarities of Victorian and New Zealand identities. She locates complexity and difference within Australia and New Zealand, not between them. This emphasis on the commonalities also makes it more difficult to determine the specifics of both Australasian colonies within the framework of the Empire or, more generally, the formation of modern institutions and societies. Therefore, the ‘Empire’ Coleborne refers to in the book’s title remains remarkably vague. Imperial power structures and connections rarely feature prominently. The book’s perspective is firmly Australasian; the British Empire serves mainly as a backdrop for local developments while its relevance for the case studies remains unclear. In the end, ‘Insanity, Identity and Empire’ leaves the impression of a contribution to the regional debate about the national identity of two former colonies of white settlement in the age of globalisation and multicultural immigration.

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Megan J. Coyer and **David E. Shuttleton** (eds), *Scottish Medicine and Literary Culture, 1726–1832* (Amsterdam and New York: Rodopi, 2014), pp. v–xi, 315, \$98.00, hardback, ISBN: 978-90-420-3891-2.

Scottish Medicine and Literary Culture, edited by Megan Coyer and David Shuttleton, is a necessary contribution to the field of literature and medicine, in which very little has appeared focussing on the Scottish context – despite the fact that Scotland was a hotbed of medical discovery and education during the Enlightenment period and generated some of the most recognisable medical theorists and literary writers of the time. Demonstrating that literature was vital to the development and accessibility of medicine in Scotland and beyond while ideas about medicine shaped the creative output and reception of several

long eighteenth-century literary writers, this significant volume expands a vital field in new and sometimes surprising ways.

The essays in *Scottish Medicine and Literary Culture* are not organised into formal sections, but several themes emerge that seem to have worked as the organising principle for their placement in the volume. Craig Franson's lead essay – one of the finest in the volume – explores a little-noted aspect of Adam Smith's delineation of sympathy in *The Theory of Moral Sentiments* (1759): that it betrays Smith's simultaneous fascination and repulsion in response to the physicality of pain (8), a point that promises to have great repercussions for the currently popular field of affect studies, which frequently considers the relationship between the body and sympathy. Wayne Wild also explores the notion of sympathy in his essay, albeit with a focus on the work of Francis Hutcheson and its influence on physician John Gregory's contributions to medical ethics in his work of professional self-fashioning (48). Wild asserts that Gregory tapped into the broad cultural affection for the so-called 'man of feeling' from novels of sensibility in order to replace classical notions of the proper role of the doctor with Christian-based ideals (65, 54). The next essay, by the late Robin Dix, explores the medico-literary output of the Newcastle-born Mark Akenside on the topic of embryonic development and details the debate between epigenesists and preformationists. Like Wild's, Dix's fascinating essay examines the notion of professional self-fashioning, both medical and poetic: Dix delineates Akenside's bold decision to strike out on his own in favour of epigenesis in his thesis from 1744 and relates these ideas to Akenside's 'concept of poetic creation' as demonstrated in *The Pleasures of Imagination*, published in the same year (74). Another essay about professional self-fashioning follows: Catherine Jones's chapter on Benjamin Rush – the Philadelphia physician and only medical signatory of the American Declaration of Independence – considers Rush's 'Travels through Life' (1800) as part spiritual autobiography and part self-defence against William Cobbett's mockery of Rush's liberal use of 'phlebotomy' in the Philadelphia Yellow Fever of 1797. Such consideration of the far-reaching effects of biographical writing is further elucidated in Rhona Brown's subsequent essay about Robert Fergusson, who died at 24, but whose reconstruction in biographies from over two centuries lived on to reveal more about the cultural values of these life-writers – particularly on the topic of so-called 'vices' like alcoholism – than they do about the Scottish poet (123). With respect to autobiography, Allan Beveridge suggests something similar in his chapter on Robert Burns's epistolary and poetic depictions of his melancholy. Noting Burns's use of the language of sensibility, Beveridge shows that the poet's textual self-fashioning reveals the cares of his society as much as it tells us about Burns's individual reality (152). To this point in the volume, the themes that unite the essays are textual self-fashioning and the culture of sensibility.

Megan Coyer's excellent chapter on the Blackwoodian author and physician Robert Macnish orients *Scottish Medicine and Literary Culture* in a different direction by moving away from the culture of sensibility towards its dark cousin, the Gothic. Coyer's lively discussion of Macnish's signature literary form, the 'tale of terror', presents it as an 'experimental medico-philosophical genre in dialogue with the popular debate regarding phrenology' – hilariously dubbed 'turnipology' in parodies of the practice (172) – in early nineteenth-century Scotland (13). Coyer's essay shows how distinctly medical concerns inspired not only new literary topics in the period but also new literary forms, as the 'tale of terror', Coyer asserts, was a variation on the case study (a subject that Joel Faflak has illuminated in several notable critical works on Romantic literature). Relatedly, Katherine Inglis argues that Walter Scott develops a new literary topic born of contemporary concerns

about experiments on human blood transfusion in *The Fair Maid of Perth* (1828). In this timely essay on the fictional figure of the ‘revenant’, or the dead-alive, Inglis argues that the topic has a far wider reach than simply the medical: such advances in emergency medicine inspired larger existential questions about the increasingly blurry line between life and death. Scott is also the focus of Lindsay Levy’s chapter, which, however, focuses on the writer’s collection of medical texts – or, rather, the notable lack of medical self-help texts in Scott’s collection. Notably, David Shuttleton’s essay on medical biography as a literary genre – specifically, the hybrid and multi-authored biography of William Cullen – appears to reprise the organising principle of the first part of the volume because it concerns one of the founding figures of nerve theory, which G. S. Rousseau and many after him have linked most convincingly with the culture of sensibility. Cullen is thus mentioned frequently in the initial essays of *Scottish Medicine and Literary Culture*, which makes the placement of Shuttleton’s essay somewhat curious initially. Yet, the publication date of the last volume of Cullen’s biography – 1859, even though the first volume was published in 1832 – suggests that chronology drove the placement of Shuttleton’s chapter in this volume, for which the range of years is 1726–1832. The figure of Cullen and the late time period also links Shuttleton’s chapter to the final one, written by Gavin Budge, who discusses the work of Cullen’s ‘wayward pupil Dr John Brown’ and the transatlantic reach of his ideas about Brunonianism and nervous exhaustion (15). Budge’s essay reaches late into the nineteenth century – and even across the ocean in its discussion of Harriet Martineau – and it therefore concludes the volume suitably by gesturing to the wide-reaching effects of Scottish medicine and its influence on literary culture.

Scottish Medicine and Literary Culture is a valuable contribution to the field of literature and medicine. It argues convincingly that the Scottish Enlightenment was at the root of what we think of as interdisciplinarity today. However, this review would not be an honest one if I did not mention that the volume is plagued by several technical problems, which include: an incomplete index that does not account for all of the critical sources mentioned in the essays; punctuation errors and typos (eg. pages 14, 147, 149); erroneous spelling of proper names (eg. ‘Papavoine’ (179) versus ‘Papvoine’ (181, 182)); and the presentation of the name of James Tilly Matthews as ‘James Matthew Tilly’ (which is moreover spelled ‘Tilley’ on page 222). But these quibbles cannot overshadow the usefulness of a work that offers a range of highly original insights and lively, informative discussions about the ‘centrality of natural philosophy and medicine to the project of the Scottish Enlightenment’ (1), as Coyer and Shuttleton summarise the project. *Scottish Medicine and Literary Culture* is of great value for the field of literature and medicine and offers a necessary corrective to the past marginalisation of medicine and privileging of the ‘scientific and philosophic over the literary’ (3) by too many other histories of science.

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Marcos Cueto and Steven Palmer, *Medicine and Public Health in Latin America: A History* (New York: Cambridge University Press, 2015), pp. vii + 306, \$29.99, paperback, ISBN: 978-1-107-63301-8.

In the last three decades, the range of scholarship examining the history of medicine and public health in Latin America has expanded immensely, generating new insights about