

covering the general medical history of the relatively under-researched city of Bombay during “high colonialism”, Ramanna’s work is a welcome addition to existing historiography. Moreover, the book is based on an impressive amount of primary sources, both printed and manuscript material. In this sense it lays the foundation for further studies into the medical history of Western India. It attempts to give a wide coverage of medical issues in the second half of the nineteenth century and consequently has less to offer in terms of specific in-depth studies. It is an account of western medicine and Indian reactions to it. Indian medicine and its practitioners play only a very limited part in the analysis.

The first chapter deals with medical practitioners and is probably the weakest part of the book. Too much attention is devoted to the piling up of biographical details. While such information is probably useful for readers with a special interest in Bombay, it is of less relevance to the generally interested historian of medicine and could have been put in an appendix. The reader should not, however, be discouraged, as this is only a minor problem in the remaining chapters. Chapter two tells the story of hospitals and other medical institutions in Bombay and one is struck by the willingness among the Indian élite to contribute funds for institutions of western medicine. It is also interesting to compare this kind of Indian initiative with the implementation of sanitary policies (the subject of chapter three), an area where Indians were less visible and more hostile. Two interesting chapters are devoted to issues with a gender perspective. Chapter five deals with the workings of the Contagious Diseases Act—which aimed to control prostitution—while chapter six investigates medical resources for women and the limited possibilities for (mainly western) women to work within the medical profession.

The book concludes that the colonial attempt to disseminate western medicine was generally cautious and fraught with contradiction. Similarly, Ramanna convincingly demonstrates how the Indian response to western medicine was mixed and ambiguous. Generally, it is a major strength of the work that it is sensitive to

the varied and complex nature of the response to western medicine in Indian society. By contrast to these balanced views, the western perception of Indian medical traditions is presented unambiguously as simple contempt and straightforward rejection. While Indian medical traditions were probably never more beleaguered than in the second half of the nineteenth century, it nevertheless—to this reviewer at least—seems doubtful that such a simplistic view is justified.

On the whole Ramanna’s findings are largely in agreement with David Arnold’s seminal treatment of colonial medicine in *Colonizing the body* (Berkeley, 1993), but she does give a valuable regional illustration—and sometimes also modification—of Arnold’s interpretation.

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**Joanna Grant**, *A Chinese physician: Wang Ji and the ‘Stone Mountain medical case histories’*, Needham Research Institute Series, London and New York, RoutledgeCurzon, 2003, pp. xi, 209, illus., £55.00 (hardback 0-415-29758-3)

The expression “Make a mountain out of a mole hill” conveys exaggeration succinctly. In this case, however, Joanna Grant makes the sixteenth-century physician Wang Ji’s *Stone Mountain medical case histories* more significant than either the author himself or his book would be on their own. Grant’s focus on only one physician and just one of his dozen or so books, contrary to expectations of a picturesque but unchallenging stroll up and down a mound, transcends the adage by fleshing out multiple dimensions of one sixteenth-century Chinese physician’s life and his *Stone Mountain* legacy. Here the sum is greater than the parts. This is a brief book intended for historians of medicine not only in China, but also Europe, and almost anywhere else. The weight of *Stone Mountain*, in fact, relies on its emphasis of a specific time and place, one individual physician’s career, his recorded clinical encounters with patients, and the competition he experienced with both élite physicians—like himself—and a range of

other non-élite healers. One more illustration that medicine in China was diverse, varied, multiple, and complex is welcome. Grant's specific contextual examples also wield power precisely in their pointed challenge to previous generalizations.

*Stone Mountain* is structured according to three explicit methodologies: traditional socioeconomic and biographic description, textual analysis, and gender analysis. The first chapter places Wang Ji in the medical culture and contemporary society of Huizhou prefecture, a hilly mountainous region in Anhui province of Central China, west of modern-day Hangzhou. In the sixteenth century, one of the wealthiest and most dispersed groups of merchants emerged and spread out from this region to all other major urban areas of China. The conspicuous public consumption of this new moneyed merchant class, for Grant, contributed to Wang's anxiety about a concomitant decline in society's moral fibre. This psychological anxiety explains, in part, the dominant selection of cases for the *Stone Mountain* of men suffering from what Wang diagnosed as the depleting consequences of over-indulgence.

The second and third chapters comprise the textual analysis dimension of this tight book. Grant first discusses medical case histories generally as a genre, their structure, multiple functions, and new form during the sixteenth-century publishing boom. Then she looks closely through the case histories as a unique lens into the historical medical practice of a physician very much of his time, place, and culture. Published in 1531, *Stone Mountain* also marks a milestone in Chinese medical publishing as the first known compilation devoted to the medical case histories of a single physician. The compilation contains over a hundred of Wang Ji's own case histories as well as those of other physicians whose views supported his own (but which Grant does not analyse), several doctrinal essays arguing his positions on diagnosis and treatment, and biographies of him and his father. Grant examines its multiple didactic, social, and strategic functions: to educate future generations, to bolster the author's reputation, to record strange medical occurrences, and, for his

disciples who collected and compiled the case histories, to secure a lineage affiliation with a respected physician. In the absence of modern-day medical institutions such as research labs, accredited schools, hospitals, and professional trade organizations, early-modern Chinese physicians relied instead on kinship ties, master-disciple relations, and publishing projects to assert their cultural authority in a highly competitive pluralistic medical arena.

Comparable to the persuasive function of published collections of legal cases, which also rode the sixteenth-century Chinese boom in publishing, Wang chose cases for *Stone Mountain* that supported his positions in current medical debates regarding causation, diagnosis, and treatment. He thought, for example, that most of his male patients should be treated with warming and replenishing drugs—particularly, ginseng and astragalus root—to boost the protective system he thought they most likely depleted through excessive sex, wine, and rich food. Wang and his disciples chose the cases in *Stone Mountain* to prove the efficacy of what was at the time considered a controversial therapeutic strategy. Grant does not explain, however, both sides of this controversy, its logic, or history. The analogy that Wang Ji modelled his medical case histories on judicial uses of legal cases to support positions in broader debates, although not a new insight, is certainly, however, worth this elaboration. The third chapter enters more concretely into the realm where doctrinal theory and clinical practice meet, individual symptoms and medical depositions converge, and the physician encounters disloyal patients, questioning family members, and serious rivals to his medical authority. Grant conveys well here the battle a physician of Wang's education, status, and reputation had to wage to carve out a niche for his practice in a fiercely competitive environment and at a time when doctors held precious little cultural authority, patients shopped around, and rivals were plenty and near at hand.

Grant complements the historical, biographical, and textual approaches of the first three chapters in the fourth and final chapter where she directs a critical eye on how gender

played out in the 109—roughly a 2:1 ratio of male (66) to female (43)—of more than 170 case histories recorded in *Stone Mountain*. Grant aims her gender analysis of Wang Ji's case histories at the groundbreaking scholarship on gender in Chinese medicine that has, nevertheless, focused almost exclusively on the reproductive disorders of menstruation, conception, and pregnancy. By looking at the full range of disorders women experienced, and not just reproductive ones, Grant makes two arguments. In contrast to the emphasis on reproductive disorders and menstrual regularity found in Chinese gynaecological texts, Wang Ji did not consider menses integral to his diagnosis of female patients suffering from non-reproductive problems. Nor did he consider his female patients to be ruled by their uterus, as many of his European colleagues would have assumed, or even blood, as had been assumed he and his Chinese medical contemporaries believed. Following the lead of other gender theorists, Grant further compares gendered constructions of male as well as female disorders. By tabulating thirty categories of disorders for men and women, she allows the reader to compare easily both similarities and differences between the sexes, and especially differences between reproductive and non-reproductive women. She also finds that not only were men the focus of Wang's medical concern, but also that they were most likely to be diagnosed with a depletion disorder due to excessive behaviours. He dispensed moral advice along with herbal formulas. This is where Grant shows most directly that cultural and historical factors intersect with medical diagnosis and intervention. Wang's anxiety about the immoral consequences of the new wealth, aberrant behaviour, and social aspirations of the emergent merchant class in his native Huizhou region may well have both expressed itself in the *Stone Mountain's* emphasis on male depletion disorders and been one of the main motivations for its publication.

*Stone Mountain*, Wang Ji's chosen literary name, above all reflects his sense of self as a stoic, moral, and upright Confucian doctor administering medical advice as a

moral corrective for a decadent age. Through Grant's systematic, imaginative, and multifaceted analysis, the *Stone Mountain* also gains new stature as a much needed example for comparative work on gender, medicine, and culture that is as well situated in a concrete historical medical practice as it is argued.

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**Montserrat Cabré and Teresa Ortiz** (eds), *Sanadoras, matronas y médicas en Europa, siglos XII–XX*, Barcelona, Icaria, 2001, pp. 317 (paperback 84-7426-561-4).

In 1999, *Dynamis*, the journal of the history of medicine published at the University of Granada (Spain), devoted its volume 19 to women's knowledge and practices regarding healthcare. The wide chronological spectrum of the articles—the majority in English—and the broad range of methodological approaches in which they were written, provided an interesting reflection on, and a comprehensive picture of, the recent developments on the subject. Its publication was very well received within academic circles in Spain, since it brought together for the first time in that country a group of works on issues that had recently aroused great interest in the field of women's studies as well as in that of the history of medicine.

The present book, which contains a selection from the articles in the original volume, aims to reach a broader audience than that of a specialized journal, while attempting to achieve a wider diffusion among a Spanish-speaking readership through the translation of the essays into Spanish. The wise selection of articles provides the collection with chronological and historiographical coherence. The book consists of three sections, devoted respectively to healers, midwives, and female doctors. The diachronic sequence of the sections also articulates the different ways in which women's knowledge and practice of healthcare have developed historically in the West from the Middle Ages.