## Book Reviews

Guenter B Risse, Mending bodies, saving souls: a history of hospitals, Oxford University Press, 1999, pp. xx, 716, illus., £32.50, \$39.95 (hardback 0-19-505523-3).

Guenter Risse's Mending bodies, saving souls, more than a decade in the making, is a tour de force which matches considerable intellectual and historiographical ambition with humane and punctilious scholarship. Risse tells the relatively well-rehearsed story in a distinctive and highly appealing way which will provide pleasure as well as instruction to social, economic, cultural historians as well as to historians of medicine.

Risse is best known for his superb analysis of the emergence of clinical medicine in eighteenth-century Edinburgh. That work was based upon extremely extensive archival research. If the present work sees him venturing fearlessly onto the seas of the longue durée, he has embarked with the same ferocious commitment to scholarship. Exhaustive primary research is out of the question in all sections (though it is clearly in evidence in all the sections dealing with the period from the eighteenth century to the present), but all parts of the volume are underpinned by an extraordinarily wide range of secondary sources (which the publishers, who have otherwise done Risse and his readers proud, have shamefully omitted to group together into a bibliography).

The institutional genealogy of the hospital is well established, and Risse follows in well-worn tracks, stretching from the most ancient to the most modern of times. He begins the story with the temples of Asclepius in ancient Greece, Roman military infirmaries and early Christian xenodochia and ends it with the twenty-first-century hospital as biomedical showcase. This is a tale which has often been told in a traditional Whiggish fashion,

charting the progress of medical triumphs. Risse keeps any such bland historiographical and medical certainties to a minimum: he has some wry reflections, for example, on commercial imperatives on contemporary hospitals, and these institutions' growing iatrogenic effects. Medical triumphalism is more generally kept at bay in two ways. First, Risse chooses a kind of snapshot structure in which lineal influences are underplayed, and in which emphasis is placed upon the hospital's relations to its broader social, economic and cultural niche. Second, he develops a bifocal approach (highlighted in his volume's title) which stresses the applicability of the term "hospital" to any institutional form which combines bodily care and cure with a concern for spiritual and/or psychological well-being. The ideal type of Risse's "hospital" is thus any collective institution in which are entwined and intertwined the double helix of bodily and mental care.

This provides a sufficiently capacious analytical frame for Risse to embrace a very broad range of institutional forms. Though Mending bodies, saving souls is highly sensitive to innovative aspects of the different stages of the hospital's long life, the broad canvas also allows Risse to chart parallels, echoes and re-emergences from within hospital history. Thus the ancient and medieval sections of the book contain much relating to the hospital as house of mercy, refuge and dying. But these functions are not, as is the case with many hospital histories, divested in order to prepare for a bright bio-medical future. The caring aspects of the institution re-emerge in the late twentieth-century hospice for the dying and the AIDS ward for the terminally afflicted. Similarly, though the idea of hospital as locus of segregation and confinement gets most extensive treatment as regards the leper-houses, plague hospitals

and lazarettos of the late medieval and early modern period, these functions re-emerge at other stages of the institutions' history. Nor, for Risse, does the hospital after the "birth of the clinic" have a monopoly of the pedagogic and curative roles: we see the hospital as an institution of teaching and learning and state-of-the-art medical care in many other prior instances. Then again, Risse's broad church approach to the question of what is a hospital also allows him to include mental hospitals (and earlier dedication to spiritual and psychological healing) as part of the same institutional matrix.

Each variant of the hospital "type" is analysed through broadly the same prism. In each case, the hospital's mission, nature of patronage or financial support, organizational staff, patient base and rituals of healing and care are woven into the story. Each section is given greater immediacy and impact by Risse's use of the specific example of a personal narrative—told through the individual's own words. With great ingenuity, Risse has turned up the personal account of one Aelius Aristides in AD 145 to preface discussion of the temples of Asclepius. It says a lot about Risse's approach that in each case—as here—these micro-histories revolve around a patient in a particular institution rather than a practitioner. Thus the section on Enlightenment medicine begins with a case-study of a patient in the Edinburgh hospital whose history Risse has already made his own; thus too a particular case in the University of California San Francisco's AIDS wards begins a section on the hospital's most recent incarnation.

Approaching the hospital in this way—almost as a Geertzian anthropologist—through the "thick description" of a particular case in a particular hospital in a particular period means that the reader is unable to leave out of hospital history those participants and bit-players whose role is often neglected or effaced in other general histories of the

hospital. The doctor comes tumbling down from his elevated perch, and joins the much richer and more variegated world of patients, nurses, volunteers, donors, visitors and cleaners. The rituals of the doctor's rounds are seen in the context of a wide variety of prior and competing forms. This is not hospital care as a dyadic patient/ practitioner relationship, but rather a history sensitive to the complex, textured and multi-layered character of hospital life. The imaginative emphasis on the experiential dimension of hospital care makes this erudite and compelling study memorable and often moving.

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Caroline Hannaway and Ann La Berge (eds), Constructing Paris medicine, Wellcome Institute Series in the History of Medicine/ Clio Medica 50, Amsterdam and Atlanta, GA, Editions Rodopi, 1999, pp. xiii, 406, £60.00, \$100.00 (hardback 90-420-0691-9), £22.00, \$36.00 (paperback 90-420-0681-1).

This collection originated in a symposium at the College of Physicians in Philadelphia on new approaches to the history of the nineteenth-century Paris clinical school, starting with a critical reassessment of the classic works by Michel Foucault and Erwin Ackerknecht (Foucault, Naissance de la clinique: une archéologie du regard médical/The birth of the clinic: an archaeology of medical perception, trans. A M Sheridan Smith, both 1963; Ackerknecht, Medicine at the Paris hospital, 1794–1848, 1967). None of the contributors engages in a significant way with Foucault's larger philosophical claims, but as a group they energetically confront a perception of Paris medicine that he as well as Ackerknecht did much to perpetuate: a radical transformation of medical thinking, education, and practice emerging in France