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amount of information about what contemporaries felt they knew and what they did in actual practice. The first two-thirds of the book covers such topics as remedies, diseases, healthy living, surgery and the knowledge, prevention and cure of the plague. And through this Part I, Wear addresses the similarities, differences, continuities and changes reflected in the ideas and practices of learned physicians, empirics, lay people (to whom he pays considerable attention) and those dismissed as quacks and mountebanks.

Nor is the account merely descriptive; these views are also interpreted and analysed in the context of the political, institutional, and intellectual circumstances of later sixteenth- and early seventeenth-century England. But, unlike most recent works on the medicine of this period, these larger dimensions of the story are not the focus but simply the framework within which the knowledge claims and practices are to be understood.

Moreover, this provides a detailed background for Part II, which looks at the changes and continuities of the later seventeenth century in the face of the "new science" of mechanics and experimentation, accompanied by the decline of Galenism. As he has done before, Wear shows how these changes had some minor impact on practical medicine that was, in the main, more rhetorical than actual.

In the course of this transition, the "Helmontians" tried to bring about a more radical change, not only in the discourse of disease and treatment, but in actual practices. In place of the centuries-old tradition of an "image of the body as composed of a series of channels through which humours and morbid, putrid, ill matter travelled" (p. 407), and which had to be eradicated through bloodletting and purgation, they promoted more gentle, more purified chemical medicines aimed at the diseases themselves. However, by the end of the century this revolution had failed, mostly, Wear argues, because of patient

commitment to the ancient tradition, and resistance to such a radically new approach. The author's strict historical treatment of his subject would not have allowed him to speculate that traditional therapy might also have withstood change unless there had been a strikingly obvious improvement in the results, something that did occur at that time only in the application of Peruvian bark to intermittent fevers. But that was then a herbal not chemical remedy, to which the Helmontians had no special claim.

This is a remarkably detailed account of actual knowledge and practices. Some readers will find it a bit repetitive, and maybe sometimes telling them more about a subject than they want to know. But this was a risk that I believe Wear knowingly took in order to furnish us with a subtle and very rich account of what was actually going on, and I'm glad he did.

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Saul Jarcho (trans. and ed.), *The clinical consultations of Francesco Torti*, Malabar, FL, published on behalf of the New York Academy of Medicine by Krieger, 2000, pp. xxx, 911, illus., \$125.00 (hardback 1-57524-144-7).

Until his recent death, Saul Jarcho, although for many years a practising physician, was a dedicated student of medical history, particularly of matters Italian in the early modern period. His translations of the letters of Morgagni and other Italian doctors, remain invaluable scholarly tools. This translation of the consultation letters of Francesco Torti is assured of an equally warm and grateful reception.

Torti was born in Modena in 1658 and studied medicine in Bologna. He became a professor in his native city alongside Bernardino Ramazzini. The 303 cases

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collected here were written in Italian by amanuenses and seem to have been intended for publication. A further 26 consultation letters are also included but these were seemingly confidential and not for publication. Most, but not all, of the cases begin with a letter of petition, a request for advice from a physician who describes the case. Torti, of course, had not seen most of the sufferers. The patients included many from the nobility, the clergy and a number of nuns. A wide range of illnesses was discussed: asthma, hysterical convulsions, palpitations, difficulty in swallowing and uterine sickness to name but the first five.

Torti was prolix but eschewed great displays of learning. Hippocrates and Galen are called on occasionally, but interestingly much more often Sydenham and Willis. There is plenty of evidence here that, when the case seemed to merit it, Italian physicians had no hesitation in palpating their patients' abdomens. For example a physician to a countess reported she had "obstructions in her pancreatic and mesenteric glands and vessels, which at present can still be felt on palpation" (p. 427). Torti proclaimed he had little time for theory. But of course all the theoretical assumptions of the early modern physician are here: the importance of the constitution, of temperament, humoral balance, regular evacuation and the centrality of diet for example. Torti was not afraid of drugs and exotic polypharmacy. One recipe for arthritis required, amongst other things, oats, China root, sarsaparilla, lobster tails and frog thighs boiled in a pullet's stomach (p. 293). Jarcho has provided a helpful introduction to a valuable window into early modern social and medical life in Italy. It will remain as a longstanding monument to his memory.

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Hippocrate, *Épidémies V et VII*, vol. 4, pt 3, trans. Jacques Jouanna, annotations by Jacques Jouanna and Mirko D Grmek, Collection des Universités de France, Paris, Les Belles Lettres, 2000, pp. cxlviii, 349, FFr 460 (hardback 2-251-00490-4).

The Budé Hippocrates continues to inform and enlighten students of ancient medicine and of Greek. The latest volume, continuing an edition, translation, and commentary on *Epidemics 5* and *7*, breaks new ground in many ways. It is the first edition to contain a full report of the readings of all the major manuscripts, although the gain for the text is less than in previous volumes, since Wesley Smith's 1994 Loeb edition had already introduced many necessary changes from the standard vulgate of Littré. Jouanna offers a more disciplined text and a more careful and more extensive description of the manuscripts, as well as of the complicated history of these notes as we have them.

Epidemics 5 is a composite work, of at least two authors. Cases 1–50 are by one physician, cases 51–106 by a second man, writing between 358 and 348 BC. The latter block is repeated, with some, generally slight, variations in *Epidemics 7*: language and doctrine suggest that the author of these notes also wrote the notes in *Epidemics 7* that are not in *Epidemics 5*, although, Jouanna argues, one cannot conclude that the compiler of *Epidemics 5* copied directly from *Epidemics 7* as we have them. Rather, in his view, both authors copied the same set of case notes, produced by one of them, into their own collections at different times. Hence, rather than co-ordinate both collections, as Ermerins did, to produce in both the exact wording of the original notes, Jouanna prefers to edit each separately to give an idea of the state of the text of each collection. This is probably a sensible procedure, although it leads to considerable duplication.

The second feature of importance is the discussion of the cases from a medical