

Book Reviews

Flanders and served that most Catholic of rulers, Charles V, is not mentioned, although Colombo is given counter-reformation Catholic beliefs because he served the Pope, and Fabricius' religious views are deduced from his friendship with Sarpi and his membership of the Venetian intellectual elite.

To his credit, Cunningham is honest in his admission of the theory's weaknesses. He allows that Colombo probably wrote his anatomy book before he came to Rome, and that Vesalius' Lutheranism is a mere inference, but that does not prevent him from indulging in argumentation that is circular or inconsistent. The types of anatomy identified in Part One are "not comparable" (and hence historians are to be barred from comparing them), but in Part Two the very loosest of comparisons are employed to establish a case. Thus, for example, Silvius and Guenther followed Erasmian methods of exposition in their teaching: they may well be Erasmian in religion (certainly untrue for the later Guenther). The politician Contarini's use of Aristotle's *Politics* to praise the Venetian constitution, and Venice's reluctance to obey all the dictates of Papal Rome are taken to indicate that Venetian views on religion ("a patriotic duty") encouraged Fabricius to follow Aristotle. Hypotheses turn into facts, the absence of direct evidence becomes a suggestion, and then reality. The unexceptionable conclusion that religion and science were not then discrete and unrelated fields is turned to mean that anatomy was a religious activity or did not lead to a secularizing worldview (which is far from proved as a universal truth). The rigour applied to the arguments of others is conspicuously missing when Cunningham comes to evaluate his own.

This is sad, not only because the many good things in Part One will be neglected (or, what may be worse, they will compel assent from the neophyte to the speculations of Part Two), but because an opportunity has been wasted to test a provocative hypothesis. There are writers on anatomy (Caius, Gesner, Platter, to name but a few) whose religious beliefs are

knowable and whose anatomical books are easily accessible, and the theory of a religious motivation for the study of anatomy, and of types of anatomy differing according to religion, might well be tested against them. One might then establish how far "Wittenberg anatomy" spread beyond North Germany, and whether this represented a specifically Lutheran (as opposed to a Protestant) standpoint. But such nuances are not for Cunningham, whose commitment to his religious thesis is credal.

An opportunity has also been lost to break fully from the idea that dissection was so obviously a good thing that its non-appearance is to be condemned. As Cunningham rightly insists, anatomy is a peculiar practice, and historians must pay far more attention to why it was ever introduced and sustained. But for that a different book is wanted, one that would leave Italy for Vienna, Oxford, or Salamanca, and would combine the intellectual insights of Part One of this book with the practical details analysed recently by Andrea Carlino and Jürgen Helm. Religion would then be seen as a component in the aims and methods of some anatomists, but not the universal and overriding motive that it is made out to be in this book.

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Wendy Perkins, *Midwifery and medicine in early modern France: Louise Bourgeois*, University of Exeter Press, 1996, pp. x, 170, £25.00 (0-85989-4871-1).

Wendy Perkins has written an excellent account of the work, writings and career of Louise Bourgeois, who had a flourishing midwifery practice at the French royal court at the beginning of the seventeenth century. Bourgeois was notable as a successful and articulate woman practitioner and author. As Perkins shows, she not only retained her position at court when to do so required political skills, she also managed to present herself as a learned authoress and along with

male medical writers deplored quacks, empirics and popular ignorance, but she could also write in her *persona* as a woman of the ignorance of male medical expertise.

Perkins, who is an expert on French literature, has integrated into her account recent work of social historians on medicine: on the medical market place, on patient-doctor relations, especially between women and medical practitioners, and on the social construction of the body. She does so with skill and modesty, yet throughout the book there is an awareness "that Bourgeois—and others—were dealing with real clients who were often suffering and in need of assistance". The book gains from the dialectic interchange between the interpretation that views the practice of midwifery in terms of power relations, and one that sees Bourgeois' work, as she saw it, in terms of the alleviation of the intense suffering perceived to be involved in labour and of the safe management of a dangerous natural process.

Bourgeois' relations with medical men are examined through the case histories and comments in her writings. Often appearing subservient to the opinions of the learned physicians, and certainly well able to speak their language, Bourgeois, nevertheless, at the bedside saw herself as an equal to surgeons and physicians when the practice of medical skills was involved. She boasted that the King "when in the presence of the four perhaps most learned doctors in France, he gave me pre-eminence, enjoining them not to have the Queen take anything if I did not agree with it, and to listen to my advice and follow it". She also made it clear that as a woman she had better and more appropriate skills than those of men to treat women's ills and to manage childbirth.

Bourgeois was, in fact, expert both in the theory and in the practice of learned medicine. It is one of the merits of Perkins' book that the content of the learned theories on pregnancy are discussed and the remedies that were recommended are given some sense of coherence. Remedies are especially difficult for medical historians to write about, they are very

numerous yet they also appear to stand alone outside any connected social and intellectual context and Perkins should be congratulated for writing intelligently about them.

The death in childbirth of Marie de Bourbon-Montpensier, sister-in-law of Louis XIII in 1627 saw the end of Bourgeois' career at court. The autopsy report signed by the learned doctors of the court seemed, in Bourgeois' eyes, to blame her as chief midwife. Her response, the *Apologie de Louyse Bourgeois* (1627), defended her reputation on technical grounds which were argued using the same language and level of knowledge as the learned doctors, but with the added polemical refusal to see herself treated as a scapegoat. To the end, she balanced between the learning and authority of the physicians and the skills of a woman midwife who saw herself as potentially vulnerable in the male world of court medicine.

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Marian Fournier, *The fabric of life: microscopy in the seventeenth century*, Baltimore and London, Johns Hopkins University Press, 1996, pp. x, 267, illus., £39.50 (0-8018-5138-6).

After a period of curious neglect by historians of science, the history of early microscopy is suddenly emerging as an important topic, with three books and several articles appearing in the last year or two. Of the books, only the one under review attempts to give a broad history of the microscope's development and use over the course of the seventeenth and early eighteenth centuries. It is generally agreed that the heyday of early modern microscopy was in the late seventeenth century, the era of Malpighi and Swammerdam, Hooke and Leeuwenhoek. Fournier points out that the microscope continued to be widely used among naturalists in the first half of the eighteenth century as well, but she argues that the microscope had ceased to be a significant instrument of