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said to be “popular” (they wrote learned Latin texts) and both of whom lived in the fourteenth century. Seemingly more relevant figures from the previous century, some with French associations, like Arnald of Villanova, Bartholomaeus Anglicus, Gilbertus Anglicus, and Roger Bacon, are either given less space or omitted.

Hunt footnotes books, dissertations, and articles by the hundred, but again his odd sense of proportion may disturb some readers (as will the lack of a bibliography or detailed index). Works by major historians like Michael McVaugh, Vivian Nutton, and Nancy Siraisi are badly neglected. On a related front, while *materia medica* during the period after Hunt’s texts were written is a can of worms the editor opens himself, his coverage of the topic is eccentric. In his list of edited recipes in Middle English, for instance, the editor inexplicably includes Huling Ussery’s biographical survey of fourteenth-century learned physicians but omits the two largest collections of recipe and antidotal material yet edited in the field: English translations of Guy de Chauliac’s *Grand surgery* and Gilbertus Anglicus’ *Compendium of medicine*. And, given the editor’s stated wish that scientists use his material to further a quest for “Green Pharmacy”, one wishes that he had provided translations of his most interesting recipes for them to employ. Modern plant identifications are helpful, but unless the way in which *materia medica* was used is understood, whatever secrets writers like Hunt hope to reveal will remain hidden.

In short, Hunt’s book deserves praise for the efforts he has expended to make thirteenth-century medical texts better known. His analysis of medieval medicine and pharmacy, however, leaves something to be desired. A more tightly-focused study of the important texts the book prints, in attempting less, might have achieved more.

Faye Marie Getz, Madison, Wisconsin

JOHN WALTER and ROGER SCHOFIELD (eds.), *Famine, disease and the social order in early modern society*, Cambridge Studies in Population, Economy and Society in Past Time 10, Cambridge University Press, 1989, 8vo, pp. xiv, 335, £35.00, \$49.50.

Andrew Appleby, who died in 1980, devoted the whole of his tragically short academic career to the study of the complex relationships between disease and diet, epidemic and famine, population crisis and economic change in England and France from the early sixteenth to the mid-eighteenth century. This volume of essays by friends and colleagues provides a set of invaluable summaries of subsequent research in these fields, together with many new insights of potential and significance. As a synthesis of recent research, the introductory chapter by John Walter and Roger Schofield is particularly valuable.

As Walter notes, “The impoverished repertory of English folktales lacks those tales, common in other early modern European societies, in which peasant culture confronts the dilemma of too many mouths to feed and in which supernatural salvation so often took the form of a super-abundance of food” (p. 75). Why did England so early escape from this kind of “harvest vulnerability”? The book offers a range of answers. Some are primarily economic, as in E. A. Wrigley’s stress on the difference between gross and net agricultural output, and various discussions of market integration and crop diversification and substitution. But much of the difference must be attributed to social factors. Walter and Schofield sum up their review by concluding that “The social order mattered: as a critical determinant of demographic change, and as the basis of political as well as economic institutions, it fashioned the conditions of death, no less than those of life” (p. 73). In a provocative essay, Paul Slack argues persuasively for a new look at the role of social controls, including quarantines, in the disappearance of plague. For high-price years, Walter points to the mediating roles played by a range of social mechanisms. Some improved the access of the poor to food (formal or informal sharecropping, live-in service, or payment in kind). Some increased disposable incomes in hard times (the widespread use of credit or the sale of food to members of the local community at below market prices). Some, for those with the right to claim such community privileges, legitimized claims for local collective support, through toleration of begging, or through charity and the Poor Law, features which, as

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Schofield argues, were probably linked to England's early development of an individuated and mobile society with a minimal dependence on kinship obligations.

However, in spite of these social mechanisms, some high-price years can be linked to local or regional surges in mortality. Particularly in the seventeenth century, this pattern is most common in areas where economic and social welfare development was retarded (as in much of the north of England and most of continental Europe), though, as both David Weir and Jacques Dupâquier show, even in most of France by the eighteenth century, most of any impact of high-price years on mortality was offset by lower deaths in successive years. Moreover, at a detailed local level, certainly by this period, large numbers of people very seldom died of hunger or of "hunger-related" disease. Indeed, this book frequently reminds us that the relationship between poor nutritional status and susceptibility to disease is complex, often minimal, and at times even negative; where mortality crises are associated with poor harvest years, a series of social processes must therefore intervene. One fascinating set of clues emerge from an observation of Weir's. In the eighteenth century, high prices in central France were followed in later years by surges of mortality in Paris and the North, clearly suggesting a gradual spread of infection encouraged by poor diet and dispersed by hunger-induced migration spreading infectious disease. Moreover, some of the social mechanisms designed to reduce hunger among urban populations (for example by price controls and distribution of grain to the poor) could also induce mortality surges if starving people flooded in from the countryside bearing disease with them (a factor which would readily explain the finding that all classes in some French cities suffered in food shortage years).

Andrew Appleby would have been fascinated and provoked by this book; it is a fitting memorial.

Michael Anderson, University of Edinburgh

FRANÇOIS DU PORT, *The decade of medicine or The physician of the rich and the poor in which all the signs, causes and remedies of disease are clearly expounded*, ed. H. Diehl and Georg Hartmann, Heidelberg, Springer, 1988, 12mo, pp. v, 216, DM 64.00.

This is a beautiful little book that gives the impression of reading in modern English the seventeenth-century *La decade de médecine ou Le médecin des riches et des pauvres*. Composed in Latin verse early in the century by François Du Port, the book was published in French and Latin verse in 1694 by one of Louis XIV's physicians, Du Four. H. Diehl translated it into modern German, and David Le Vay made the translation into English prose (one presumes working with the original rather than the German, but that is not made clear).

The one-page preface (the only introductory material there is) simply announces that because Du Port was a "country doctor" who practised for 30 years, he was able to "report the symptoms and causes of different diseases", recording his "experiences" in Latin verse. In fact, as one would expect, the book contains no first-hand comments, whatever Du Port's experience. Instead, it follows the usual organization of such books: a short introductory section on health, the humours, and the general causes of disease; a longer section on the diagnosis, prognosis, and causes of local diseases, beginning with those of the head and ending with those of the belly and generative organs; and ending with a slightly longer section still on the treatment for these diseases. This is all done in a manner that would have been familiar to the scholastics, although it contains no references to previous authors while being sprinkled with the kind of classical allusions favoured by the humanists. It does contain some material on a new venereal disease, syphilis, but again there is nothing out of the ordinary about Du Port's description of the disease nor about its treatment.

If this book is not exactly a report of the experiences of a practising physician, then what is it? One is tempted to say that it belongs to the genre of self-help books and "treasuries for the poor" that had a medieval origin and proliferated in the early modern period, except that it was originally written in Latin rather than the vernacular. What probably made it worth publishing