

## Book Reviews

missing from the corpus and must be sought in the first part of the book. This was sometimes laborious, and it would have been helpful to have had an *Index des textes médicaux traduits, cités ou commentés* as in Lefebvre.

Overall, however, the standard of translation in this book is high, incorporating the advances of the last few decades. It may well be more accessible to English readers than the *Grundriss*, and it is certainly an improvement on Ebbell. It is recommended for the general medical reader and particularly those who have difficulty reading German.

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**Harold J Cook**, *Trials of an ordinary doctor: Joannes Groenevelt in seventeenth-century London*, Baltimore and London, Johns Hopkins University Press, 1994, pp. xviii, 301, illus., £37.00 (0-8018-4778-8).

Recently, in a number of important papers and in a book-length study of the Royal College of Physicians, Hal Cook has been quietly forcing historians to revise their picture of medical practice in seventeenth-century London. Cook is extremely good on the subject of authority, although he is never so monomaniacal as to take it explicitly as his sole theme. All his work illuminates the ways in which the various tribes of early modern physicians presented themselves to the world and laid claim—as scholars, practitioners, gentlemen, chemists and so on—to be the legitimate creators and custodians of medical knowledge and the guardians of sound medical practice. This excellent new book is no exception to the high standard Cook has set and will enforce further readjustment of the historical gaze. Cook's tale, in spite of his title, is of a not-so-ordinary Dutch physician practising in London at the turn of the seventeenth/eighteenth century. Groenevelt was not so ordinary because, although a licentiate of the College of Physicians, he exercised his right to practise surgery and made much of his reputation and living by cutting for the stone.

Cook carefully chronicles Groenevelt's medical education at Leiden and his subsequent move to London. In one of the most fascinating sections of the book he observes the network of Dutch physicians in the capital, cataloguing their patronage relations and mutual support systems. He traces Groenevelt's career to its sad demise after a law suit brought by a disgruntled patient (he won the suit but lost his reputation).

As he narrates this story Cook subtly discloses the struggles for authority and power in seventeenth-century medical London. Groenevelt and his associates, of whom Thomas Sydenham was one, helped themselves liberally to the language of experience and practice in their attempts to outmanoeuvre the conservative elements which ran the College. The forces of reaction, however, as Cook shows so well, were no toothless diehards. He demonstrates extremely clearly how they mobilized a vast range of resources, including the law, to keep the upstarts in check. Cook does this quite unobtrusively but with the authority of a good scholar.

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**Jonathan Sawday**, *The body emblazoned: dissection and the human body in Renaissance culture*, London and New York, Routledge, 1995, pp. xii, 327, illus., £35.00 (0-415-04444-8).

Intent upon recovering the patient's view, recent social history of medicine has tended to neglect anatomy, leaving the study of corpses to intellectual historians. It is the interest of cultural theorists in gender and the body that is placing anatomy in a broader perspective.

Jonathan Sawday's focus is not on the technical content of anatomical research but on its interaction with other modes of thought. He examines dissection as penal sanction and as public spectacle; he explores pictorial representations, political analogies, and poetic metaphors. His imagery is that of vision and display, of the penetrating gaze and the theatre of anatomy. His texts are drawn from

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anatomical diagrams and Rembrandt's paintings, from the works of famous and half-forgotten English poets. There is an impressively rich density of reference and exegesis.

Sawday's themes are power and sexuality. The anatomist degrades the body of the condemned criminal but he also undermines the imagery of the body politic. The anatomist probes the feminine mysteries of the body and Nature, uncovering a mechanism that undermines patriarchal theory, but he also asserts a new masculine rhetoric of discovery. The argument is informed by Freud, Foucault, and feminist criticism. Although one might disagree with some of the interpretations, no one reading this book will be in any doubt as to the cultural importance of anatomy.

Inevitably, in any work of such scope and complexity there will be minor errors, such as confusing Mondino dei Liuzzi with Henri de Mondeville (p. 132). The revival of Anne Greene is transferred from Oxford to London (p. 61). Midwifery was "soon to become a purely male prerogative" (p. 230). There are also pitfalls for the unwary reader. The 1614 attack on Helkiah Crooke's discussion of the organs of generation appears to be presented as the suppression of subversive Cartesianism by puritan patriarchalism (pp. 225–6). Perhaps dualistic mechanism preceded Descartes but it was Crooke who was the puritan, not his episcopal and medical critics. Sawday's thematic treatment can lead to loose causal connections and a rather casual use of such labels as "Calvinist".

Despite a chapter on the Royalist purposes of Restoration science, the politics which informs this account is not a struggle between interest groups but one between paradigmatic discourses, namely a metaphorical view of the microcosmic body and Cartesian mechanism. The anatomists are clearly on the side of the machines. Seeing anatomy as a progressive force leads Sawday into some curious judgements: "Paracelsianism . . . was central to the defence of the old intellectual order" (p. 232). Despite the surprise of classifying Nicholas Culpeper as a reactionary, one can recognize the Paracelsians as defenders of an

analogical universe. In the context of anatomy, however, this casts academic Galenists and Aristotelians in the role of revolutionaries. Sawday depicts William Harvey and Thomas Willis as radical mechanists, ignoring the importance of soul and spirit in their works.

The explosion of interest in anatomical studies between 1500 and 1700, aided by the printed image, certainly revolutionized the western view of the body. However, this was the accidental consequence of a deeply conservative project. The anatomists of Padua were trying to reconcile the opinions of Aristotle and Galen. Their successors in England wanted to hold off the challenge of Paracelsianism and other new philosophies, protecting academic medicine against empiricism. William Harvey and Thomas Wharton advocated the study of Aristotle whereas Thomas Sydenham and John Locke believed all but gross anatomy to be useless.

Sawday is interested in the cultural uses of anatomy, not its supposed medical utility, so criticism of anatomy goes unmentioned. Like Michel Foucault in *The birth of the clinic*, he takes the chronology and direction of change from traditional histories of medicine, merely altering the terms of reference. In this account, anatomy is surrounded by contestation rather than being actively contested itself. Further work will be required to show how anatomy and its public reception were shaped by conflict within medicine.

Sawday has provided a fascinating cultural history of early modern dissection that will stimulate new thinking about the understanding of the body and the interaction of medical ideas with other currents of thought. What is needed now is a social history that will complement Sawday's work by including the post-mortem examination of patients and murder victims, the place of anatomical knowledge in the education and self-presentation of practitioners, and the influence of anatomy on patient-practitioner relations.

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