

he certainly did not explicitly rely upon the medical classics but read the latest publications.

Overall, this admirably edited and well-produced volume is further testimony to the rapid professionalization that medicine was undergoing in the late Georgian period. Our attention has been drawn to the transformation in medical knowledge at that time by Lisa Rosner (*Medical education in the age of improvement: Edinburgh students and apprentices, 1760–1826*, Edinburgh University Press, 1990) and by Susan Lawrence (*Charitable knowledge: hospital pupils and practitioners in eighteenth-century London*, Cambridge University Press, 1996). This volume chronicles the changes spurred by London and Edinburgh as they affected two everyday practitioners.

**Roy Porter,**

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**Nicholas Orme and Margaret Webster,**  
*The English hospital, 1070–1570*, New Haven and London, Yale University Press, 1995, pp. xii, 308, illus., £30.00 (0-300-06058-0).

The English hospital has undergone radical transformations through the centuries. Only in the last two hundred years has it been solely associated with the treatment of the sick, and only in this century has it lost its link with the poor. The Reformation also saw massive changes: the closure of many hospitals and the foundation or refoundation of others along Protestant-secular lines in place of the Catholic religious ethos and functions which had governed the medieval institutions. Nicholas Orme and Margaret Webster have done a good job in bringing to life the medieval English hospital, which can appear so strange to modern eyes. They stress its multiple functions of providing hospitality and care to travellers, the poor, and those amongst them who were sick. Hospitals could also act as schools to educate the poor, and in particular local settings might additionally function as

moneylenders to a town, or keep in good repair the town bridge next to which they were often located.

Whether the charity provided for the poor discriminated between the deserving and undeserving, as happened during the Reformation, is unclear, though limits to the stay of the healthy were usual. Whether medical treatment was provided for the sick is also difficult to discern. Partly this is due to the nature of the surviving records which are incomplete and often consist of the pious hopes of foundation statutes, and partly, as this book ably demonstrates, because of the huge variety in the size, functions, and wealth of English hospitals.

The provision of food and care was the primary aim of most hospitals, some, such as St Leonard, York, paid for apothecaries, medicines and special food for the sick, others might bath and delouse the poor. But it is clear that, in the main, hospitals were primarily religious and charitable institutions whose concern was to do God's work with the poor, amongst which were some sick people. Leper houses, it is true, took in one particular group of the sick, but they offered segregation rather than treatment, and they were usually small in size and poorly endowed. The fifteenth century changes, such as the increase in the number of almshouses and chantries may well have resulted in only the reputable poor being selected to enter the new institutions, as constant praying for the soul of the benefactor would have required their presence. *The English hospital 1070–1570* guides the reader through such changes, and is especially clear on the cataclysm of the Reformation. The overall picture that emerges is that of diversity and of isolation and introversion, with no foreign hospital order making an impact upon the organization of English hospitals except for the Rule of St Augustine.

There are many other good things in this volume: lively chapters on hospital organization, resources and inmates. One regret is that the thematic part of the book is too short, many of the topics in it could have benefited from longer discussion and

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elucidation. The second part is a useful study in brief of the hospitals of the South West of England, and as such is concerned with matters of record. However, the volume as a whole provides a valuable updating of our knowledge of medieval hospitals.

**Andrew Wear,**

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**E J Dennison,** *A cottage hospital grows up: the story of the Queen Victoria Hospital, East Grinstead*, 2nd rev. ed., London, Baxendale Press, 1996, pp. 304, illus., £15.00 (0-9520-933-91).

E J Dennison was a GP at the Queen Victoria Hospital from 1938 to 1977 and is similarly devoted to its history. This updated version of his book, first published in 1963, provides an institutional account of an unusual hospital with several histories. A cottage hospital existed at East Grinstead from 1863 to 1874. From 1888 a new hospital developed, via two relocations, into a modest 36 bed facility serving a local population of nearly 30,000 by 1939. The account is complemented with a photographic record, a succinct survey of early English cottage hospitals and examples from the 1863–4 hospital casebook. Donations of land, buildings and equipment are dutifully recorded, as is the early involvement of “workingmen’s organizations” in this part of England, and a strong sense of community effort is conveyed.

In September 1939 the Ministry of Health designated the hospital one of three national Maxillo-Facial Units for war casualties, initially RAF and Allied pilots. A specialist medical staff and temporary accommodation was provided, and Ministry funding and grants from the Canadian Government and British War Relief Society of America transformed the hospital into a 200 bed institution. This combination of a national centre for plastic surgery and jaw injuries with a local general hospital, each with their respective medical staffs, was maintained after the war. Little is

said of any consequent internal tensions, though relations with external authorities were occasionally strained. Thus there was some distancing from the voluntarist British Hospitals Association over Sussex regional funding, followed by a protracted argument with the NHS Regional Board over the use of moneys raised locally, largely before 1948, for a children’s ward.

Dennison offers new post-1963 material in a “non-political” light, but conveys the loss of local control and increasing anxiety for the hospital’s future during successive NHS reorganizations. The securing of Independent Trust status in October 1993 is presented as a lifeline which restored local initiative and was critical to the retention of facilities, with the hospital cast as “market leader” in regional services in the ubiquitous mission statement.

This is a valuable account, subject to three main criticisms. Detail on medical and other staffs contrasts with little information on local patients and their experience of the hospital. Comment on specialist-GP relations, given the unusual nature of the hospital and the author’s direct experiences, could have illuminated a recurring theme in medical history. Finally, although the expressed hopes for an assured future for the hospital are fully understood, indications of any price paid to date or some personal assessment by the author would surely not be inappropriate.

**Steven Cherry,** University of East Anglia

**Dorothy Atkinson, Mark Jackson and Jan Walmsley** (eds), *Forgotten lives: exploring the history of learning disability*, Kidderminster, British Institute of Learning Disabilities, 1997, pp. xii, 144, illus., £18.95 (+£1.00 p&p) (paperback 1-87391-84-4). Distributed worldwide by: Plymbridge Distributors Ltd, Estover House, Plymouth, UK, OL6 7PZ.

The ten chapters in this book are based mainly on the contributions, by a multidisciplinary group of people, to the Open University seminar on the Social History of