

own mental disorder. During the Renaissance the systematic study of witchcraft and demonology was at its height, but despite the widespread belief in witchcraft, many enlightened men had the courage to express views in opposition to the superstitions of the age.

The Annual Dinner of the Section of Medical History was held in the Union House, Melbourne University, on Friday 14 May, 1965. The Guest of Honour was Sir Denis Browne, Consultant Surgeon, Great Ormond Street Hospital for Sick Children, who was accompanied by Lady Browne.

Book Reviews

Saturn and Melancholy: Studies in the History of Natural Philosophy, Religion and Art, by R. KLIBANSKY, E. PANOFSKY and F. SAXL, London, Nelson, 1964, pp. xviii, 429, Front., 146 illus. on plates, 5 text illus., £6 6s.

Humoralism is the marrow of medicine—today more than ever. Even the rumbustious destroyer of ancient humoralism, Paracelsus, could not help employing the doctrine of temperaments. His psychology and pathology of war, religious strife and martyrdom visualized the warrior as choleric and the heretic as melancholic. He thus found extenuating circumstances for the anabaptists in their psychosomatic make-up, explained in terms of ancient humoralism, as was recently shown by K. Goldammer (*Psychiatrie und Gesellschaft*, Bern and Stuttgart, 1958, pp. 90–101). A full history of the doctrine of temperaments has been one of the major desiderata in the history of medicine, natural philosophy, art and religion. So far the only work which provided essential information on the subject, accessible in book form, was Panofsky and Saxl's classic, *Dürer's 'Melancholia I'* (*Studien der Bibliothek Warburg*, Leipzig, 1923). Although drawing on material from many fields it was largely a study in the history of art and symbolic imagery. Moreover, the book had gone out of print not long after its first appearance. For many years a second enlarged edition had been contemplated and actually begun, but it seemed that it had become a victim to the scythe of Saturn. With the book under notice much more is being presented than a second—English—edition of Panofsky and Saxl—an achievement that has been made possible by co-opting a third author: Professor Raymond Klibansky, Platonist, mediaevalist and critical editor of Nicolaus Cusanus, distinguished for more than thirty years' brilliant research into the philosophy of cosmos and man in the Renaissance.

In its present form the book cuts across all the fields that come within the scope of the subject. A full account of the notion of melancholy and its historical development notably includes the revolutionizing of this concept by the Aristotelian School (as laid down in *Problemata*, xxx, 1), with the result that it was Aristotelian natural philosophy which first brought about the union between the purely medical notion of melancholy and the Platonic conception of frenzy (p. 17). The other great theme is the introduction of Saturn as the 'Star of Melancholy' with special reference to Arabic astrology, to mythography and Neoplatonism. Pictorial tradition, poetry and especially Dürer—his sources and the artistic legacy of his '*Melancholia I*'—still occupy a large portion of the work. Yet this is a work quite different from the original owing to the widening of its compass, the mass of new material included, its clear presentation and the opening up of many new perspectives in the history of medicine, philosophy and art. The chapters on '*Melancholia generosa*'—the glorification of melancholy and Saturn in Florentine Neoplatonism (Marsilio Ficino) and the birth of the modern notion of

genius—deserve special attention. Melancholy, regarded as evil during the Middle Ages, was revalued in the Renaissance: on Ficino's showing it was a 'unique and divine gift', even as Saturn was now not only the mightiest star, but also the noblest (p. 259), and it was Ficino who first identified Aristotle's attribution of high intellect to melancholy with Plato's 'divine frenzy'. Agrippa of Nettesheim accepted this Ficinian doctrine and systematized it—distinguishing three grades of Saturnine and melancholic inspiration. It is the *first* of these grades which is portrayed in Dürer's *Melancholia I*, and thus the riddle of the 'I' which has exercised the minds of Renaissance scholars for so many years meets its most convincing and brilliant solution. It is the realm of the lower spirits which are operative through imagination and responsible for creative achievement in the mechanical arts (notably architecture and painting) and the correct prophecy of natural events such as cloudburst and famine. Indeed there is 'no work of art which corresponds more nearly to Agrippa's notion of melancholy than Dürer's engraving, and there is no text with which Dürer's engraving accords more nearly than Agrippa's chapters on melancholy' (p. 360).

We must content ourselves with these few hints to a store-house of information and historical wisdom. It is, of course, not primarily a historical-medical production and cannot be expected to cover all medical aspects of the subject, as for example the role attributed to black bile and the spleen in gastric digestion and its connection with the anti-humoralistic tendencies and ideas in sixteenth- and seventeenth-century medicine. Nor has it been possible to discuss the extensive literature of the last two decades, owing to the long time which has elapsed between the completion of the script of the book (1939) and its appearance in print. The book is generously illustrated and beautifully produced.

WALTER PAGEL

The Hospitals 1800–1948, by BRIAN ABEL-SMITH, London, Heinemann, 1964, pp. xiii, 514, 50s.

The English Welfare State has evolved piecemeal with little sustained guidance. Political, economic and social events have determined its shape, even an epidemic could change its course. The characteristics of the people and the political system have, and will, preclude any daring all-embracing revolution. We have added, subtracted, patched and built on what has existed. Populace and professions have at one time been radical, at another conservative, complaining, suggesting, fighting and sometimes coalescing, until very belatedly something has been achieved. The politician has kept his eye on the electorate and finance; the people, and the professions involved, have clung to a way of life or have been subjected to economic and social changes which have added to the confusion of arrangements. Pressure groups or the influential individual have too often displayed disunity or even antagonism. So it has been with the development of the National Health Service. Because of its past its introduction was beset with dilemmas and its future will be fraught with problems.

This book, dealing with a section of the Health Services is one everybody should read. It is not a true specialist study. It does not probe deeply enough for the social historian nor provide sufficient detail for the medical historian. Yet it will be invaluable to the student in many different fields; it will interest the layman with his growing awareness of State intervention and State help; and it will provide the doctor with an admirable digest of the development of his position and profession. For the medical man the timing of this publication is perfect for he will realize that his current problems have long been with us and are not new.