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atomizing of medicine into a series of separate problems, in which, as Jacopo frequently showed, equally opposed positions could be maintained with equal success. His successors faced with this impasse reverted to an ever closer scrutiny of the logical methods involved in reaching these conclusions. Dr Ottoson's conclusion goes far towards explaining the appeal in the sixteenth century of the call by Montanus and others for a proper medical method that would bring these discrete pieces of medicine back to its original (Galenic) unity.

Second, the concepts used by these commentators, particularly that of temperament (*complexio*), were often beyond falsification by experience or experiment. If a drug failed to work, this was the result of an individual error of diagnosis or of prescribing, not of an inadequate general theory. Hence the discussions of the concepts could become more and more remote from the sick-bed, especially since, as every philosopher knew, experience was notoriously fallacious.

Dr Ottoson makes out a strong case, in part following the lead of Nancy Siraisi, for the late thirteenth century as an age of medical progress, or at least of excitement, followed by a slow descent into dullness and pedantry as the possibilities for change were gradually closed. This may well be true for the universities of N. Italy, and Dr Ottoson is commendably cautious about extending his conclusions beyond the Alps or even to Naples, where the work of Michele Fuiano suggests that lively debate continued well into the fifteenth century. Only further tedious and possibly unrewarding work on the manuscripts of lecture courses elsewhere in Europe will confirm the validity of the conclusions of this useful study, whose lucidity is itself a defence against the charge of medieval obscurantism.

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PAMELA BRIGHT, *Dr Richard Bright (1789—1858)*, London, Bodley Head, 1983, 8vo, pp. 313, £12.95.

In Pamela Bright's account of her distinguished ancestor, readers may enjoy a rare full-length biography of one of the "Great Men of Guy's" who embodied the early nineteenth-century clinical-pathological school in Britain. When one considers the great fame of Addison, Bright, and Hodgkin, the previous scarcity of substantive biographies seems almost inexplicable. Perhaps would-be writers had awaited the discovery of papers and documents, such as those available to Pamela Bright. A widely scattered and apparently huge mass of family papers provided her with the resources to write a finely grained portrait of Richard Bright, especially rich in details of home life and friends. Bright's polymath father and other family members came briskly to life. The Brights' intellectual connexions and varied friends and correspondents must have helped develop Richard Bright's love of natural history, chemistry, and illustration, all of which aided his later monumental medical and pathological work. Anecdotes and episodes of his student days and travels provide fascinating glimpses of the nineteenth-century doctor in the making.

Earlier brief articles about Bright, found in the usual ceremonial histories and anthologies, suggest an almost angelic character: kindly to students and colleagues, tireless in search of truth, devoted to patients rich or poor. Indeed, there seems little evidence to refute this image, and Bright appears to have justly attracted admiration and affection. But Miss Bright's book offers a fuller, more complex person. Bright as a youth occasionally suffered intense self-doubt and indecision. There is a suggestion of moodiness and even periods of melancholia. Puzzling are the lengthy separations from his second wife and his family, which Bright frequently contrived during his middle years (on other occasions, he seemed much gratified by time spent with them). He worked very hard. He surely had more than even the typical Victorian gentleman's desire to be useful and productive, the result being an unquestionably varied and detailed cumulation of clinical and pathological observations contributed to medicine.

The discussion of Bright's work, however, will disappoint readers of this journal. His model investigations which established the entity of nephritis, conducted in part in a surprisingly "modern" sort of "metabolic ward" during the summer of 1842, are, of course, noted. Proper

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recognition is made also of Bright's discoveries in liver disease and neurology. But the reader gains little understanding of Bright's work in the context of changing ideas of disease, chemistry, and medical investigation of the first half of the nineteenth century. We do not learn enough about what, if any, skills and ideas Bright brought back from his European excursions. It is when discussing Bright the physician and scientist that the author avoids depth but yields to hyperbole: "No one since Harvey had effected so great a revolution in medical thinking", etc. (Perhaps the source material shaped the book's emphasis.) The reader encounters several failings of accuracy: Laennec is referred to as "the French chemist", and George Owen Rees is mistakenly said to have devoted "most of his working life to minute studies of renal tissue". Certain persons appear in the text or index missing their first name, e.g., "Dr Bostock", as if it were considered of no importance to look them up. Perhaps of greater annoyance to scholars, however, will be the casual approach to documentation. The collections of letters and papers used, some privately held, are briefly described in the back of the volume, but the author chose to avoid the appearance of scholarly baggage and kept her notes to a severe minimum. And even those that refer to letters usually omit dates or location of the items. This vagueness will prove frustrating to other historians interested in Bright and those who worked with him during the lively decades of British medicine not satisfyingly described by this affectionate and personal biography.

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ROBERT L. RICHARDS, *Dr John Rae*, Whitby, Caedmon of Whitby Press, 1984, 8vo, pp. xii, 231, illus., £16.50.

Beyond the comprehension of persons who live in temperate climates, the unrelenting Arctic wilderness has frequently bound men to itself like an addictive drug, driving them to remarkable feats of fortitude and endurance. The bleakness and loneliness have driven people to near-madness, yet when they have abandoned it, they have felt themselves to be rootless and soulless. One such addict was John Rae (1813–93), an Orkney native who trained in medicine at Edinburgh and who sailed to Hudson's Bay in 1833 as a ship's surgeon. Finding the northern isolation to be congenial, he remained as a surgeon and a trader at Moose Factory, a remote Hudson's Bay Company fort. In 1846, he became an explorer, spending the next eight years in the Arctic. By his own account, in an autobiography preserved at the Scott Polar Institute in Cambridge, he travelled some 13,000 miles on foot and in small boats and surveyed nearly 1,800 miles of previously unexplored coastline on the mainland of Canada and on Victoria Island. He was successful because of his immense fortitude but also because, as an explorer, he went native. He spent at least one winter in a snow-house with only enough fuel for cooking. Indeed, Rae was one of the first Europeans to get to know the Eskimos well, expressing great sympathy for them before it became a fashionable thing to do.

Rae is best known as the man who, in 1854, first passed on some information he had received from natives concerning the fate of Sir John Franklin's party of explorers, who had vanished in 1845 after setting out from England with two ships to search for the north-west passage. Rae's report, with suggestions that the party had resorted to cannibalism before dying of hunger and exposure, horrified the British public. Rae was ostracized for what was perceived to be a slur on the men of the Royal Navy. For this, and because he repeatedly criticized the navy's methods of Arctic exploration, he antagonized the establishment. Although his own methods of exploration apparently revolutionized northern travel, he was virtually unknown by the general public. Indeed, his retirement years in Britain were embittered by the lack of recognition of his achievements.

Dr Richards, a physician, undertook a biography, wishing to repair the injustice he perceived in Rae's eclipse as an explorer. His research on both sides of the Atlantic was extensive and painstaking. In spite of his long labour, however, the book is difficult to read. The narrative is tedious, its parts strung together by pointless quotations. In spite of his sympathy for Rae, Richards conveys little of the man's personality, responses, or motivations.