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Stanis Perez, *Histoire des médecins: Artisans et artistes de la santé de l'Antiquité à nos jours* (Paris: Perrin, 2015), €24,50, pp. 469, paperback, ISBN: 978-2262039448.

For a long time, medical history was written by physicians, many of whom cast their fellow practitioners in largely hagiographical terms. In the twentieth century, historians, sociologists and philosophers also began to study medicine's past and the result was an important historiographic turn towards more critical social and cultural histories of health and disease. These new studies drew on the experiences of the diverse range of actors involved in health care, including non-professionalised healers, patients and families. In this new context, many historians, especially in Francophone countries, were less interested in the figure of the physician as an historical object. In recent decades only one book has been published on this subject in French: *Histoire du médecin*, a collective volume edited in 1998 by Louis Callebaut, and it rapidly became a book of reference. At the beginning of the twenty-first century, however, a new synthesis that includes recent research results is needed. The French historian Stanis Perez, well-known for his analysis of Louis XIV's health diary, takes up this challenge in his synthetic history of the physician figure from Antiquity to today.

To define 'the physician' across the ages, Perez emphasises in his short introduction, is not a straightforward task. The figure itself is changeable, as are the conditions that allow an individual to self-define as a physician. To Perez, it is more practical and, importantly, more instructive to 'identify the social and cultural contexts in which the physician is embedded' (p. 12). Historical texts about physicians are typically normative or prescriptive, swinging between satire and panegyric. To overcome this obstacle and achieve a more nuanced synthesis, Perez chooses to play with the scales of time. Aware of the difficulties of this exercise, especially of the risk of giving readers an impression of only superficial glimpses, Perez affirms his choices. While he focuses mainly on French territory, he does not ignore European and Arabic contexts. He also favours private and primary medical care, avoiding hospital medicine, which has its own history. In order to develop a critical point of view, Perez utilises human and social sciences approaches to increase the number and intersections of both references and perspectives. Finally, for the historical figure of the physician he develops a 'biohistory' (p. 15), after Jacques Léonard and Michel Foucault, consisting of five chronological parts, from antiquity to the present.

In his discussion of the ancient physician, from the first Hippocratic treatises to the rise of Christianity, Perez shows how, following the model of the philosopher, the 'health artisan' (*artisan de la santé*) evolved over one thousand years into an 'apprentice thaumaturge' (*apprenti thaumaturge*), rereading ancient texts in the light of religious principles and ethics. The figure of the medieval physician appears more complex and plural. While Perez insists that *the* medieval physician has never existed – even when the first universities began granting doctorate diplomas to organise the profession – he contends that the great majority could not afford to own medical treatises; believed in the influence of astrology on health; demonstrated medical skill by reading urine; and could easily lose power and position when a royal patient faltered or plague struck. The development of printing led to a new relationship with medical knowledge that qualified a physician in the Age of Reason. Free from the well-rehearsed representations of ancient authorities, Enlightenment physicians explored new medical models and practices (eg., alchemy). Subsequently, according to Perez, being a physician became a real 'job' (*travail*) (p. 169) with royal physicians at the top of this new professional category. Gradually, physicians gained scientific, political and moral status, especially from their work on urban public health projects. The eighteenth century also brought a new organic conception

of disease accompanied by a new clinical gaze towards the human body that, in post-Revolution Paris, became particularly significant. While the 1832 cholera epidemic in Paris still showed physicians to be powerless over disease, the reaction of French physicians also demonstrated professional unity. Gradually, a new epitome – the ‘glorious’ scientific physician appeared, in large part due to the influence of both positivism and governments that sought imperial or republican heroes. Nevertheless, French physicians remained a diversified professional body during the nineteenth century, depending upon factors such as urban or rural practice, or one’s status as a learned physician or ‘health officer’. To develop a monopoly, they denounced so-called quacks and tried to medicalise the nation, from dirty cities to distant villages, at home and in colonies. Thus, at the beginning of twentieth century, the physician emerged as a ‘health strategist’ (*tacticien de la santé*), as well as a ‘reformer of a healthy and pure city’ (p. 333). The ideals of medical science and public health, however, were co-opted by military powers, dictators and some immoral scientists, so that the contemporary physician was confronted with dilemmas regarding her or his goals and ethics. In the second half of the century, social and economic issues arose in medicine that called into question physicians’ power and exclusive monopoly over health and illness. By its end, the physician had become a ‘service provider’ (*prestataire de services*) (p. 387), desacralised in the face of diminished legitimacy, legal trials and the new expectations of patients. Paradoxically, the more health emerged as a central concern for society and individuals, the more physicians have been criticised. The epitome of ‘the physician’ continues to erode. This leads Perez to contemplate whether ‘this healing scientist, this artist of the suffering body’ might not be disappearing altogether (p. 387).

In less than 400 pages, Perez draws a clear, erudite, nuanced and well-written portrait of the Western and, particularly, French physician. Avoiding simplifications and drawing on well-documented individual cases as well as recent historical research, he presents a very living history of ‘the physician’ since antiquity. The references to colonial medicine and to critiques of medicine made by philosophers and sociologists during the 1960s and 1970s give this portrait a depth that scholars working in several fields have awaited. We might regret that Perez says little about the very real transformations of medical and scientific knowledge in the twentieth century, but overall this synthetic history of 2500 years of physicians is useful and engaging – a book of reference that will interest physicians, health professionals, general readers and historians of medicine.

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Linda Ratschiller and **Siegfried Weichlein** (eds), *Der schwarze Körper als Missionsgebiet: Medizin, Ethnologie, Theologie in Afrika und Europa 1880–1960* (Cologne, Weimar, Vienna: Böhlau, 2016), pp. 189, c. \$35.00, paperback, ISBN: 978-3-412-50166-2.

This collection of essays spans the years between 1880 and 1960 and is mainly based on sources left by German-speaking missionaries from different parts of Africa. The book consists of five empirical chapters that are ordered chronologically and thus convey a sense of change. Additionally, there is a preface, and introductory and concluding essays. In the latter, Anna-Katharina Höpflinger, a scholar of religion and hence the only non-historian among the authors, determines two basic assumptions behind all the chapters: (1) bodies and religion are interdependent; (2) bodies are connected to their social conceptions and representations. This essay might have well served as an introduction. Instead, the book