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Samuel J.M.M. Alberti and **Elizabeth Hallam** (eds), *Medical Museums: Past, Present, Future* (London: The Royal College of Surgeons of England, 2013), pp. vi, 250, £25.00, ISBN: 978-1-904096-21-4.

As its theme, this book focuses on the past, present and future of medical museums. It centres on medicine and medical care, and consists of easy-to-follow descriptions and high-resolution images. These images include not only historically valuable information on museum backyards but also, at first glance, many shocking specimens of human anatomy as well as pathological specimens including anatomical artefacts. First, the viewer is made to realise that collecting, owning, analysing and managing such specimens and artefacts is related to the history of medicine and museums. If one thinks of these aspects aligned with Michel Foucault's thought, then this is the origin of the 'bio-power' (Foucault's term for the regulation by modern states of their subjects) of human society, the epitome of medicine and museums.

These symbolic images can also be immediately perceived from both the book's front and back cover. For example, a large cyst that had been surgically removed from the abdomen was retained by John Hunter in the eighteenth century for the purpose of illustrating its internal anatomical structure; the back cover shows the sample specimen immersed in liquid. Also, the inside cover shows some scintillating photographs of artificial eyes that were finely handcrafted by glass blower Mollie Surman in the mid-twentieth century. Upon examining the beautiful, lustrous substance, one cannot help but have the strange feeling that they resemble some kind of jewellery. All these items are collections at the Hunterian Museum at the Royal College of Surgeons in England.

The British surgeon John Hunter is referred to as the father of experimental medicine, as well as the founder of modern surgery. John Hunter contributed substantially to the development of modern surgery together with his brother. He is also known for having collected and created as many as 15 000 specimens from around the world during his lifetime. His obsession and persistent collecting, also on occasion perceived as sheer madness, laid the foundation for the specimen collection carried out by the Hunterian Museum. This is when one cannot help but think of the term 'bio-power' as mentioned by Foucault. This is because it appears that Hunter, at times, obtained specimens such as flora and fauna, sometimes with strange characteristics and unusual diseases, by illegal means, and stored them in formalin. Such behaviour by Hunter, in the name of medicine, cannot be judged impartially from the standards of research ethics, but in a sense, it rather reminds us of deeper substantive issues.

On viewing the table of contents of the book, one cannot help but be surprised by the variety. The first and second chapters, written by Hallam and Alberti entitled 'Bodies in museums' (Elizabeth Hallam and Samuel J.M.M. Alberti) and 'The organic museum: the Hunterian and other collections at the Royal College of Surgeons of England' (Samuel J.M.M. Alberti) focus on the Hunterian Museum mentioned above. However, the book is not limited only to English-speaking countries, and introduces various museums worldwide while posing various questions. Additionally, operational issues associated with museum facilities, relationships with universities and relationships with study area concerns come to light in the following chapters entitled 'Museums within a museum: Surgeons' Hall, the Royal College of Surgeons of Edinburgh' (Chris Henry), 'Disappearing museums? Medical collections at the University of Aberdeen' (Elizabeth Hallam), 'Medicine at the Science Museum, London' (Robert Bud) and 'Recycling anatomical preparations: Leiden's anatomical collections' (Marieke Hendriksen, Hieke

Huistra and Rina Knoeff). The problems of whether to focus on enlightenment through research, or through exhibitions and performance aspects, and how to come to terms with each, is also covered in the following chapters: 'Anatomy and public enlightenment: the Florentine Museo "La Specola"' (Anna Maerker), 'Making space for specimens: the museums of the Karolinska Institute, Stockholm' (Eva Åhrén), 'Biomedicine on display: Copenhagen's Medical Museion' (Thomas Söderqvist and Bente Vinge Pederson), 'The disturbingly informative Mütter Museum' (Robert D. Hicks) and 'Morbid anatomy' (Joanna Ebenstein). The question of the basis of historical evaluation of exhibits and research results, and how they are conducted, including the problem of where they belong, is also covered in: 'The Museum of the History of Medicine in Zurich' (Flurin Condrau), 'Tracing life: the Berlin Museum of Medical History at the Charité' (Thomas Schnalke), 'The Dittrick: from doctors' museum to medical history centre' (James M. Edmonson), 'An army museum or a national collection? Shifting interests and fortunes at the National Museum of Health and Medicine' (Michael Rhode) and 'Collecting medical technology at the Smithsonian Institution's National Museum of American History' (Judy M. Chelnik). The book consists of colourful images and drawings, with detailed and lucid annotations. The format makes it very easy to read, providing the reader with a variety of information and new discoveries.

In the final afterword entitled 'Wellcome Collection and the post-medical museum?' certain issues highlighted by Arnold and Chaplin on the subject matter of the Wellcome Collection also raise important questions concerning today's medical museums and are of great interest. The Wellcome Collection is a collection of the world's greatest medical antiques, from the late nineteenth century to the early twentieth century, and is based on the collections of the scientist Sir Henry Wellcome. Sir Henry built up a great wealth of artefacts including not only medicinal drugs that were in common use at that time and powdered medicines but also the notion of tablets that we are so familiar with today.

Wellcome, who was from America, amassed a huge collection of more than 1 500 000 medical objects over his lifetime. In order to manage this collection, The Wellcome Trust, a charitable trust with the aim of supporting medical research, was established in 1936 with its headquarters in England. The Wellcome Foundation contributes to the revenue, and as a private organisation it is currently of a level that makes it a contender for the number one position among research organisations. Furthermore, the organisation not only offers grants for research aimed at promoting the health of both people and animals and for biomedical research, but also operates a Wellcome Library and a Wellcome Trust Medical History Centre. It has also established public facilities, such as the 'Wellcome Trust' event hall for the public. It is a systematically operated, large-scale medical charity that combines support for researchers with the promotion of greater understanding of science among the public.

Based on various contemporary changes concerning medical museums, Arnold and Chaplin finish the chapter with the following two phrases: 'medical museum is dead – Long live the medical museums!' Through these two phrases, Arnold and Chaplin perhaps wanted to go beyond the state of traditional museums and highlight the role of medical museums, as a part of such complex medical charity.

Museums in the past provided visitors with knowledge and lessons via their collections, and this was expressed, for example, in the words *memento mori*. Through these messages, museums also coerce people into pondering about their own life and death and nurture their views on the subject. This aspect, which combines the curator's creativity and ingenuity, makes the museum a place for skilled research interests and spectacular presentations. The museum also provides visitors with the satisfaction of viewing endless collections, making

it an educational and enlightening place. When one thinks of this as a contemporarily upgraded place, the museum could be considered a place that has died once and been reborn again, like a phoenix.

One can definitely say that this book is a valuable work and is a great reminder of the various intellectual interests associated with museums.

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José Pinto de Azeredo *Essays on Some Maladies of Angola*, Stewart Lloyd-Jones (trans.), Timothy D. Walker (ed.), with contributions by Adelino Cardoso, António Braz de Oliveira and Manuel Silvério Marques (Dartmouth, MA: Tagus Press, 2016), pp. x, 151, \$24.95, paperback, ISBN: 978-1-933227-69-6.

José Pinto de Azeredo's major work was first published in Portuguese in 1799, under the title *Ensaio sobre algumas enfermidades d'Angola*. Thanks to the initiative of editors Timothy D. Walker *et al.*, and translator Stewart Lloyd-Jones, Azeredo's book has finally received an English edition. The author of *Essays on Some Maladies of Angola* was a Brazilian-born physician trained at the universities of Edinburgh and Leiden by some of the most advanced medical theorists of the late eighteenth century. After finishing his studies in Europe, the young doctor was nominated at the age of 24 as Chief Physician of the Portuguese colony of Angola. In these *Essays*, Azeredo describes his experiences in treating patients during his seven-year (1790–97) appointment in West Central Africa.

This English version of the *Essays* is enriched by the addition of three articles on Azeredo's life and work, and by the use of clarifying footnotes to assist readers less familiar with medical terminology. Walker's contribution places Azeredo's work in the broader context of the Atlantic World and considered as a result of Portuguese colonial policies intended to support the colonial enterprise. Adelino Cardoso explores evidence in Azeredo's work that shows his abandonment of Hippocratic tradition to embrace medicine as a natural and social science. António Braz de Oliveira, in turn, provides new insights into Azeredo's personal life and his time as a student in Europe, while Manuel Silvério Marques demonstrates Azeredo's medical contributions. Azeredo's work is composed of four essays describing the illnesses that affected the population of the colonial capital of Angola: remittent fevers, intermittent fevers, dysenteries and tetanus. In each case, the author explores the history, pathology and therapy indicated for the disease. In doing so, he makes reference to internationally known medical authorities without refraining from criticising their work and showing his contribution to this scholarship. As a man of the Enlightenment, the Brazilian-born doctor places a high value on empirical knowledge. Connecting theory with observation, he states 'there will never be progress if we use one without the other' (p. 78).

As Walker's contribution demonstrates, Azeredo's medical and ethnographic journey in Angola resulted from an Enlightenment-era effort by the Portuguese authorities to gather medical information throughout the Lusophone world in an attempt to improve health conditions in overseas possessions and, consequently, support the colonial enterprise. By the late eighteenth century, Angola was known as the 'white men's grave' due to the high number of casualties among European settlers, exiles, and administrative and military personnel, as well as slave traders in search of quick enrichment.¹ Azeredo

¹ Joseph C. Miller, *Way of Death: Merchant Capitalism and the Angolan Slave Trade, 1730–1830* (Madison, WI: University of Wisconsin Press, 1988), 284.