## Book Reviews

The psychiatry of Robert Burton (1972). We still lack in-depth analyses of Burton's learning and views in the light of Renaissance medical humanism, Reformation and Counter-Reformation theology, and the neo-Stoic movements of his day. There has long been a question whether Burton was, indeed, as erudite as he liked to parade himself; or whether, rather like his imitator and plagiarist, Laurence Sterne, he was largely a scavenger of other people's learning.

These two impeccable new publications will greatly ease the labours of future Burton scholars. Nicholas Kiessling has patiently recovered the contents of Burton's own private library, superseding the catalogue published by S. Gibson and F. R. D. Needham in 1926. Kiessling adds over 180 titles, and deletes certain erroneous entries from the earlier list. We now know the titles of some 1,738 books and two manuscripts owned by Burton, and, no less valuably, the location of all but 168 of the copies (Burton's library is one of the largest private libraries of its time that survives in part today). This is particularly helpful since Burton was a habitual annotator of what he read, not infrequently scribbling upon his books additional notes, anecdotes, and jottings. It is thus possible not merely to tell the general range of Burton's first-hand knowledge, but, in many cases, to gauge his familiarity with, and degree of application to, particular authors and texts. An intelligent computerized study based upon Kiessling's catalogue would reveal much about the kinds of medical erudition available to, and expected of, a college scholar of the early seventeenth century.

In the meantime, we can be immensely grateful to Kiessling, together with Thomas C. Faulkner and Rhonda Blair, for producing the first part of a projected five-volume scholarly edition of the *Anatomy*. This tome takes in the First Partition; two more volumes of text, and two of commentary, are to follow. Variant readings of all six editions published in Burton's lifetime are given.

As well as providing foundations for future investigators, this publication contains a valuable scholarly Introduction by J. B. Bamborough, who is concerned to present a less sensational reading of Burton than that offered by Rosalie Colie (who underlined Burton's use, or living out, of paradox); by Stanley Fish (who regarded the *Anatomy* as the classic self-consuming artefact); and by Northrop Frye, who read Burton as a precursor of Swift. Contextualizing Burton in respect of the Continental polymaths of the Renaissance, Bamborough plausibly argues for soberer pictures of a scholar-humanist, not of course without learned wit, but primarily a philosopher engaged in the earnest business of utilizing learning for the relief of oppressed mankind. It is a pity Bamborough does not have more to say about the religious implications of Burton's enterprise: his theological opinions remain perhaps the least understood dimension of the *Anatomy*.

Roy Porter, Wellcome Institute

WHITFIELD J. BELL, Jr., The College of Physicians of Philadelphia: a bicentennial history, Canton, Mass., Science History Publications USA, 1988, 8vo, pp. ix, 326, illus., \$40.00

The model for Colleges of Physicians throughout the world is the Royal College of Physicians of London. Founded by Thomas Linacre in 1518, it was, during the eighteenth century, a bastion of power and privilege, excluding all who did not subscribe to the Anglican faith and who were not graduates of Oxford or Cambridge. It was for this reason that the Quaker physician and Edinburgh graduate, Dr John Fothergill, Benjamin Franklin's London physician, strongly opposed the proposal by Dr John Morgan of Philadelphia in the 1760s to develop the Philadelphia Medical Society that he had founded into a College on the London model. In the era preceding Independence it would have seemed logical to have followed British practice. Yet it was not until 1787, after the Colonies became the United States, that a College of Physicians was founded in Philadelphia. It is paradoxical that this proposal was now strongly supported by Fothergill's protégé, Dr John Coakley Lettsom. It was he who wrote encouragingly to Benjamin Rush, whose preceptor, Dr John Redman, was to be the first President.

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There is no author so suited to the task of writing a history of the Philadelphia College as Dr Whitfield J. Bell. He has an encyclopaedic knowledge of Philadelphia medicine and life through the years, as well as a deep understanding of the "spring", to use Rush's word, that the American Revolution gave to scientific and moral enterprises. This is a work that, as a contribution to American medical history, ranks with his outstanding biography of John Morgan.

The earliest meeting of the College took place on 2 January 1787, although there had been preliminary meetings of the founder members the previous fall. As a College, the new institution was to address matters of public concern, and as a society it was to collect and publish medical observations and inquiries. A garden and library were also set up. There were, however, to be major differences between the Philadelphia College and its London counterpart. Whilst the London College had the duty of controlling medical practice within its jurisdiction and therefore of examining and licensing intending physicians, the Philadelphia College was to have no such rights. It therefore became, as did so many institutions in the United States in that post-Revolutionary period, a uniquely American institution that did not copy foreign models and which derived its major impetus from its local community of physicians.

In its earliest years, the College was to become embroiled in some of the most contentious controversies of the day. When yellow fever struck the city of Philadelphia in 1793, the vexed question of whether the disease was local in origin or had been imported from the West Indies divided physicians not only in Philadelphia but also elsewhere. At the same time, Benjamin Rush, an enthusiastic purger and bleeder, had introduced his famous ten-and-ten treatment—ten ounces of blood and ten of calomel (mercury)—a therapy which led to considerable "contrariety of opinion" between Rush and his fellow College members. In response to queries from the Governor of Pennsylvania, the College supported the importation theory of yellow fever, an opinion that Rush opposed and that, together with arguments over his heroic treatment, led to his resignation from the College.

The College had difficulty in maintaining its initial momentum. It soon fell into a period of uncertainty as a result of lack of local support. As so often in its history, however, it had remarkable powers of recuperation and by the 1840s the institution had begun to recover itself. Publication of the *Transactions* was resumed and new premises were obtained. Puerperal fever occupied the attention of Fellows at that time, and the introduction of anaesthesia provided them with as much opportunity for dissent and disagreement as their colleagues had enjoyed in earlier years. Charles D. Meigs, for example, never wavered in his unyielding opposition to the use of either ether or chloroform in childbirth, despite appeals from James Young Simpson in Edinburgh.

Dr Bell's history guides us skilfully through the remainder of the nineteenth century, the problems created by the Civil War, the acquisition by the College of a Hall of its own, its constant concern with professional matters, with the dispensing of drugs, nursing, and many other matters of great moment at the time. There are particularly good accounts of the membership through the years. Naturally, Presidents get their due share but the "age of Weir Mitchell" deserves and gets two whole chapters. Silas Weir Mitchell, a Fellow of the College for 58 years, gave his first paper there in 1856, soon after his election. He served on most of its committees, represented it at the newly-founded American Medical Association, and was President twice in non-consecutive terms. Weir Mitchell proposed the Nurses Directory and he was the President who established speciality sections within the College. He contributed generously to the library and had a deep and abiding interest in the history of medicine. In 1887, he presided with great style over the College's centennial celebrations and, in 1909, at the opening of the new College buildings on South 22nd Street, where it is still to be found.

The twentieth century begins with the College "holding its own" in the period of consolidation that followed Weir Mitchell's death in 1914. It, too, was not without its ructions: in 1934, one vitriolic meeting, to consider the report of a National Commission on the cost of medical care in the United States, was reported in the local press as "Thunder in Philadelphia". Dr Bell takes us up almost to the present day: among recent developments has been the establishment of an institution of the history of medicine at the College, which would have pleased that one-time Fellow, Sir William Osler, as well as Weir Mitchell.

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This book is a truly admirable history of the College's first two centuries. Its involvement with the medicine of Philadelphia and its responses to events elsewhere in America and in the wider world are as clearly set out as are the detailed biographical sketches, at which Dr Bell excels, of the many personalities, many long forgotten, who served the College in so many capacities through so many years. The illustrations are profuse and excellent, including an extraordinary silhouette of the apparently hook-nosed Dr Redman. Philadelphia has been well served by its College of Physicians. Even Dr Fothergill would be hard put to cavil at its achievements.

Sir Christopher Booth, Royal College of Physicians

PHILIP W. MARTIN, Mad women in Romantic writing, Brighton, Harvester Press, New York, St Martin's Press, 1987, 8vo, pp. x, 198, illus., £29.95.

This book forms a welcome addition to the growing body of work which considers literary treatments of madness in relation to contemporaneous psychological discourse. Martin is not concerned, however, with influence hunting, with tracing causal relationships between the two spheres of writing; but rather with the functions of the figure of the madwoman as a rhetorical trope. His approach, which draws extensively on the techniques of deconstruction, produces many subtle readings of the chosen texts, though it also imposes certain limitations on analysis.

A helpful summary of the treatment of female madness in late eighteenth- and early nineteenth-century psychiatry is followed by an intricate exploration of that ubiquitous figure in Wordsworth's poetry—the female vagrant. Here Martin is at his best, using close textual analysis to show how Wordsworth worked and transformed his material. The chapter on 'Secret Lives' sets the selected Romantic and Victorian novels within an interesting new focus, highlighting their internal ambiguities, while the final section on Freud's story-telling offers significant insights into Freud's indebtedness to the generic structures of nineteenth-century fictional narrative. By far the weakest chapter is that on Jane Eyre and Wide Sargasso Sea, where Martin eschews his own deconstructive method, imposing a rather traditional reading on Jane Eyre as a text that proposes an antithetical relation between insanity and sanity and construes female sexual desire as monstrous, in order that Jean Rhys's text can perform the labour of radical revision.

All writers seeking to cross disciplinary boundaries are faced with problems of presentation and integration, of untangling the forms of historical claims they wish to make. It is in this area that the limitations of Martin's approach are most in evidence. In his rather confusing methodological introduction the techniques of historical and deconstructive analysis are first set in opposition, and then defined as complementary, rather than mutually exclusive. The main problem seems to arise from Martin's conception of history as something distinct from the texts he is considering, as if they themselves did not form part of the historical process. He speaks, therefore, of reserving the right to "deflect into history", as if it were a totally different sphere, defining his approach as one which concentrates "on writing (though not exclusively) as a largely self-enclosed and self-reflexive activity". Such an approach enables Martin to trace the trope of the madwoman through a century of literature, but leaves him without any mechanisms to explain the subtle shifts in figuration. Despite the historically-based introduction to late eighteenth- and early nineteenth-century psychiatric thought, and the appendix which offers examples of case-studies, the actual discussion of the literary texts draws on only loose associations with a psychiatric tradition, which is itself projected as unchanging. Problems of periodization arise here, since the general label "romantic" cannot adequately cover both the late eighteenth century and the transformations in psychiatric thought or literary practice within the Victorian period. The problems in Martin's text are intimately related to its strengths, however, and arise from his very willingness to eschew traditional methodologies and to work across accepted disciplinary and period boundaries.

Sally Shuttleworth, University of Leeds