In her analysis of the consultative correspondence of Lorenz Heister, Ruisinger construes the continued "practice by post" as a win-win situation for the patient as well as the distant expert. For both protagonists, it represents an essential moment in the strengthening and preservation of both positions in the discourse on health in the eighteenth century. The patient plays a strong, self-determined role, even in the event that the distant medical authority and the patient actually meet and the patient is examined. The symmetry is not broken until the patient goes under the knife. This surgical measure, as shown most impressively in Ruisinger's study, is the last option in a therapeutic process that always started conservatively by applying internal measures of treatment. For a short time, during surgery, the patient and physician are on differing levels. Yet the patient always agrees voluntarily and explicitly to the operation. Informed consent is a reality in Heister's surgical practice.

Ruisinger's study stands out on account of its rich array of sources and the exceptionally concise evaluation of these sources that are also interpreted on a gender basis wherever possible. The work's analytical structure is well thought through and the style is a pleasure to read with its good dosage of original quotations from both patients and their physicians. This monograph opens the door for international comparative studies on the worlds of patients in the eighteenth century.

Thomas Schnalke, Berliner Medizinhistorisches Museum der Charité

**Sean M Quinlan,** The great nation in decline: sex, modernity and health crises in revolutionary France c. 1750–1850, The History of Medicine in Context, Aldershot, Ashgate, 2007, pp. xi, 265, £55.00 (hardback 978-0-7546-6098-9).

The central aim of this book—to rewrite, and to some extent redefine, the history of

French hygiene between 1750 and 1850—should be welcomed by all historians of French medicine. Even William Coleman, who acutely observed both the "bourgeois medical doctrine" of the 1750s and the public health movement of the nineteenth century, never linked these two hygienic projects. Ouinlan, by contrast, makes an ambitious attempt to demonstrate the continuities in hygienic writings over this period: they were a forum for middling medical practitioners to critique both their social superiors and inferiors, and they increasingly addressed the effects of industrialization upon the urban poor, explaining away its adverse consequences by a variety of naturalizing strategies, culminating in theories of heredity. Quinlan divides the period into three: an Old Regime phase which rested on meliorist models and portrayed nervous diseases as evidence of the decline of civilization; a Revolutionary phase characterized by Utopian programmes for achieving social and political harmony through hygiene; and, lastly, a more pessimistic phase, lasting from 1804 until the 1848 revolution, underpinned by an appeal to statistics and concerned to cure, cleanse and decriminalize the working class.

Methodologically speaking, Quinlan asserts, "this study has moved beyond sociological explanations of medical power and the social constructionism associated with the new cultural history". This claim is supported by a second assertion: to have shown that doctors exercised their public roles by means other than a blatantly "unified ideological front", instead working in collaboration with a range of public authorities and "patients" to accomplish certain social, moral and political agendas (pp. 217–18). It is here that Quinlan's argument falls down, for me, since this dimension—the relationship of doctors to the formation of public authority over French bodies—is one of the least well-supported parts of the book. There is little attempt to show whether the books discussed actually had any outcomes in terms of changes in public policy, by whom they were read and

for whom they were written, and how significant their authors may be said to have been in the process of medically reforming the French public. For example, in presenting Charles-Augustin Vandermonde's essay on the perfection of the human species as a foundational work in the hygienic programme of the Old Regime, he passes over the fact that this book fell far short of the success achieved by comparable works such as Michel Procope's Art de faire des garçons, nor does he mention that Vandermonde died aged just thirty-five—six years after publishing his essay—having held no public position whatsoever. The attention to the circumstances of production and consumption of books which characterizes the cultural history of medicine is precisely what would be required here to demonstrate that works like this actually affected the public practice of medicine. This weakness pervades the book, which at no point shows degenerationist concerns implemented in actual programmes for the medical governance of the public.

One linking strand throughout the period is the notion of degeneration, for which various physiological models were advanced. Throughout, Quinlan uses the term "degeneracy" as the translation for the French dégénération. For the later nineteenth century, the term is perhaps apt, evoking as it does a systematic interest in forms of deviance and decadence and in hereditary social "vices", such as alcoholism. However, in his eagerness to represent degeneration as a concern which began within medicine, Quinlan fails to do justice to other forms of use, such as animal breeding and horticulture, a central resource for natural historical models of degeneration. Other elements of the hygienic programme were also older than Quinlan imagines: critiques of the adverse effects of civilization may be found in Jansenist medical writings and even in medieval works.

Emma Spary,
The Wellcome Trust Centre for the
History of Medicine at UCL

Rüdiger Schultka and Josef N Neumann (eds) in collaboration with Susanne Weidemann, Anatomie und Anatomische Sammlungen im 18. Jahrhundert. Anlässlich der 250. Wiederkehr des Geburtstages von Philipp Friedrich Theodor Meckel (1755–1803), Wissenschaftsgeschichte, Band 1, Berlin, Lit Verlag, 2007, pp. 516, illus, €49.90 (hardback 978-3-8258-9755-9).

On the occasion of the 250th anniversary of the birth of Philipp Friedrich Theodor Meckel, the eminent professor of anatomy and surgical obstetrics at the University of Halle, an International Symposium on Anatomy and Anatomic Collections in the eighteenth and early nineteenth century was organized at the same university in 2005 and this book presents the contributions to this symposium.

Philipp Friedrich Theodor (1755–1803), member of the prominent medical Meckel family, contributed not only to the science of anatomy and the theory and practice of surgery and obstetrics, but also to the holdings of the unique private collection, initiated by his father Johann Friedrich Meckel the Elder, which is now known as the Meckelsche Sammlungen or Meckel Collection. It comprises tens of thousands of anatomical specimens often illustrating congenital abnormalities for the purpose of teaching anatomy.

The twenty-six essays in this book are divided into four sections. In an introductory part we learn about Philipp Friedrich Theodor Meckel, and his involvement in the development of the teaching of anatomy in Germany. The editor Josef Neumann then offers his view on the changing development of anatomical science and practice in relation to contemporary ideas about the body. A second part gathers contributions dealing with anatomy and anatomists in the broader context of eighteenth-century German history of medicine. Hubert Steinke, for example, analyses the importance of Albrecht von Haller's famous Bibliotheca anatomica from 1774-77 and dwells on the relationship