

Book Reviews

HAROLD. J. COOK, *The decline of the old medical regime in Stuart London*, Ithaca, Cornell University Press, 1986, 8vo, pp. 310, \$32.95.

It is twenty years since Sir George Clark published his official history of the Royal College of Physicians. His book was liked by the establishment, but it was given a restless reception by younger historians. Since then a great deal of effort has gone into this subject. Professor Cook draws together revisionist findings and he adds much research of his own. He brings to bear on this subject the realities of social and intellectual history. His judicious and well-informed review supersedes Clark, and it demonstrates the full historical importance of this subject.

Professor Cook concentrates on the troubled experiences of the College of Physicians between 1630 and 1704. First, the fortunes of the College sank along with its Royal master. The revolutionary period then reduced the College to its lowest ebb. The Restoration revival was hesitant. Before the College's position was consolidated, it took further serious knocks to its prestige between 1689 and 1704. These complex events are described throughout with great clarity. The final sections of this study are particularly novel and compelling.

Cook succeeds because he is less myopic than Clark. He recognizes that the College was operating in a market situation in which its competitors were in a position of considerable strength. Notwithstanding the advances of science, the members of the College proved unable to distance themselves from their rivals. It is arguable that the College should be pushed still further from the centre of the historical stage. After all, there were fewer than forty Fellows for most of the century. Numbers were artificially boosted to eighty in 1687, but with disastrous consequences for the internal coherence of the College. The author urges that expansion of the College kept up with the pace of population increase. But there was only one Fellow for every ten thousand of London's population. Consequently, the medical needs of the population were largely met from elsewhere, from the ranks of other academically qualified practitioners, surgeons, apothecaries, and a whole host of individuals. There must have been at least a thousand of such practitioners in London at any one time in the later seventeenth century. Their leader was Thomas Sydenham, and their ranks included prolific writers and respected practitioners such as John Pechey and William Salmon. The author is perhaps not completely sensitive to the quantity and quality of the opposition faced by the College. He rightly avoids a monocausal approach in his analysis of the decline of the College. Perhaps more could be said concerning factors serving to isolate dissenters from the universities and consequently from the College itself. As a consequence of the religious tests, the College of Physicians was deprived of some of its most able potential recruits. It was thus set on course to becoming a slumbering Anglican coterie by the mid-eighteenth century.

Charles Webster
Wellcome Unit for the History of Medicine, Oxford

FRIDOLF KUDLIEN, *Die Stellung des Arztes in der römischen Gesellschaft*, Stuttgart, Franz Steiner Verlag, 1986, 8vo, pp. vi, 228, DM 59.00 paperback.

After his studies on slaves in ancient medicine and on the status of doctors in the Hellenistic East, Professor Kudlien turns to the place of the doctor in Roman society, by which is meant Italy and the Western Roman Empire from the third century BC until the third century AD. He is well aware of the difficulties involved in making such an investigation, and avoids many of the pitfalls by considering in turn various physicians according to their legal status, Roman citizen, new citizen, peregrine, slave or freedmen, before passing to the more problematic question of the status of the art of medicine and individual opinions of the acceptability of this or that physician. In this careful differentiation of types, Kudlien marks a great improvement over previous attempts, and in the range of material used, particularly the epigraphic, he offers the most accessible survey of medical life in ancient Rome.

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Nevertheless, his conclusion that “the social prestige of the physician in Rome, just as much as in contemporary Greece, was considerably elevated (‘recht hoch’)”, seems to me in no way borne out by the facts, although I am prepared to see a gradual convergence between the two halves of the Empire. Some doctors are wealthy, friends of emperors, and local worthies, but, in general, they derive their social prestige from that of their patients, not their art *per se*. In a despotism like Rome, access to the despot gave power and wealth, whatever the legal status of the individual. Leaving aside the doctors of the court, I can find little evidence for wealth or social activity by doctors in the western half of the empire as compared with that in the East. Even if one makes allowance for the greater number of inscriptions recording civic activities in Asia Minor than in Italy, the overall pattern remains. At the level of the local council or the local religious organization, Roman doctors are less in focus than their counterparts in the Greek East. Dynasties of doctors are rare, and hence, too, that long-standing link with the public activities of one town: only Velia, with its Ouliads, can parallel Heraclea Salbace, let alone Cos with the Asclepiads, and significantly, Velia was a Greek colony in Greek Italy. Even after two or three centuries, the doctor in Rome and Italy was primarily an outsider.

Secondly, opinions about doctors as friends or confidants must be treated with great caution, and can hardly be taken to say more than that successful doctors were, on the whole, liked. This banal conclusion may, perhaps, be avoided by a detailed comparison between doctors and other occupational groups, lawyers, architects or schoolmasters, for example, but, even here, it is doubtful what precision could be achieved other than that the doctor fell somewhere in the middle between a wealthy landowner and a peasant, although the social profile of lawyers seems to me to have been considerably higher than that of physicians.

Kudlien, on the whole, rejects conclusions drawn from epigraphic evidence that point to this split between East and West. But he is less critical of his literary evidence. The frequency of woolworkers and tax-collectors in catalogues of abuse should cause one to hesitate before declaring Thessalus to be of low status on Galen’s prejudiced evidence. Neither, given Galen’s father’s association with provincial big-wigs and, if the Arabic biographers are right, Galen’s grandfather’s activities as president of one of the guilds of Pergamum, is it at all likely that Galen was a non-citizen. By his day, citizenship was common among the councillors and landowners of his province, and the example of Plutarch, whose Roman name is known to us only from the chance find of an inscription, casts doubt on Kudlien’s hypothesis.

This is not to say that the doctor might not be a cut above the farm labourer, especially after the Triumvirs *c.* 41 BC had granted all doctors everywhere certain tax privileges, but the levels of assumed competence, social acceptability and financial gain might be so different that they can hardly be encompassed under the same rubric, or, if they are, that rubric becomes almost meaningless. Mme Gourevitch in *Le triangle Hippocratique* (1984) assembled a great mass of literary evidence; Professor Kudlien has carefully guided us through the various legal statuses that a doctor might possess. What is now needed is a much more careful examination of some of the theoretical suppositions involved in any attempt to understand the place of the doctor in Roman society. Then we may break out of the shackles imposed by the preconceptions of a Cato or an elder Pliny.

Vivian Nutton
Wellcome Institute

ROBERT S. GOTTFRIED, *Doctors and medicine in medieval England, 1340–1530*, Princeton, NJ, and Guildford, Surrey, Princeton University Press, 1986, 8vo, pp. xvi, 359, illus., £30.00.

Robert Gottfried describes this, his fourth book, as “a study of English doctors and medicine from the Black Death to the foundation of the Royal College of Physicians” (p. 3). Until now, he says, “there has been no attempt to present a systematic, synthetic view, either of the practice of medicine or the nature of medical practitioners. And”, he adds, “many of the specialized studies have been based more on theories than on the analysis of evidence” (pp. 6–7).