

Book Reviews

Guenter B Risse, *New medical challenges during the Scottish Enlightenment*, Wellcome Series in the History of Medicine, Clio Medica 78, Amsterdam and New York, Rodopi, 2005, pp. vi, 386, €80.00, \$108.00 (hardback 90-420-1814-3).

For those who research the history of eighteenth-century Scottish medicine, the name of Guenter Risse will be quite familiar. Not only is his *Hospital life in Enlightenment Scotland* (1986) a standard text on the subject, his numerous articles and book chapters have helped a generation of scholars gain insight into the theories and practices that guided physicians who lived in Enlightenment Europe. Stretching back to his 1971 doctoral thesis on Brunonianism in Germany, his research has consistently cast the historical spotlight on the experiences, both of physicians and patients, which collectively shaped the development of clinical medicine. A diligent denizen of archival collections, his publications are well-researched and his methods invariably incorporate recent historiographic trends in both social and intellectual history.

Scholars familiar with Risse's previous publications, and those new to his work, will be happy to hear that he has not lost any of his steam in *New medical challenges*. As indicated in its succinct, yet informative, introduction, the book covers three broad themes: institutional history, studies of select aspects of health and disease, and the interaction between medical theory and practice. As with his earlier work, Risse concentrates on primary sources related to Edinburgh's Royal Infirmary; but he also expands his focus to include other medical spaces such as student clubs and the public sphere of eighteenth-century publishing. Although the book covers several complex topics, it is written in an accessible manner. Each chapter begins with a helpful abstract and key terms are defined throughout.

The first three chapters focus on the motivations, medical or personal, that guided those affiliated with Edinburgh's Royal Infirmary and the city's student-led Royal Medical Society. Risse argues that the "charitable impulse" that sustained the Royal Infirmary was sparked by the moral, social and political concerns of both the donors who opened their pocket books and the physicians who walked its wards. His work on the Royal Medical Society investigates how debate and disagreement from the 1770s to circa 1800 shaped the way that the Society viewed itself and the way that it wanted to be viewed by the public at large. In particular, he shows that experiments and case studies cited in student papers were often accepted or rejected on the basis of an assortment of variables, including whether the evidence resonated with the ideas promoted by followers of John Brown ("Brunonians") or William Cullen ("Cullenians"). He also traces these divisions into a highly informative reconstruction of a legal case in which the Society members sought to prevent a local printer from publishing summaries of their proceedings in the *Edinburgh Evening Post*. In the end, freedom of speech prevailed over the Society's attempt to silence the paper.

The next three chapters address the ecology of eighteenth-century disease. As Risse explains, environmental factors played a prominent role in theories regarding the restoration or deterioration of health. This belief stretched all the way back to Hippocrates and, during the Enlightenment, it was recalibrated into what historians have called "neo-humoralism", that is, the belief that the fluids of the body needed to be balanced via the regulation of hard and soft tissues. After devoting a chapter to explicating Edinburgh's version of neo-humoralism, Risse devotes two chapters to the agricultural, industrial and medical factors that shaped the diagnostic and therapeutic approaches to "ague" (malaria) and "mill reek" (lead poisoning). Following on from the therapeutic issues raised by these

environmentally engendered diseases, the next three chapters unpack the attempts made by physicians and students to connect medical theory with medical practice (and *vice versa*). Drawing from a range of sources, especially manuscript casebooks and lecture notes, Risse uses phthisis (consumption), menstrual irregularities and hysteria (mental illness) to show that clinical training in Edinburgh was an empirically guided enterprise in which the theoretical constructs of health were sometimes frustratingly disconnected with the reality of the diseases encountered by physicians in medical practice.

Overall, each chapter contains enlightening insights and references to archival sources that have hitherto remained neglected by historians. For these and other goodies, one will need to read the book for oneself. Indeed, in the face of such impressive scholarship, I hesitate to raise any significant criticisms. There are, however, a few drawbacks that need to be mentioned. Those well versed in medicine as practised in Enlightenment Scotland will no doubt find several of the chapters' introductory sections a bit longwinded. Additionally scholars interested in the history of medical chemistry will also wonder why Risse sidelines the impact that experimental pharmacology had upon the medical theories that guided the physicians in the Royal Infirmary. Conversely, neophyte readers, especially students, will fail to appreciate the blow by blow accounts that are sometimes given for the medical and social factors that influenced the interpretation of a given disease. But, bearing these minor blemishes in mind, my advice is to skip over them as required. Because, upon final assessment, *New medical challenges* is a real gem. It is an outstanding piece of scholarship that will need to be read by anyone seeking to research what Edinburgh's professors were actually teaching their students—especially since so many of the university's graduates went on to practise and teach medicine in Britain, Europe, America, Africa and India.

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Helen M Dingwall, *'A famous and flourishing society': the history of the Royal College of Surgeons of Edinburgh 1505–2005*, Edinburgh University Press, 2005, pp. xxiii, 336, illus., £25.00 (hardback 0-7486-1567-9).

In 2005 the Royal College of Surgeons of Edinburgh celebrated its quincentenary. There is much to be said for taking this as an opportunity to recount the College's history. Quite apart from celebrating the institution's longevity, there is a deeper historical interest in understanding how it has survived, and how it has responded and adapted to changing circumstances and an evolving cultural context. Helen Dingwall tells that story in a way that will interest and entertain medical historians and the Fellows and Members of the present-day College alike.

Central to the College's history is its changing role in the evolving medical economy. The College began life as a trade incorporation, founded to secure and protect the rights and privileges of its members within the complex occupational and political structures of renaissance Edinburgh. By the eighteenth century, as skill in surgery became an increasingly saleable commodity in a burgeoning market economy, the Incorporation had begun to take on an additional educational and examining role, earning a healthy income from the pedagogical reputation of its members and the prestige of its diplomas. By the mid-twentieth century, as medical teaching came to be monopolized by the universities and medical practice by the state, so the College consolidated its activities around the administration of higher examinations, controlling access to consultant status within an increasingly hierarchical health care system.

The story of how the College achieved that transformation while maintaining its continuity of identity and tradition is a hugely complex one. The surgeons had constantly to negotiate and redefine their role in relation to many other institutions that made up its social and political environment. Initially, these were mostly local, including the Town Council, the Royal College of Physicians of Edinburgh, the University and the Royal Infirmary. Engagement with national