

## Book Reviews

the three chapters on “the species question” in the decades before Darwin. Here the discussion leaves the roads well-trampled by historians of evolution, and brings to light many important but hitherto unread works that bear directly on the question. He emphasizes the importance of continental discussions of the origin of species, thus connecting this study with his recent *The age of Lamarck* (1989). Just how widely read these continental works were remains debatable, and in general the audiences for the texts dealt with here could benefit from further discussion. Certainly the French and German texts had an effect on key figures like Lyell and Powell himself. Further attention to the medical world—the subject of Adrian Desmond’s *Politics of evolution*—would support Corsi’s insistence on what he calls “the French threat”.

*Science and religion* sets a new standard of historical sophistication for its subject. It provides a much-needed picture of a major figure, and illuminates wider debates about philosophy, science, and faith.

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RUTH HARRIS, *Murder and madness: medicine, law, and society in the fin de siècle*, Oxford Historical Monographs, Oxford, Clarendon Press, 1989, 8vo, pp. x, 366, illus., £30.00.

This book represents a major contribution to the history of forensic medicine and the sexual stereotyping of men and women late in the nineteenth century, both within medicine and in society generally. It is an Oxford doctoral thesis, inspired by Roger Smith’s pioneering *Trial by medicine: insanity and responsibility in Victorian trials* (1981). Some readers may find objectionable the author’s feminist interpretations of psychiatrists’ motives, especially the conclusion which speculates that medical willingness to view female patients and female criminals as biologically-driven minors was a response to the eruption of feminism in late nineteenth-century France. But the book’s painstaking analysis of dozens of cases from the Paris courts over the period 1880 to 1910 gives it an authoritative tone that will not easily be challenged.

Harris’s argument is that the courts’ classic imputation to the accused of responsibility and rationality, and the measured weighing out of retribution, were overturned by the rise of the first biological psychiatry in the nineteenth century, a rise to which Jean-Martin Charcot, a non-psychiatrist, contributed with his theories of hysteria. This “first” biological psychiatry (not Harris’s phrase) saw women in particular as driven by the force of Nature, especially by their easily excitable nervous systems, rather than by reason. Consequently, psychiatric opinions in court heavily emphasized “hysteria” and “degeneration” as explanations for female crimes of passion, and the female defendants were almost invariably acquitted. Thus it is fair to speak of a certain “medicalization of morality” (p. 18), very much culture-bound and quite without the support of genuine scientific findings, to which psychiatry and neurology contributed their share in the nineteenth century.

In chapter four we reach the archival material, in a discussion of legal procedure and medical intervention. The stage at this point is dominated by Paul Brouardel, the most influential forensic medical figure of his day. Chapter five, on “women, hysteria and hypnosis”, attempts to show how doctors’ firm opposition to lay hypnotizers (“magnetizers”) was motivated by concern about keeping women “pure” from the sexual advances of Jewish and working-class hypnotists, indeed by protecting physicians themselves from their own baser impulses. Here Charcot’s Salpêtrière school is chastised, the master’s own doctrines portrayed as a “refined stage in the medical ‘pathologization’ of women” (p. 203). Just as doctrines of anti-feminism were knocked by Third Republic liberals from the hands of the Catholic Church, Charcot and his disciples, according to Harris, scooped them up and carried them further. Now, whether Charcot and his pupils were any more anti-woman than the average middle-class male of the time remains to be seen, but Harris offers a number of specific interpretations of proceedings in the Salpêtrière that future scholarship will wish to confront.

The real core of the book comprises the next two chapters, on “female crimes of passion” and “alcoholism and the working-class man”, the basis of each being largely archival. A further

## Book Reviews

chapter on “men, honour and crimes of passion” neatly sets off stereotypes of male behaviour against those of female. These pages contain the main finding of the book, that psychiatric testimony was usually “based on determinist theories of neurophysiology, disinhibition and hereditarian degeneration, which almost always stressed some aspect of the hysterical disorder and linked a portrait of irresponsibility to a wider account of women’s biological life cycle” (p. 209). Not only do these chapters represent fine scholarship, they make for fascinating reading. Harris writes fluently, remains in absolute control of the material, and cites enough specific examples to make these pages—and the book as a whole it must be said—pleasure rather than duty.

It is only when Harris ventures upon the terrain of the general history of psychiatry and neurology in the nineteenth century that the ice becomes a bit slipperier. To set the stage in chapter two for the material that follows, she ends up portraying almost everything that happens in this medical domain as either culturally blinkered or part of the doctors’ plot against women. Thus it sounds almost suspicious on Antoine Bayle’s part that in 1822 he correlates “stages of degenerative brain tissue” with psychosis, in describing what later generations would diagnose as neurosyphilis. Rather than seeing this work as a major triumph of medicine, Harris views it as part of some male medical figment. Mocking the “brains exposed and examined with feverish attention”, she writes: “This anatomo-clinical entity, called general paralysis of the insane (GPI), was to be repeatedly applauded as a major milestone. As late as the French Congress of Mental Medicine . . . in 1889, for example, the alienist J.-P. Falret *files* declared that GPI ‘constitutes the most important discovery of the century’.” (p. 26). Indeed, one might argue this even today. Harris’s contempt for the accomplishments of psychiatry and neurology in the nineteenth century might be related to the thinness of her own knowledge of the subject, for her expertise is clearly on the forensic side, not the medical. She describes, for example, Duchenne de Boulogne as studying “locomotive ataxia” and “miliaanry aneurisms” (*sic* in both cases) (p. 26). The French term for delusions, *délire*, is mistranslated throughout as “delirium”. And it is a minor distraction that she consistently misspells the name of Ambroise Liébeault, a member of the Nancy school and an early writer on medical hypnotism. For all its splendid learning, there are parts of the book that cause some misgivings about the ransacking of the history of medicine by social historians and women’s historians, for in order to do a convincing job of “getting the goods on the doctors”—as the agenda of these researchers seems to be—one must know something not only about social history but about medicine as well.

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CHARLES E. ROSENBERG (ed.), *Florence Nightingale on hospital reform*, Medical Care in the United States: The Debate before 1940, New York, Garland, 1989, 8vo, pp. xi, 187, xv, 110, illus., \$60.00.

Facsimile editions of Florence Nightingale’s *Notes on hospitals* (third edition 1863, ‘Enlarged and for the most part Re-written’) and *Introductory notes on lying-in institutions* (1871) are here bound together with a seven-page introduction and further reading list by Charles Rosenberg. As he emphasizes, our primary identification of Nightingale with nursing reform has been in some ways misleading; to contemporaries she was identified with the reform of hospitals and military medicine as much as with nursing, while she in turn perceived the hospital as a microcosm of society with every part inter-related. To the architects and clients of the later nineteenth century it was *Notes on hospitals* that provided a powerful and accepted design guide, a planning polemic, and a detailed brief which clarified the emergence of a recognizable new building type: the “pavilion” hospital.

It was Florence Nightingale’s earlier failure to stop, or at least to have redesigned, the new Netley Hospital that convinced her that she must instruct public opinion on the underlying principles of hospital construction; as a result two papers by her were read at the Social Science Congress of 1858, and formed part of the first 1859 publication of *Notes on hospitals*. The present reprint is of the later expanded version, and already by the time of its review in the