

thought on the subject, to the European Middle Ages characterized here as “The Age of Faith”, to the impact of the European voyages of reconnaissance and the neo-Hippocratic reassertions of the eighteenth century. Thereafter Barrett’s strategy is to work biographically. Identifying key figures—Hoffman, Lind and especially Finke for the eighteenth century, Boudin, Tschudi and Schweich for the early nineteenth, and so on into the mid-twentieth century—Barrett provides thumb-nail biographical sketches and proceeds to summarize their main works, appending commentary on reviews where he could find them. A concluding survey of medical cartography provides a thematic overview of that subject.

Industrious though Barrett’s work undoubtedly is, it none the less suffers from a number of serious drawbacks. Primarily, in chapter after chapter, Barrett feels the need to judge his historical subjects on the adequacy of how they define the relations between “medical geography” and “geographical medicine”. Witness: Jean-Pierre Bonnafont is castigated because he “does not define what he means by medical geography” (p. 195); Ferdinand Becker is censured because he “confuses the distinction between medical geography and geographical medicine” (p. 213); Jean Christian Boudin is reproved because he considers that “medical geography is a ‘branch of medicine’ ” (p. 218). These are not isolated cases: a myriad others are reprimanded for their perceived definitional incompetences, while others are lauded for sustaining the distinction. August Hirsch, for example, gets it wrong; Adalbert Mühry gets it right. In one form or another, terminological fixation persistently reasserts itself. James Lind, we are told, did not use the term “medical geography” but his work “is fundamentally medical geography” (p. 135). The retrospective application of Barrett’s definitions on the historical record gives the work an apologetic feel in many places; it is as though the author is engaged

in a form of disciplinary self-justification by prosecuting the case for which zone of the academic grove (whether medicine or geography) is the essential home for certain kinds of activities.

A second troublesome feature of Barrett’s analysis is his tendency to slip into an outmoded “warfare” account of the relationship between Christianity and medical science. When he reports as a key finding of his inquiries that the “growth of Christianity thwarted the development of medicine in general” (p. 524), this can be sustained only at the expense of ignoring the corpus of revisionist work—for instance by Gary Ferngren and Darrel Amundsen—on the historical relations between medicine and religion. The desacralizing of medical discourse, for example, simply cannot be read as a rejection of traditional religion either in the Greek or early Christian eras. Finally, the entire work proceeds by summarizing the writings of a wide range of individuals. Long extracts, detailed synopses, and lengthy abstracts, frequently annexed to biographical sketches, characterize vast stretches of the book. What is lacking is a clear interpretative thrust. Little theoretical engagement means that the text is rather more a chronological digest of medical-geographical writings than a work of historical interrogation sustained by a compelling line of argument. Having said this, *Geography and disease* will prove to be an invaluable resource for students of medical history by virtue of its exhaustive surveying of a fugitive, and understudied, literature in the European medico-geographical tradition.

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Roberta E Bivins, *Acupuncture, expertise and cross-cultural medicine*, Science, Technology and Medicine in Modern

## Book Reviews

History, Basingstoke, Palgrave in association with the Centre for the History of Science, Technology and Medicine, University of Manchester, 2000, pp. xi, 263, illus., £45.00 (hardback 0-333-91893).

One of the ironies of *Acupuncture, expertise and cross-cultural medicine* is that the reader comes away with very little impression of acupuncture save the idiosyncratic European traditions of that art. Bivins' book is an elegant treatment of the latter subject in which she draws on a wide range of sources, from seventeenth-century Dutch accounts of acupuncture in Japan through records of the Macartney mission to China (1795) to nineteenth-century articles in the *Lancet* and household medical compendia. In a careful analysis she pulls together the disparate records into an insightful account of therapeutic needling as the subject of such European medical debates as those between ancient and modern learning, theoretical and empirical models of validation, or surgery and physical medicine.

"Acupuncture" was apparently transmitted to the European medical world in three phases, each phase characterized by three fundamental conditions: an atmosphere of interest in things oriental, a period of intense medical debate in the host culture, and the motivation of key professionals. Where Lu Gwei-djen and Joseph Needham's *Celestial lancets* (Cambridge University Press, 1980) gave a descriptive account of the early interpretations of Chinese medicine by European surgeons and physicians, Bivins examines the context of those accounts. In the reports of Chinese medicine made by the Macartney mission, for example, she finds an atmosphere of distrust of both the Chinese people and their civilization, exemplified in a form of medical mercantilism in which Chinese scholarly knowledge could be "mined for facts and marketable commodities in exactly the same

way that China's soil might have been mined for minerals".

Discussing the first phase, Bivins shows how the late-seventeenth-century images of the body in Chinese medicine reproduced by Wilhelm Ten Rhyne (1683) breach oriental visual conventions by presenting the face of the figures as an individual, perhaps even Ten Rhyne's own portrait. (Shigehisa Kuriyama's *The expressiveness of the body* [New York, Zone Books, 1999] expands upon the difference between European and Chinese perceptions of the body.)

Familiarity is a recurring theme: Ten Rhyne's insistence on flatus as the cause of disease seems to underpin his translation of the Chinese physiological essence *qi* as Wind; early writers render Asian terms into rigid anatomical language, Yin and Yang becoming in turn "veins" and "arteries"; moxibustion fares better than acupuncture in Europe since it is a gentler and more familiar form of local cautery techniques.

While Ten Rhyne combines both humoral and empirical rationales for acupuncture and moxibustion (he promotes the latter as an excellent cure for gout), it was the perception of acupuncture as a therapy founded on empirical knowledge that brought its second wave of popularity. In an environment conditioned by relatively sympathetic and serious approaches to Chinese medicine by both lay and surgical publications, French experimentalists such as L V J Berlioz found that therapeutic needling leant itself to the conditions of the new clinical medicine. The emergence of new models of the body defined by a system of nerves and nervous fluid (galvanism) seemed to have resonated with the less material physiology of Chinese medical theory.

Finally, in the early nineteenth century came a concerted British response: James Churchill's widely distributed monograph *Treatise on acupuncture* (1821); a spate of articles in the British and Scottish medical press debating, amongst other issues, the process through which the effect

of acupuncture was mediated. But despite being practised quite widely by moderate medical reformers and the odd medical luminary such as John Elliotson (1791–1868), Fellow of the Royal College of Physicians and Professor of Medicine at London University, 1828–77 saw a decline in academic interest. Bivins examines the records of isolated centres where interest and experiment persisted, particularly into sciatica, at UCH and the Leeds General Infirmary.

In the process of transmission, the practice of acupuncture became severed from its native Chinese theories. But it is a testimony to the very patchy treatments of the history of Chinese medicine available in European languages that Bivins sometimes sets the fragmented European conception of “acupuncture” (surgery, venesection, pain relief) against the, now out-dated, image of an unchanging theoretically driven Chinese system of medicine “2000 years old” (an image challenged in Elisabeth Hsu (ed.), *Innovation in Chinese medicine* [Cambridge University Press, 2001]).

The history of the third and on-going wave of interest in acupuncture, after the 1970s post-Cultural Revolution “opening up” of China, gets a brief mention in the conclusion and is a story that remains to be told in detail. Anyone embarking upon it will benefit from this well written, solid contribution to contemporary debate about innovation and the cultural specificity of medical knowledge.

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**Rebecca Flemming,** *Medicine and the making of Roman women: gender, nature and authority from Celsus to Galen*, Oxford University Press, 2000, pp. xii, 453, £55.00 (hardback 0-19-924002-7).

In spite of the increased interest in both ancient medical science and the history of women, Rebecca Flemming’s book covers a still quite neglected field by combining both of them. The book is the further development of Flemming’s PhD thesis and it is intended for not only classicists, but also all readers concerned with the relationships between women and medicine, and, in a wider sense, with women and their place in society.

The book is divided into three parts, each with two chapters and Flemming examines an impressive number of texts in an attempt to establish the role of women in society through the study of medical contexts.

The first part is an introduction to Roman medicine and the second and third examine the role of women in medical texts. In the first of these three major parts, the author tries to identify and locate female medical practitioners and patients within the Roman social context (chapter 1) and the medical knowledge of the time (chapter 2), considered as the heritage of a long tradition. Thus, figures such as the *medica*, *obstetrix* and *maia* are investigated in relation to their male counterparts, for whom there is much more evidence.

The second part, on the Roman period before Galen, leads us into a discussion of women’s role in two different types of sources, for Flemming separates the texts located within the sectarian tradition from the ones outside it. In chapter 3 she looks for evidence in the works of Celsus, Pliny the Elder, Dioscorides, Thessalus and Scribonius Largus. The conclusion of this part is the clear contribution of women to the literary works of these medical authors, but strictly in a subordinate sense, for the texts are explicitly orientated to a male audience. Women are considered in this context either as dubious sources of knowledge (they are always lesser practitioners) or as indirect recipients of medical services.

The second type of source assessed in this part (chapter 4) are the texts belonging to