

pages long each) chapters chronicle Sechenov's appointments to professorial positions at, first, Novorossiisk, then St Petersburg, and finally, Moscow universities, and describe the particular lines of research he pursued at the time.

Historians of science and medicine will find in Kichigina's volume a gold mine of previously unexplored materials on the history of the Military–Surgical Academy, nineteenth-century Russian physiology, and its five leading protagonists. They will likely delight in numerous anecdotes and interesting vignettes, for example, Borodin's dual career as a chemist and a composer, scattered throughout the book. But, familiar with the sophisticated disciplinary histories of physiology in other European settings, as well as the extensive literature on the transnational transfer of scientific ideas, methods, and institutions, they will be disappointed by the lack of a clear analytical focus. This void is already evident in the six-page introduction, the uneven and asymmetrical distribution of the material among the book's three parts, and the complete absence of conclusions. One hopes that *The Imperial Laboratory* will inspire numerous follow-up studies that will supplement the rich depiction of the early history of Russian physiology with an equally rich analysis.

**Nikolai Krementsov,**

Institute for the History and Philosophy  
of Science and Technology, University  
of Toronto

**Meegan Kennedy,** *Revising the Clinic: Vision and Representation in Victorian Medical Narrative and the Novel* (Columbus: Ohio State University Press, 2010), pp. x + 261, \$39.99, hardback, ISBN: 978-0-8142-1116-8.

*Revising the Clinic* is an ambitious work that sweeps through time from the eighteenth-century medical case history, to Freud at the

turn of the twentieth, and integrates analysis of forms of representation in both literary and scientific texts. It is perhaps misleadingly titled, since there is little on clinical case histories between the *Philosophical Transactions* in the eighteenth century, and Freud at the close. The actual focus lies pre-eminently on forms of vision and representation in the Victorian novel.

Whilst there is some discussion of medically related scenes in the novels, the link to science and medicine functions mostly at the level of methodology. Rather than look at specifically medical scenes, Kennedy draws on Lorraine Daston and Peter Galison's *Objectivity* (2007) to establish a model of 'mechanical observation' that she sees as operative in both scientific and literary texts. The readings of George Eliot's *Adam Bede* and *Middlemarch* thus focus on issues concerning vision and perception, and optical metaphors, rather than representations of illness or bodily ailments. The method is fruitful with regard to yielding new insights into the novels, but not entirely convincing with regard to the parallels drawn with 'clinical realism'.

One of the problems is that Daston and Galison's arguments, developed with reference to scientific atlases, do not translate easily into clinical medicine. As Kennedy points out in the *Middlemarch* chapter, the emergence of experimental medicine brought with it a new emphasis on speculation and imagination. 'Mechanical objectivity' or 'observation' does not capture the complexity of nineteenth-century medical practice, whilst the methodology tends to give primacy to the scientific domain, so that the literary is seen as applying or modifying the scientific, rather than evolving alongside in a process of mutual exchange. More emphasis on the nineteenth-century case history, particularly in the emerging sphere of psychiatry, would have helped to make this case, and also ensured that Freud did not emerge at the end as a sudden and complete departure from previous practice.

These quibbles suggest the complexity of Kennedy's undertaking. Within this perhaps over-ambitious frame there is much of interest. There are good readings of sentimental deathbed scenes in Charles Dickens's works and in Elizabeth Gaskell's *Ruth*, showing how graphic physical detail can be used to build a form of spiritual transcendence. The chapter on clinical realism in the Victorian periodical makes good use of the electronic index of book reviews in the *Athenaeum* to explore the extraordinary number of nine hundred reviews completed by Edwin Lankester, mostly on scientific and medical topics. It also draws on the work of the Science in the Nineteenth-Century Periodical project for its analysis of science in the *Cornhill* and *Macmillan's Magazine*. In neither case, however, does it actually cite the electronic source; Kennedy no doubt assumes that both sources could be easily found, but I would like to make a plea for the full referencing and bibliographical citation of electronic sources.

The book concludes with a chapter linking the work of Freud with that of Rider Haggard, following up Freud's suggestion in *The Interpretation of Dreams* that *She* (1887) was 'a strange book, but full of hidden meaning... the eternal feminine, the immortality of our emotions' (quoted p. 190). Although much has been written on Freud's methodology, particularly from a literary perspective, Kennedy offers an interesting re-working of notions of romance, drawing on Northrop Frye, to outline the imperialist, romantic quest figured in Freud's language of exploration. As suggested earlier, however, the fact that *Revising the Clinic* has not looked at nineteenth-century psychiatric narratives means that Freud is rather taken at his own estimation as a figure who overturns preceding practice. Clearly there are many novel elements in his work, but they would emerge more starkly in an analysis that took into account his immediate predecessors. Kennedy concludes that at the beginning of the twentieth century 'the novel and its insights had become altogether unavailable as a discursive model for medical prose' (p. 202).

This is, I believe, an overstatement of the case, and overturns some of the complexity mapped out in the text, returning us to a rather standard model of the triumph of clinical objectivity at the turn of the century.

*Revising the Clinic* has much to offer the reader. Whilst its more sweeping claims are not always convincing, it is always engaging, and offers new ways of thinking about the relationships between literary and medical narrative.

Sally Shuttleworth,  
University of Oxford

**Karen Chase**, *The Victorians and Old Age* (Oxford: Oxford University Press, 2009), pp. xiv + 284, £58.00, hardback, ISBN: 978-0-19-956436-1.

Karen Chase is a literary scholar who here examines how old age was represented by some prominent nineteenth-century authors, in particular Charles Dickens, Anthony Trollope and Lewis Carroll, but also Charlotte Brontë, Wilkie Collins and Elizabeth Gaskell. She adds a very limited discussion of visual representations of old age at this time.

She points out how pervasive older people were in the writing of the period, and how overlooked they have been by scholars. Also, how realistically varied are the characteristics of these older people and their interactions with younger people, especially in the writings of Dickens and Trollope. They are not stereotyped as helpless or inactive. Trollope apparently employed more older characters than any other nineteenth-century fiction writer. In particular, Chase offers an interesting analysis of Trollope's satire *The Fixed Period* (1882), which often seems an anomaly in his work. The story involves a fictional British colony in which people are required to retire at the age of sixty-seven, whereafter, they must spend one year in an institution before compulsory death to ensure