

Book Reviews

are apt to instill their principles into the mindes of weake persons, and you well know, if your wife got anything into her Head, all the reason in the World will not persuade her out of it."

There is much sophisticated analysis to admire that positions midwives into larger historical debates. South German cities, such as Nuremberg, Augsburg and Munich, controlled their midwives through "sworn women" usually of the respectable and well-to-do classes who attested to their morality and skill. Although some control came to be exerted by physicians and clergymen (also in the Italian states), the midwives up to the end of the eighteenth century retained their public personas and so contradict the general thesis that women in the seventeenth and eighteenth centuries were losing their public presence as public and private domains became increasingly split along male and female lines. Again, in the discussion of Braunschweig midwives in the second half of the eighteenth century the sociological definition of professionalization which has bedevilled a proper understanding of pre-nineteenth century medicine is by-passed by focusing on the quotidian concerns that allowed the midwives to view themselves as members of a professional group.

This volume is also enlivened by a series of pen portraits of midwives. One chapter looks at the enigma of the political midwife Elizabeth Cellier whose Catholic sympathies enraged London pamphleteers and whose character as heroine or muddled villainess shows how easily the office of midwife could merge with matters of state. Mme du Coudray in contrast is clearly a heroine, sent to spread the gospel of good midwifery practice throughout France. Her travels and tribulations are refreshingly retold in the best heroic-historical vein without a trace of the cynical interpretation so viciously prevalent in modern biographical history.

Perhaps the most important message of this volume is of the centrality of the midwife not only for worried parents or for a king like Louis XV anxious about the depopulation of

France. Midwives were seen as upholders and witnesses of moral and legal norms. They gave expert evidence on infanticide and whether the birth was premature or stillborn. They squeezed the breasts of women suspected of hiding their pregnancy and birth for evidence of milk. And in the midst of labour the midwife was expected to interrogate an unmarried woman as to the identity of the father. Perhaps the midwife was so well integrated in society that she also served its coercive purposes.

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Michael Hunter (ed.), *Robert Boyle reconsidered*, Cambridge University Press, 1994, pp. xviii, 231, £30.00, \$49.95 (0-521-44205-2).

According to Sir Hans Sloane, Boyle "had divers sorts of cloaks to put on when he went abroad, according to the temperature of the air; and in this he governed himself by his thermometer". Hunter suggests that the "prudent ratiocination" Boyle applied to his health was also the key to his fastidiousness in all intellectual matters. Although long-recognized along with Harvey, Bacon, Galileo, Kepler, and Newton as a key figure in the Scientific Revolution, it was assumed by many historians until recently that there was little more to be said concerning Robert Boyle as "sceptical chymist" and vouchsafer of the corpuscular philosophy in opposition to Aristotelian forms and qualities. The outstanding work of Marie Boas (Hall) in the 1950s appeared to have firmly established our portrait of the man. In more recent years however, J R Jacob's reinterpretation of Boyle as a political partisan, Steven Shapin and Simon Schaffer's glossing of Boyle's air-pump as laboratory theatre, and, above all, the exemplary archival work of Michael Hunter in ordering the morass of surviving Boyle papers, have restimulated scholarly assessment. It was with this in mind that Hunter called young scholars to a symposium on the 150th

anniversary of Boyle's death in 1691. This was held appropriately near Stalbridge on the Somerset-Dorset border where Boyle lived between 1645 and 1655.

The twelve revised conference papers printed here include a useful Boyle bibliography of nearly 300 items published since 1940 and a helpful introductory orientation by Hunter which again lays to rest Jacob's thesis that there was a direct connection between Boyle's espousal of the mechanical philosophy and the ideological conflicts of the English civil war. As both Malcolm Oster and John Harwood argue in their respective essays on interregnum politics and on rhetorical theory, Boyle transcended sectarianism and was indifferent to the identity of a government so long as it was effective. The keys to understanding Boyle, they, and other contributors, maintain, are the ethical and moral writings he penned as a young man in Latin and English. The problem for Boyle scholars is to demonstrate that these early thoughts and beliefs remained norms for the mature figure of the 1670s and 1680s.

Of direct interest to historians of medicine is Rose-Mary Sargent's examination of how Boyle constructed an experimental philosophy by comparing the methods of, among others, Galileo, Paracelsus, Helmont, and Harvey, as well as the practical activities of artisans. Boyle's plan to publish a critique of orthodox medicine came to nothing, though there are clear references to it in some of his other writings. It would seem that Boyle believed that physicians would benefit from a knowledge of iatrochemistry; equally, he maintained that chemists would benefit from a study of the physician's methods of diagnosis and use of inference, prognosis and confirmation. As Antonio Clericuzio plausibly argues, the purpose of the mangled dialogue, *The sceptical chymist*, was to make the study of chemistry respectable among gentlemen, while at the same time offering a criticism of those Oxford physiologists who were uncritically adopting the chemical principles of Paracelsus and Helmont.

Other essayists raise the vexed questions of Boyle's attitudes towards alchemy, miracles, final causes, and whether his belief in the existence of "certain subtle bodies" was consistent with his apparent commitment to mechanical philosophy. Like Newton, it seems that we shall come to see Robert Boyle as a transitional figure and that to achieve a full understanding of this remarkable man we shall need to immerse ourselves in seventeenth-century theology and ethical theory. Michael Hunter and his disciples will be good guides to our better understanding.

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Jean E Ward and Joan Yell (eds and trans.), *The medical casebook of William Brownrigg, M.D., F.R.S. (1712–1800 of the town of Whitehaven in Cumberland, Medical History, Supplement No. 13*, London, Wellcome Institute for the History of Medicine, 1993, xxiv, 176, illus., £23, \$38 (distributed by Professional and Scientific Publications, BMA House, Tavistock Square, London WC1H 9JR).

By profession a doctor, William Brownrigg had an enquiring mind and strong scientific leanings. With such attributes, it is not surprising he took to writing detailed case histories with the treatment instituted and its success or otherwise. A casebook, written in Latin, dating from 1737 to 1742 is still extant and is to be found in the Jacksonian Collection at Carlisle Library, Cumbria. As the editors, Jean Ward and Joan Yell, point out, the histories appear to have been fairly selective as they deal almost exclusively with patients drawn from the professional, merchant and skilled tradesmen classes, although we know that in times of emergency he also attended the distressed poor. The notes show him to have been a man of compassion, one who not infrequently refers "to this poor baby" or to a patient who "died a cruel death".

He was a careful and thoughtful doctor, sometimes concluding a history with a query