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catalogued under 'Several Scientific Texts' and the papers of the Society of Universal Harmony of Amiens under 'Mesmerism'. An album of Faraday letters collected by Latimer Clark has so far eluded this reviewer and it is generally frustrating to be told of strengths in particular areas when such clues cannot be easily followed up. Remarkably few recent secondary works are included and the fact that some items not listed are nevertheless cited in notes suggests that the catalogue is not complete for this type of material.

Whatever its deficiencies, the catalogue is a valuable contribution to a somewhat neglected subject and one hopes that it will inspire researchers to hit the trail for Minneapolis.

John Symons, Wellcome Institute

JENS LACHMUND and GUNNAR STOLLBERG (eds), *The social construction of illness: illness and medical knowledge in past and present*, Medizin, Gesellschaft und Geschichte, Beiheft 1, Stuttgart, Franz Steiner, 1992, pp. 182, DM 68.00 (3-515-05839-7).

Imaginatively conceived and well executed, this is the most stimulating collection of essays in the social history of medicine that has appeared in recent years. Boldly bringing together the past (five contributions) and the present (a further seven), *The social construction of illness* joins two major currents in recent scholarship: on the one hand, the social constructionist approach to the understanding of sickness and disease, and, on the other, the history of the patient/practitioner relationship, tackling medical history from below. The lucid Introduction, by the editors, and the five historical essays all make original contributions to this confluence (the contemporary essays are valuable too, but they fall beyond the scope of this review).

Robert Jütte's 'The social construction of illness in the early modern period' surveys trends in the existing literature, and, avoiding pompous pontificating, valuably reminds us of the dangers of backprojecting upon the past some of the prime assumptions about the social structures of medicine today. Not least, it would be glib and often anachronistic (Jütte insists) to talk about doctor/patient relations as if they were doing something given, albeit subject to secular variation. Often, it makes far better sense for earlier centuries, to think in terms of networks of care and cultures of healing. To single out the history of doctor/patient relations would be to fall victim to an understandable but treacherous teleology when discussing pre-modern eras in which professionalizing protocols were still labouring to construct the shapes of clinical medicine familiar to us today. Jütte's helpful advice to the medical historian is to turn to the writings of the medical anthropologists.

Barbara Duden has already learnt much from them. In her penetrating 'Medicine and the history of the body', largely distilled from her excellent Geschichte unter der Haut (translated as The woman beneath the skin. A doctor's patients in eighteenth-century Germany, Cambridge, Mass., Harvard University Press, 1991), she takes up the question of body history, reconstructing the body's economy as theorized by physicians and experienced by women in eighteenth-century Germany. Before "the birth of the clinic", before the invention of the medical gaze and the revolution wrought by pathological anatomy, soma and psyche formed a single system. Moreover, as Duden demonstrates through deft philological analysis, the body, to laypeople and physicians alike, was a site of metamorphosis, powerfully affected by change in the macrocosm: climate, seasons, environment, portents.

Jens Lachmund and Gunnar Stollberg's 'The doctor, his audience, and the meaning of illness' shifts attention to the physician, through study of *Über das Betragen des Arztes* (1789: On the doctor's behaviour), a fascinating tract of practical medical etiquette written by a Dr Wedekind of Mainz. Central to Wedekind's discussion was the physician's need, trapped as he was in Jewsonian patronage networks and saddled with inefficacious therapeutics, to gain the confidence of his patient. Late Enlightenment medicine, as revealed by Wedekind's text, was thus patient-centred; but it was a patient-focused contract in which ample scope was offered to the energetic practitioner, through a theatre of practice, to exercise a very significant *personal* (rather than professional) sway over his patient. Lachmund and Stollberg effectively deploy the idiom of theatre (dramaturgical authority) to portray the medical "show" recommended by Wedekind.

Lindsay Prior draws upon other categories and analytic skills—those of the geographer and the architectural historian—in exploring 'The local space of medical discourse', focusing upon the

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symbolic architecture of the children's hospital. In many ways the most ambitious of the essays in this volume (the author is forced, not least, to get to grips with the very notion of the "history of childhood") it reads as a preliminary study, a promise of further investigations to come. By contrast, Alfons Labisch offers in the concluding historical essay, 'The social construction of health', a highly assured overview of the reconceptualization of health and hygiene from medieval times to the dawn of industrialization by use of Max Weber's categories of demystification and rationalization, and Norbert Elias's idea of the "civilizing process". Inevitably somewhat schematic, it is also immensely stimulating.

Wide-ranging, conceptually sophisticated yet moored in empirical detail, these essays (alongside excellent accounts of the contemporary scene) make this the most ambitious and also the most fruitful foray into the social construction of health and medicine yet attempted. It deserves to become required reading.

Roy Porter, Wellcome Institute

ALFONS LABISCH, Homo Hygienicus: Gesundheit und Medizin in der Neuzeit, Frankfurt, New York, Campus Verlag, 1992, pp. 340, DM 68.00 (3-593-34528-5).

In industrial countries medicine has become an eminent scientific discipline and an even more important institution of aid. Polls show that the majority of the population regards health as the highest good, and the permanently growing demand for medical services has led to considerable political concern about an "explosion" of costs. In contrast to this, harsh criticism of medicine, describing it as an instrument of social power and control, has become common in the last two decades, and there is a keen interest in alternative treatments. This contradictory situation is the starting point for Alfons Labisch, the new director of the Institute for the History of Medicine in Dusseldorf, to carry out a study in the changing meanings and roles of health in Western societies from the Middle Ages up to the period of National Socialism.

Several sociological theories build the framework for his study: Norbert Elias' theory of civilization with its three "basic controls" in society (over nature, interhuman relationships, and the individual's self), Peter L. Berger's and Thomas Luckmann's "social construction of reality", and Max Weber's ideas of a rationalization of Western societies and a deprivation of mystique ("Entzauberung") of the world. Methodically, Labisch tries to bring out historical "ideal types" (in the sense of Max Weber) of individual and public health. In this way he describes the religious, transcendental view of health in the Middle Ages, followed by the more worldly perspective of the Renaissance (with its wish for a long life), that was succeeded by the association of health with rationality and morality in the Enlightenment. With the rise of experimental hygiene, and particularly with the foundation of bacteriology, in the nineteenth century Labisch sees the "homo hygienicus" being constructed, i.e. the person "who sees health as his highest aim in life and who subordinates his life to medico-scientific principles" (cf. p. 313). This construct was further developed in the social hygiene of the early twentieth century and eventually pushed to its extremes and perverted in eugenics and racial hygiene. Parallel to these concepts, historical interpretations of health as a social good and their consequences are traced: from epidemic control in Renaissance towns via the "medical police" of the Enlightenment absolutist state and the public health care in the period of industrialization up to the atrocities of the Third Reich, committed under the delusion of a pure and genetically healthy Aryan race.

Labisch's well-documented account considers the recent results of international historical scholarship and includes his own substantial contributions to the history of public health in the nineteenth and early twentieth centuries. In his conclusions he points to a basic aporia characterizing the position of medicine in modern society: medicine has been given the mandate to define the physical aspects of human existence in terms of meaning and values in that historical moment when it devoted itself exclusively to the natural sciences. Science, however, is principally incapable of setting values, or of giving an orientation to life and an ultimate meaning to human actions. Accordingly we observe now a boundless demand for, and expectations in, scientific medicine, and