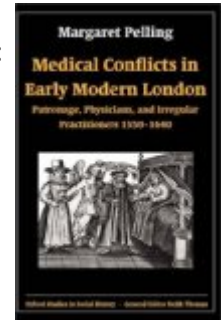


Elizabeth Lane Furdell. *Publishing and Medicine in Early Modern England.* Rochester: University of Rochester Press, 2002. xiii + 282 pp. \$80.00, cloth, ISBN 978-1-58046-119-1.



Margaret Pelling (with Frances White). *Medical Conflicts in Early Modern London: Patronage, Physicians, and Irregular Practitioners, 1550-1640.* Oxford: Clarendon Press, 2003. xvi + 410 pp. \$95.00, cloth, ISBN 978-0-19-925780-5.



Reviewed by Lisa Smith

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Ever since Harold Cook described seventeenth-century English medicine as a "medical marketplace," the concept has come to dominate the study of the history of medicine.[1] According to this model, demanding and knowledgeable consumers (patients) purchased remedies and the services of medical practitioners as commodities within a chaotic, unregulated medical system. Elizabeth Lane Furdell and Margaret Pelling have examined the experiences of non-elite patients and irregular (unlicensed) practitioners in early modern London, but they consider the model of the medical marketplace very differently. Furdell explicitly applies the model to the buying and selling of medical books and medical knowledge. Pelling's analysis of the relationship between the

College of Physicians and irregular practitioners challenges the model, showing how it can obscure more complex relationships amongst practitioners and between practitioners and patients.

Furdell (professor of history, University of North Carolina) has written an ambitious book, usefully bringing together the pre-eighteenth-century medical and publishing worlds. Such a study has long been needed; although medical books were in hot demand amongst medical and lay readers during the early modern period, relatively little work has been done on this subject. Furdell examines the relationship between the early modern London book trade and medical debates and practices. She sets publishing and medical discourse in a pre-eighteenth-century Haber-

masian "public sphere" in which regular and irregular medical practitioners, women, and lay people shaped medical knowledge.

Furdell argues that as print widely disseminated medical knowledge, the prestige of orthodox medicine and the power of physicians waned rapidly. Furdell suggests that printers were profit-driven, rather than politically or religiously inspired, and that the Royal College of Physicians ultimately undermined its own position. She first looks at how sixteenth-century medical practitioners used the new medium of print to debate the challenges to medical orthodoxy (university-trained physicians, the College, and Galenists) by Paracelsianism, or chemical medicine, and irregular practitioners. For the seventeenth-century, Furdell claims that the book business (selling and publishing) was becoming increasingly entrepreneurial, just as medicine was becoming consumer-oriented. Furdell uses booksellers' and publishers' inventories to probe a long-standing assumption that the London publishers, often dissenters and republicans, were predisposed to undermining the position of the elitist Royal College of Physicians. She shows, however, that the book business was all about profit rather than medical sectarianism or religious or political non-conformity. She also considers women's roles in publishing and writing medical books, the locations of London bookshops, the role of bookshops in providing people with medical alternatives (self-treatment manuals, recipe books, and proprietary medicines), and the technical changes in printed illustrations and their impact on medical literature. Furdell concludes that there was a relationship between the spread of popular medical knowledge through publishing and the decline of the College.

Although Furdell makes a number of interesting points, her book could be strengthened. A minor, but particularly irritating, flaw is Furdell's word usage. Throughout the book, she refers to women's medical and publishing interests as

"distaff" and medicine and medical matters as "iatric." "Distaff" relegates women's work solely to within the home, which contradicts her endeavor to show how women publicly participated in medical publishing. It is also a word that has nothing to do with medicine or publishing and little to do with the lives of most early modern urban women. As to Furdell's use of "iatric": what is wrong with "medical"? Such words, off-putting as they are to a professional historian, would be even more alienating to an undergraduate.

Another shortcoming is Furdell's weak use of figures, tables, and illustrations. It would have been helpful if she had used figures and tables to present information about the numbers of booksellers, publishers, and medical books. Furdell's rationale for her use of pictures is not apparent. She does not offer any interpretation of the images or explanations for including them. The text that refers to a figure of Sir William Read operating, for example, is actually about royal participation in women's medical practices, including a throwaway mention that in 1715 Lady Read took over her husband's practice, which had been supported by Queen Anne.

Furdell's book also needs more focus. While it is not meant to be only about the book trade or about medicine, it nonetheless fails to integrate these topics. For example, in the chapter "Location, Location, Location: Bookshops in London and Medical Controversy," Furdell examines the locations of bookshops, but digresses into discussions about coffeehouses (without linking it to bookshop locations) and the sale of proprietary medicines and popular medical books. Only six out of twenty-two pages refer to medicine, yet Furdell concludes that "For the medical world, bookshops symbolized the challenge to established authority and health care" (p. 134). Her assumption that proprietary medicines and home remedy books were controversial remains unsubstantiated. Moreover, Furdell does not effectively

demonstrate that links existed between bookshop locations and medical controversy.

The most serious problem of all, however, is that Furdell sees history in simplistic terms. A recurring theme of her book is that the Royal College of Physicians (an elite institution) was ineffective, filled with backward-looking, greedy old men who knew nothing about medicine. Furdell argues that Paracelsian medicine (initially associated with irregular practitioners) was superior to the "orthodox" medicine of university-trained physicians. Without evidence, she further claims that "Whether his [Paracelsus's] theories were correct or not, his patients and those of his followers recovered and handled their recoveries better" (p. 9). She also sees the early modern world as divided between the "elites," who imposed medical knowledge, and "popular culture," which fought against the imposition. For Furdell, medical consumerism was unquestionably good: "printed ads facilitated and intensified the popular movement already begun, away from medical arcane imposed by the elite on the unknowing patient and towards self-diagnosis and informed consumer activism" (p. 154). Contrary to her black and white view, however, not all physicians were bad or ignorant; irregulars (and Paracelsians) did not necessarily provide good medical care; and patients did not always know best. Furdell's interpretation leaves little room for the individual in history. In her preface, Furdell notes how difficult it is to probe the "motivations of men and women dead for centuries"; but if "one must be careful with the hearts and minds of those in the foreign kingdom of yore," then surely she does them a disservice by avoiding the messy complexities of the past (p. xiii).

Despite its faults, Furdell's book gives the reader a sense of medical publishing and book-selling and the cultural and social place of medical books in early modern London. Although Furdell's arguments may not entirely convince the reader, her overarching argument about the rela-

tionship between print, patient power, and physician control is a potentially interesting counterpoint to Nicolas Jewson's thesis that eighteenth-century medical knowledge was shaped by patronage, with physicians needing to cater to the desires of their aristocratic patients.[2] Furdell, in contrast, suggests some of the ways in which less-elite patients may also have shaped medical practices through the medical marketplace.

Pelling (reader in social history of medicine, University of Oxford) is more ambivalent about the concept of a medical marketplace. She wants to move beyond the increasingly "present-centred," "meaningless" model in her exploration of the relationships amongst irregular practitioners, patients, physicians, and patrons in early modern London (p. 342). Consequently, she proposes to look at medicine "in relation to other aspects of social, economic, and cultural life," focusing on a vast array of connections with the "matrix" of early modern London (p. 23). This book is the impressive culmination of Pelling's research over the last twenty years into the *Annals of the College of Physicians* between 1550 and 1640. Pelling reconstructs the medical practices of irregular medical practitioners through their conflicts with patients and the College, as recorded in the *Annals*.

London is central to Pelling's study; this book is as much a study of urbanization, immigration, and the middling sorts as it is about medicine. She examines the locations of physicians and irregulars in London as well as the immigration patterns of medical practitioners into the city. Pelling is also interested in the people of London and their communities: who complained about irregulars (patients, their family members and neighbors, and physicians) and why; who practiced as an irregular and what their activities were. She explores the medical "rival epistemologies" that co-existed (p. 241). Physicians saw themselves as providing a service rather than a commodity and a relationship built on trust. In contrast, patients and irregulars made verbal contracts that guaran-

teed certain results within a certain time, suggesting that they saw medicine as a product. The College of Physicians had other anxieties as well. First of all, it was a corporation with comparatively little power; the Fellows of the College tended to be older men, and medicine was seen as a somewhat feminine occupation. The College's attempts to extend its powers were complicated by the existence of patronage relationships. Reliant on noble patronage, physicians left London during plague outbreaks to be with their patients, but this provided an opportunity for irregular practitioners to flourish. Indeed, nobles might simultaneously be patrons of irregulars and sometimes pressured the College to ignore favored irregulars. The main thrust of the book, however, is to reveal the paradoxically close relationship between the College of Physicians and the irregulars. Pelling demonstrates how their training and social status were often very similar, which made it imperative that the College distinguish itself from irregulars. Although the College punished relatively few irregulars, the process of confrontation was intended to humiliate and intimidate, reasserting the College's supremacy over those who were treading too close to the College's fragile social and economic boundaries.

On the whole, this is an excellent, thoroughly researched and well-argued book. This book offers much to an audience beyond historians of medicine. For those interested in urbanization, the book shows how medicine changed along with the city, discusses patterns of immigration and perceptions of foreigners, and illuminates the variety of urban medical occupations. The book also suggests how middling sorts, irregulars, College Fellows, and the College constructed their identities in an urban setting. Historians will be especially grateful for the online database compiled by Pelling and Frances White from the records of the College of Physicians of London.[3] There are also an impressive number of graphs and tables to organize the masses of quantitative data. The appendices, containing a discussion of the Biograph-

ical Index of Medical Practitioners in London and East Anglia, examples of medical contracts, and a map and listing of London parishes, are extremely helpful.

There are a great many stories from the Annals that can be told. My one criticism of the book is that sometimes the stories got lost beneath the burdens of source justification and quantitative data. The introductions of most chapters (except chapter 8) were repetitive, emphasizing each time the difficulties of extracting information about the irregulars from a hostile source. This could all have been covered in one section. Similarly, some of Pelling's stories were buried in the footnotes, with the numerical data appearing in the text (see especially the first half of chapter 4). A better balance between introductions, numbers, and stories would make for more enjoyable reading. Pelling, nonetheless, intended to show the interconnections in early modern London between society and medical practice, between patients and practitioners, and amongst medical practitioners of all sorts. In this, she has succeeded admirably.

Historians have become increasingly interested in reading sources "against the grain" and juggling interpretations of multiple stories and tangled relationships. While the medical marketplace model has provided a helpful framework with which to study medical history over the last two decades, there are other stories to be told and other relationships than that of buyer and seller to explore. The model, unfortunately, sometimes prevents historians from seeing relationships (such as patronage) and activities (like the participation of family and friends in health care) that do not fit neatly into consumerism. Pelling is right: it is time to re-evaluate the usefulness of the medical marketplace for the study of history.

Notes

[1]. Harold Cook, *The Decline of the Old Medical Regime in Stuart London* (Ithaca: Cornell University Press, 1986).

[2]. Nicolas D. Jewson, "Medical Knowledge and the Patronage System", *Sociology* 8, no. 3 (1974): pp. 369-385.

[3]. Physicians and Irregular Medical Practitioners in London 1550-1640 Database, <http://www.britishhistory.ac.uk/source.asp?pubid=107>.

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