

Essay Review

W. F. BYNUM and ROY PORTER (eds), *Companion encyclopedia of the history of medicine*, 2 vols, Routledge Companion Encyclopedia series, London and New York, Routledge, 1993, pp. xxxvi, 1806, £150.00 (0-415-04771-4).

To be perfectly honest, opening the pages of an encyclopedia—almost *any* encyclopedia—is a task I have learned to perform more with resignation than with intellectual anticipation. The eleventh edition of the *Britannica* notwithstanding, most of us have grown accustomed to regarding an encyclopedia as a place to go to look something up, a helpful tool for quick reference, certainly, but a source of information more than insight. We take it from the shelf for the same reason we swallow a bad-tasting medicine: it might be good for us.

The *Companion encyclopedia of the history of medicine* leaves the reader possessed by such expectations startled and humbled, for we have here a work extraordinary in both its expansive scope and historiographic engagement. William F. Bynum and Roy Porter have orchestrated a remarkable collection of essays that comprise at once a thoroughly reliable reference tool, a wide-ranging synthesis of what the past generation of scholarship has yielded, and a vivid depiction of recent activity at the historiographic cutting edge. Routledge's promotional brochure bills this collection as above all "a comprehensive reference work"; and that it is. At the same time, the editors have brought to the mapping of medical history an encyclopedic vision more akin to the programme of Diderot and d'Alembert: they have recruited their contributors from among the leading scholars in the field, and have given them substantially free rein in interpreting the scope of their assignments and devising plans of analysis. The result is a reference work of lasting value, one with no plausible competitors in sight, and the most powerful collective portrait we have of the historiographic forefront of our field.

The 'Table of contents' to these two volumes fills more pages than are allotted for this review; nevertheless, indicating the overall plan is helpful in displaying how the editors have met the daunting task of organization. To begin with, they have eschewed short entries on individual diseases and people, rightly pointing the reader to *The Cambridge world history of human disease* (1993), edited by Kenneth Kiple, and to the standard biographical dictionaries. They have instead commissioned seventy-two original, generally 10- to 30-page essays, and partitioned them into seven thematic blocks. Chapters in the introductory section trace in broad strokes the shifting course of medical care and chart its historiography. In the second section, chapters treat in turn anatomical, microscopical, physiological, biochemical, pathological, and immunological traditions. The third section addresses how illness and wellbeing have been conceptually managed (nosologically and by assigning pathogenic roles to miasmata, humours, and germs) as well as broad disease categories—fevers, hereditary disorders, the diseases of civilization, and nutritional, mental, endocrine, tropical, and sexually transmitted diseases. Next comes a section on non-western, unorthodox, and folk traditions. The fifth section, on clinical medicine, includes chapters on diagnosis and treatment (psychotherapy, drugs, and physical methods), and on medical ethics and the doctor-patient relationship. The sixth section, on medicine in society, explores the medical profession and its institutions; nursing and other health professions; and such themes as epidemiology, public health, and personal hygiene. The final section, which particularly exemplifies the interdisciplinary character of medical history, turns to relationships between medicine and other realms of human enterprise, among them religion, philanthropy, sociology, anthropology, demography, literature, and war. While any blueprint for compartmentalizing the medical past is bound to be somewhat arbitrary, and overlapping is inevitable, the editors make a virtue of interrelations among the chapters through a well-thought-out system of cross-referencing.

To put one question to rest at the outset, this work is sensitive to the stuff of recent social history—gender, class, and race as indispensable categories of analysis, for example—and to the social embeddedness of medical cultures, both as bodies of knowledge and as sets of social practices. The great doctors are here, as they should be, as are pivotal moments of conceptual and technical change, but this is no mere tallying up of medical accomplishments. The chapters are peopled by sufferers as well as healers, midwives as well as surgeons, philanthropists as well as biomedical

researchers. Andrew Wear's 'Personal hygiene' and Roy Porter's 'Pain and suffering', for example, convey some sense of the experience and meaning of living inside sound and afflicted bodies in past centuries, while Johanna Geyer-Kordesch's 'Women and medicine' not only cogently summarizes recent scholarship on women healers but presses the reader hard to ponder where the field should go.

To anticipate another question, the collection does not gloss over the darker side of the medical past. David Arnold's 'Medicine and colonialism', to cite but one example, displays one of the most vibrant fields in recent medical historiography and at the same time some of the unsavoury ends medicine has served. True, it is possible to read about the operation for repairing vesico-vaginal fistula developed by J. Marion Sims without learning that his experimental subjects were enslaved African-Americans. On the other hand, the disclosures of the Nuremberg War Crimes Tribunal are not dismissed as an ethical aberration but contextualized as part of a larger experimental ethos disturbing to modern eyes.

Let me also dispel any suspicion that *the* history of medicine is equated with a linear western narrative running from Hippocrates to the National Health Service. The overriding emphasis is Euro-American, to be sure, with Britain seemingly the default mode ('Acts of Parliament' takes up 58 lines in the index; 'Acts of US Congress', 10). But an insightful opening essay by Arthur Kleinman asking 'What is specific to western medicine?' makes it clear that the editors are mindful of the global character of healing. More than this, Francesca Bray's 'Chinese medicine' is a model integration of social and intellectual history, and Lawrence Conrad's fine 'Arab-Islamic medicine' is the longest contribution in the collection, while other chapters look at 'Indian medicine' and medical systems outside the "great traditions".

What is the use of a work such as this? And for whom? First of all, it is a valuable reference tool for everyone drawn to engage with the medical past. The editors have aimed at a wide readership—beginning students, medical professionals, and an array of scholars including medical historians—and reach their target. On the most basic level, with cross-references and an index of nearly a hundred pages, it is possible to trace a particular topic—acupuncture to zymosis—through the collection, and the information found in the text is remarkably reliable. Using the index can require a little ingenuity, however: race and women make it in, for example, but class, ethnicity, and masculinity (although they are explored in the text) do not.

The more important point is that the encyclopedia offers vastly more than a quick informational fix. As a teacher, I expect to lean heavily on these volumes in preparing lectures, and to point students toward them: the undergraduate who needs a starting point for a research paper on medical jurisprudence, the medical student seeking a springboard to an historical project in twentieth-century surgery, the academic physician who wants a wedge into the history of medical ethics, and the postgraduate student trying to gain broad command of a rapidly expanding territory. Most chapters speak lucidly to multiple audiences—informative for the full-time academic historian of medicine yet accessible for the undergraduate student. To take three exemplary instances, W. R. Albury's 'Ideas of life and death', Jan Goldstein's 'Psychiatry', and Kenneth Kiple's 'Ecology of disease' are original, provocative, and challenging; but the authors keep a tight rein on the technical and theoretical language of the scholarly literature informing their analyses. This is above all a place to discover how a particular theme has been approached and contextualized. Further, the notes and bibliographies to each chapter are helpful guides to the historical literature, though there is astonishing variation in their fullness (suggestions for further reading range from notations of a few titles to lists spanning several pages).

It would be invidious and perhaps churlish to nominate candidates for best and worst chapters lists. Yet by giving authors such freedom in interpreting their assignments, the editors have garnered a number of creative contributions it would be sad were any reader to miss. Harry Marks's 'Medical technologies', for example, presents a masterful survey of the territory—much of it informed by studies by sociologists and policy analysts—and maps a suggestive programme for investigating the social place of medical machines. So too, in 'Medicine and war' Roger Cooter contests the "war-as-good-for-medicine" thesis so often assumed rather than explored and rethinks the questions historians might ask about relationships between medicine and militarization. Another chapter that should be widely read is Christine Stevenson's 'Medicine and architecture', a beautifully crafted analysis that demonstrates the historical promise of investigation at the interface between

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architecture and medicine. Any reflective student will come away from essays such as these brimming with ideas for research projects of their own.

At the same time, in any work of such expansive scale there are bound to be gaps: why a chapter on medicine and architecture, but none on medicine and art? Equally, a chapter on quantification and one on gender would have been welcome additions. And some very few chapters (such as 'Endocrine diseases', 'Immunological tradition', and 'Drug therapies') tend to fulfill one's grimmer apprehensions about encyclopedic prose: they are useful, but hardly calculated to entice the user to read on. Perhaps the most disconcerting feature of the overall plan, though, is the vast dissymmetry among the chapters in chronological purview. To be sure, some contributors succeed splendidly at tracing a broad sweep from ancient to modern times (nuanced chapters by Susan Lawrence on 'Medical education' and Dorothy Porter on 'Public health' come immediately to mind). Other authors, however, have elected a much narrower chronological focus for reasons either arbitrary or unexplained. The chapter on 'Childhood', for example, begins at the end of the nineteenth-century without a nod to anything earlier, whereas the chapter that follows, 'Geriatrics', opens with Galen and reaches the nineteenth century only nine pages later. So too, 'Anatomical tradition' ends abruptly with the passage of the British Anatomy Act in 1832, remaining silent about the ensuing one and a half centuries.

Declining to cover the full chronological range of their assigned topics is only one of the ways some contributors show signs of revolt against the encyclopedic format. Michael Worboys goes so far as to make a gestural subversion of his topic, 'Tropical diseases': "When historians in 'tropical' countries construct their own agendas for medical history and the history of diseases, it is unlikely that they will organize their enterprise in terms of tropical diseases or tropical medicine", he writes in closing. "Future encyclopedias of the history of medicine . . . will have to carry entries on disease and medicine in particular areas of Africa, Asia, and the Americas, in which the history of tropical diseases and tropical medicine will be an important, but curious interlude" (pp. 531–2). More common and more revealing is resistance to a genre that has an inbuilt tendency to encourage the telling of a single story—a master narrative of the sort historians now so often congratulate themselves on having escaped. Contributors repeatedly complain that they have been given "an impossible task" (p. 357), and that their treatment will be "at best, only partial" (p. 853). As Christopher Maggs insists in 'Nursing', "There can be no single 'History of Nursing, only histories'" (p. 1311). David Cantor similarly argues that "there is no single history of cancer to relate" (p. 540), and proceeds to split his chapter into two segments: 'Internalist histories' and 'Externalist histories'. "The separation is regrettable", Cantor acknowledges, but given the present state of the field "the two histories are not yet reconcilable" (p. 540).

The uneasiness many reflective contributors express about drafting definitive surveys underscores the pervasive distress in our field about fragmentation and the difficulty—yet urgent need—for synthesis. Most of us have come to agree that filling in a linear story of medical progress is no longer what medical history is about, but by and large we have yet to come up with compelling ways of drawing together all the rich, diverse, and increasingly dispersed perspectives that have proliferated over the past two decades. Calls for synthesis and integration have grown common and strident. Thus Gert Brieger concludes his chapter on 'Historiography' by asserting that "if it is to continue to expand its approaches to the medical past, the field of medical history must also pause significantly to begin to synthesize", adding that "the two most important tasks for medical historians are now to concentrate on comparative and on synthetic studies" (pp. 38–9). That is precisely the conviction that animates this encyclopedia. "It is high time for the appearance of works synthesizing these deep and diverse researches", the editors assert. "We do not pretend that the present work is the last word: it is an overview, a stock-taking which we hope will serve as a springboard for future investigations" (p. 4).

Bynum and Porter have taken on an immensely difficult task and executed it brilliantly. No student of the history of medicine will be able to ignore this encyclopedia, which belongs on the shelves of every serious library. It bids fair to becoming the most consulted collection in the field, and, unless Routledge produces a less costly second edition—perhaps a double-columned, single volume,—it may prove as well to be the most photocopied work on the history of medicine ever published. If few people are likely to give these volumes a reviewer's cover-to-cover reading, all will be rewarded for browsing and reading widely. Together, the editors and contributors have produced the best synthetic statement we have of the current state of medical history, and the field is greatly in their debt.

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