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as part of the moral order on the one hand and as pathological phenomena on the other.

Dr. Riese writes interestingly of his seventeenth century theorists, and the reader will find much of what he has to say rewarding, especially with respect to the work of medical men so little known as de la Forge and de la Chambre. Rather than praise the obvious merits of Dr. Riese's monograph, however, I shall make a few critical remarks regarding two of his theses. Certainly Descartes did, as Dr. Riese writes (p. 2, 3) leave a permanent imprint on the structure of neurology and psychiatry, but it is open to question whether the distinction and separation of these two branches of contemporary medicine is as wholly Cartesian in origin as he believes. An equally fundamental and much older antithesis than the philosophical one of *res cogitans* versus *res extensa* is medical and therapeutic in character: the treatment of the ill person with words (and other operative elements of human meaning) versus treatment with diet, drugs and surgery. It is also true that the separate tasks of the philosopher and physician, or of the divine and the physician, were well established long before Descartes. Further, in discussing the topic of the uses of the passions as set forth by Descartes (p. 11) and de la Chambre (p. 25), Dr. Riese ascribes rather too much originality to their views—he goes so far as to say that 'de la Chambre soutient pour la première fois sa thèse de l'usage des passions en disant que *le bon ou le mauvais usage fait tout le bonheur ou le malheur de la vie. En effet, si elles sont bon réglées, elles forment les vertus et conservent la santé; mais si elles vont dans l'excès, ces sont les sources d'ou les désordres de l'âme et du corps prennent leur origine.*' This passage contains nothing more than part of the standard medical doctrine of the six non-naturals (the sixth being the *passiones animi*), causative factors in health and disease which were regarded as beneficial if properly used but harmful if abused. Dr. Riese is of course aware that the thesis of the usage of the passions goes back to Galen, but he seems to have momentarily lost sight of the medical tradition in Western Europe insofar as he makes de la Chambre both anticipate Descartes and recall Galen and Plutarch, leaving a great gap in between.

These strictures do not significantly reduce the value of the monograph for the student of the history of psychology, psychiatry and psychosomatic medicine, but they do suggest that it must be read with some caution. More serious is the objection that half of the monograph is given over to the work of non-medical authors—although we are told in the preface that its subject is the theory of the passions in the light of medical, rather than philosophical and literary, thought—while the medical sources, rich as they are in the seventeenth century, are slighted. It cannot be denied that the title of the monograph is somewhat misleading, in spite of the value and interest of the contents.

L. J. RATHER

*William Harvey*, by KENNETH D. KEELE (*British Men of Science Series*), London, Nelson, 1965, pp. xii, 244, illus., 42s.

Over the years William Harvey, as one of the giant figures of medicine's past, has received much attention, mostly related to his discovery of the circulation of the

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blood, and considerable effort has been made to uncover every bit of Harveian information, inconsequentially archaeological as well as significant. In his preface to the present biography Dr. Keele states that he has sought to limit biographical details to what he considered relevant to his several purposes—relating Harvey's character to his work in an effort to determine how he made his great discovery, its effects in his own and later times, and Harvey's place in the long history of scientific progress. To these ends the book has been divided, according to its subtitle, into three sections: 'the man, the physician, and the scientist,' divisions more apparent than real since the author had a further goal, demonstration of the consistent interrelation of these three aspects of his subject.

Despite the limitations imposed by the pattern of the series for which the book was written, Dr. Keele, with a clearly apparent fondness for 'little Dr. Harvey', has evoked a charming picture of that relatively tiny, sallow-faced, introspective but hot-tempered physician. He places particular emphasis upon two of Harvey's qualities: an abiding loyalty to family and friends—the latter ranging from Aristotle, with all that meant to Harvey and his accomplishments—to Charles I and Thomas Hobbes. The second quality was, as Harvey himself called it, a 'love of truth', which led him, for example and somewhat uncharacteristically for that age, to pursue disease even into the cadaver, and in consequence of the more than 100 post-mortem examinations that he made, guided by this love of truth and by his clear and dogged observational skill, to become the greatest pathologist of his time. His examinations, according to Dr. Keele, were 'the first systematic attempts of their kind; [and] his technique was so good that retrospective diagnoses can be made of some of his cases.' At first thought, it may seem astonishing that in this particular quest for knowledge Harvey considered it in no way inappropriate to make respectful post-mortem examinations of the bodies of members of his own family and of his close friends, but in fact he saw no conflict between loyalty to the person and a search for truth in the clay.

For a great scientist Harvey was curiously conservative, looking by preference to the past rather than to the spectacular developments of his own day—according to Aubrey, referring to the 'Neoteriques' in forceful language of disapproval. Despite Harvey's years at Padua and his later communication with his continental friends, he appears to have been wholly uninfluenced by the new quantitative science of Galileo and Sanctorius, and in his medical practice made no use of such new and valuable clinical aids as the pulse-counter or the thermometer. His science 'was intensely personal' and as such, coupled with his native intelligence, led him to scorn the polypharmacy of his day, once again according to Aubrey, to the detriment of his medical practice.

At first thought, it seems unlikely that this was the sort of man to produce that epochal advance in medicine represented by *De motu cordis*. Nonetheless, Dr. Keele presents a convincing explanation of the manner in which Harvey, who had little comprehension of experimental science as we know it today, was able to accomplish his great work, in the broadest outline, through observational science, impelled by his 'love of truth' fortified by genius, and assisted in particular by Aristotle, Galen, and Fabricius—for whom Harvey's loyalty did not prohibit him from recognizing their errors while cherishing their truths. 'Respect for our predecessors and for antiquity

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at large inclines us to defend their conclusions to the extent that love of truth will allow. Nor do I think it becoming in us to neglect and make little of their labours and conclusions who bore the torch that has lighted us to the shrine of philosophy.' Unlike many of his contemporaries Harvey appears to have had a genuine appreciation of the evolutionary development of knowledge. The account of Harvey's accomplishment is, as it should be, the high point of the book.

Dr. Keele finds a close unity of theme between *De motu cordis* and *De generatione animalium*, not only as reflection of the Harveian personality—which, incidentally, contributed to such short comings as there are in the latter work—but also because both works demonstrate different aspects of cardiac dominance in the life of animals, both were based on the concept of circular motion, and both were strongly influenced by Aristotle, the former by Aristotelian logic and the latter by Aristotelian embryology. In both works the achievement was essentially the result of clear observation founded upon Harvey's primary interest in anatomy.

This most recent biography of Harvey, a book of modest proportions, has appeared as a volume in the series of 'British Men of Science', presumably published as sound but not necessarily highly specialized studies, for the benefit of intelligent laymen with an interest in medicine or science. Dr. Keele's book, however, transcends any such purpose since it is the first study of Harvey which has come successfully to grips with the all-important question of how his achievements came into being. It is certainly to be recommended to that larger group, but it is also a study that no specialist can afford to overlook.

C. D. O'MALLEY

*Varieties of Psychopathological Experience*, by CARNEY LANDIS, edited by FRED A. METTLER, New York and London, Holt, Rinehart and Winston, 1964, pp. xviii, 484, 70s.

Dr. Landis (1897–1962), formerly professor of psychology at Columbia University and at the time of his death chief of the department of psychology of the New York State Psychiatric Institute, conceived the idea of presenting the varieties of abnormal mental experience not, according to the usual plan of objective description of phenomenology, but in the form of subjective accounts 'of the nature of the "inner" experience'. His book 'consists of a selection of excerpts published by persons who were trying'—for any reason other than financial gain—'to describe such inner experiences during a deranged episode'. This type of writing is uncommon and much of it, not surprisingly, anonymous. Dr. Landis after extensive search in America and here, found only about two hundred books and an equal number of articles in the English, French and German literature. Instead of bringing together like passages from diverse sources as a kind of 'Readings in Subjective Psychopathology' he chose the harder way of organising his material by themes 'in the fashion of a textbook'.

His twenty-one chapters, each with introduction, many subheadings and discussion, recount such interesting aspects of mental illness from the inside—some little regarded in ordinary textbooks of psychiatry—as onset, assumed cause, lucid intervals, disturbed perception, disorders of thought and speech, delusions and hallucinations, pain, depersonalisation, insight, the effects of therapy and therapist, and so on.