Cavallo and Storey subject much received wisdom to scrutiny. They argue persuasively, for example, that early modern doctors and lay people were less obsessed with putrid air as a cause of disease than with the effects of the coldness and dampness of air. (Thus, the taste spread for canopies of thick curtains around the bed to protect the vulnerable brain.) The authors also revisit the accepted explanation for the decline of bathing in this period, which points to rising prudery resulting from religious zeal. Their close reading of the evidence suggests that anxiety about the loss of vital heat when stepping out of the bath and the pernicious impact of cold led people to abandon immersion. Cavallo and Storey also trace a growing aversion to routines of violent purgation and a preference for the removal of excrement, chiefly from the head, through grooming. Thus, the motivation for the multiplication of toilet articles, the larger number of servants and the increased time devoted to the master’s toilette is disease prevention.

This is a book in which the authors ask the hard questions. What happened to the ancient inheritance of medical knowledge based on the humours under the impact of new texts and new audiences? In granular analysis of the details of advice and practice, Cavallo and Storey show that the humoral understanding of health and illness had an elasticity that could accommodate new developments both in media and in taste. What explains this early modern surge of interest in health? The authors give credit to the printing press but are not satisfied with a simple, one-dimensional answer. Heightened attention to social distinctions and a lively consumer economy also played a role. Finally, what was the impact on the relations between doctors and the public of all this new reading matter? Cavallo and Storey give a balanced assessment. On the one hand, the health literature empowered lay people by giving them information about the body that they had not previously had. On the other, as Foucault would have argued without the wealth of empirical evidence mustered here, physicians also benefited as they extended their authority into new domains of knowledge and power.

Laurie Nussdorfer
Wesleyan University, USA

doi:10.1017/mdh.2016.33


This book may signal the emergence of a major new figure in the scholarship of early modern literatures in English – in his first book, Charalampous distils a vast array of textual sources in the service of a cohesive argument about the close connections between literature, philosophy, and medicine in the sixteenth and seventeenth centuries. These connections revolve around a principle of intelligent bodies, a view widely held among early modern thinkers, writers, and physicians that thought was a property shared by both body and soul. Informed readers may baulk at another book about the ‘mind–body relationship’ in the early modern period, as the academic publishing scene has produced more than enough works on this subject over the last two decades to make the ‘turn to the body’ a cliché. Such feelings will not be helped by the book’s title or by the first paragraph of the introductory essay – the book seems to assume that this mind–body relationship requires ‘rethinking’ and, as Charalampous states from the outset, that the ‘ways in which...
the body was theorised as an intelligent agent, with desires, appetites, and understanding independent of the mind’ is ‘a neglected feature of intellectual history and literature in the early modern period’ (1).

To say that a point of focus is ‘neglected’ is a risky strategy, and Charalampous used the same strategy at the beginning of his 2013 Intellectual History Review essay, which has been incorporated here almost unchanged (as indeed is his 2013 English Studies essay, which is included here as the first half of Chapter 5, on staging early modern tragedy). The interval between the first appearance of this material in print and its reproduction in this book might have provided an opportunity to ‘rethink’ this strategy of pleading neglect, in any case, as it soon becomes apparent to the reader that Charalampous is well aware of the dizzying amount of work that has been done on the early modern mind–body relationship. This book serves as a testament to its author’s erudition, which should render unnecessary the sort of gambit used to beg the readers’ interest here. If the reader can forgive the author his indulgence in the first lines of the book, there is much to be found of genuine interest in what follows, particularly for readers of early modern literature.

Charalampous is a literature scholar, first and foremost – after some excellent surveys of representation of, and arguments for, intelligent bodies in philosophy and medicine, there is a fascinating chapter on the centrality of corporeal thought in the philosophy of Michel de Montaigne; and then the remainder of the book covers the standards of literary scholarship: Spenser, Donne, Shakespeare, and Milton. Readers with a bent toward intellectual history or histories of medicine might not find that the interpretative work undertaken in Chapters 3–6 provides much of a contribution to the agenda of rethinking mind and body, but this reviewer is confident that literature scholars and cultural historians will find that something original is being offered in these chapters, even in a field as saturated as body criticism. A consistent thread runs through these readings, established early in the discussion of Spenser’s Faerie Queene, in which the allegorical potential of literature is shown to be intrinsically linked in the early modern period to improvements of the body. This is because, as Charalampous shows, the ‘body of allegory’ is not simply a metaphor at a time when bodies and text were seen together as extensions of God’s work. Allegory functions with respect to the passions, as Torquato Tasso wrote in the sixteenth century, so it derives its particular rhetorical force from its capacity to convey the analogous link between thinking bodies and thinking souls. The bulk of the book is thus devoted to mapping the implications of that link for other English literary giants, in English, of the following century, and in this respect makes a valuable contribution to cultural and literary studies of the period.

The author possesses an easy style that guides the reader through the connections that he makes between literary, philosophical, and medical texts, and readers who are unfamiliar with any or all of these domains should still be able to follow his arguments. Yet there are a number of ways in which this book makes life difficult for readers – there are inconsistencies in citing historical works, so it is not always clear when the cited work was written; there are signs that some portions of the book have been moved or removed without cues being added to the breaks to assist readers (so, for example, a section begins ‘The most memorable idea in Johnson’s essay is . . .’ (76), but this is seven pages after Samuel Johnson is mentioned once, and no essay has been identified); and there are significant gaps in the index (so a search for Johnson, for example, to help resolve the last puzzle, comes up empty, as there is no entry for Samuel Johnson; nor is there an entry for Montaigne, who features regularly in the book). We might expect, and hope, to see more of Charalampous in future, at least in English studies; it is hoped that he will
develop better openings and be more patient with those aspects of a text that even in our dualist world can, when not managed helpfully, make the reader feel bodily displeasure or ill-feeling.

Laurie Johnson
University of Southern Queensland, Australia

doi:10.1017/mdh.2016.34


In her third book on the history of madness in colonial Australasia, Catherine Coleborne portrays a society in motion and one means of bringing order to it. As port cities, Melbourne and Auckland – the book’s case studies – were not only gateways for immigration. As economic, political and population centres, they also attracted transient people and those who struggled to make a living. They were characterised by constant spatial and social mobility. While workers could find work and prosperity quickly, both could easily evaporate. Without family connections and savings, many would fall on hard times, some of them permanently. This was difficult to accept for a colonial society that was still unsure of its identity, as the visible poverty seemed to contradict the narrative of a successful, vigorous and muscular settler society. Would colonial Melbourne and Auckland have a prosperous future if so many immigrants could not cope with the hard and uncertain circumstances there?

That this sense of insecurity and dislocation felt by many had consequences for the mental health of some inhabitants of Melbourne and Auckland was perceived as an unavoidable reality of colonial life by contemporaries, and public asylums were supposed to take care of the insane. There they would be treated and detained, but also registered and categorised according to disease, gender, social status, ethnicity and race with the aim of bringing order to the minds of those who had been unable to adjust to life in the colonies. These records of the Yarra Bend Asylum in Melbourne and the Auckland Asylum form the foundation for Coleborne’s analysis, as they allow her to probe a society in search of its own identity. In so doing she has two different objectives set out in the introduction: the examination of imperial discourses on insanity and the exploration of institutional knowledge and practices in the colonies.

Coleborne pursues these two objectives in six chapters. She sets the scene by portraying the cities of Melbourne and Auckland from the 1850s to the 1880s and then continues in the second chapter by establishing each city’s network of social institutions taking care of immigrants in need, including the asylums for the insane. The third chapter focuses on the patients. Through quantitative analysis of the records, Coleborne can identify the medical, social, cultural and racial categories that the authorities considered useful to tabulating those in their care. During a patient’s career in the asylums, doctors would add further information. Thus, Coleborne concludes, the casebooks contain not just neatly ordered data but narratives of the insane that reflect not only their history as patients but also their perception by physicians and the production of the meaning of madness in the colonies. In contrast, the final three chapters are based on a qualitative analysis of the casebooks. They allow Coleborne to study the roles colonial societies expected men and women, whites, Chinese and Maori to play by interpreting the records on those of them who did not want or were unable to do so. In the fourth and fifth chapters, the author zooms in