

offers little to fill the void she creates. One is left with a demolished edifice and, while there are some bricks and mortar in sight, we find no blueprint for the rebuilding. Although she marshals much detail to demonstrate the dubious validity of many assumptions, Kinzelbach leaves us with a not very robust picture of the people involved. Despite the use of specific examples, both practitioners and patients remain curiously stiff and fleshless. The lack of vivid representation, and a rather mechanical style, are largely due, I believe, to the character of the book. *Gesundbleiben, Krankwerden, Armsein* is a dissertation that has been only slightly reworked for publication and the dissertation agonies remain much in evidence. Some judicious pruning and another rewrite for style, and perhaps a slightly less shrill tone, would have made this a better and more readable book. Moreover, Kinzelbach is not quite able to jettison all those misleading verities and conventions she pillories others for using. She is critical about medicalization, but often employs the phrase in a fairly loose manner. And she, too, finds it hard to do without specific disease names, even though she repeatedly insists, for instance, that archaic medical terms cannot be equated with modern diagnoses. Still the great attraction of the book is its methodological rigour. There is a sharp mind here at work and our encounter with it is both stimulating and salutary.

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Ute Fischer-Mauch, *Zum Verhältnis Apotheker/Arzt in Hessen: Bemühungen in Gießen um eine Novellierung der rechtlichen Grundlagen (um 1700)*, Quellen und Studien zur Geschichte der Pharmazie Band 69, Stuttgart, Wissenschaftliche Verlagsgesellschaft, 1995, pp. vi, 226, DM 34.80 (3-8047-1311-4).

The conflict between physicians and apothecaries is almost an ancient one, and one that grew, curiously enough, from their mutual

dependency. The exploration of this troubled relationship forms the substance of Ute Fischer-Mauch's investigation of apothecaries in Gießen around 1700.

The sources for such a study appear, at least on the surface, almost non-existent. Losses during World War II decimated archival holdings, and thus it is, as Fritz Krafft observes in his prefatory note, a "stroke of luck" that Michael Bernhard Valentini (Professor of medicine and Dean of the University of Gießen) published "Casus 24" in his *Corpus juris medico-legalis*. "Casus 24" contains both the opinion requested by the ruler of Hesse-Darmstadt on the proposed revisions of the medical ordinance and the informative gravamina tendered by the apothecaries in response. Fischer-Mauch employs the Casus as her principal source to evaluate the relationships between apothecaries and physicians in early modern Hesse-Darmstadt and to reveal how apothecaries themselves contributed to the reform of medicine.

The second half of the book (which the reader is perhaps well-advised to read first) presents the translated and edited "Casus 24". It begins with Landgraf Ernst Ludwig soliciting the medical faculty in Gießen for their expert opinion. This edict is followed by a catalogue of the grievances of the apothecaries in Gießen, in particular with regard to the proposed revisions in the medical ordinance. The final section of the Casus is the answer of the medical faculty in Gießen that attests the "emptiness" (*Nichtigkeit*) of the apothecaries' complaints.

Certainly when faced with a documentary black hole, such medico-legal texts as Valentini's "Casus 24" are a godsend to the historian. And Fischer-Mauch mines the Casus for all it is worth, delicately teasing out information that speaks to what she sees as the often obscured and infrequently examined relationship between physicians and apothecaries. From the Casus, then, there emerges a story of discord that dates back at least to the *Constitutions* of Friedrich II (in the middle of the thirteenth century). The *Constitutions* first tried to designate the

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“permitted” tasks of both physicians and apothecaries. Fischer-Mauch argues that the difficulties that arose from this and later attempts to define medical competencies with greater precision determined that tense, and sometimes bitter, confrontations between physicians and apothecaries would be the rule well into the nineteenth century.

The points of conflict that Fischer-Mauch identifies, however, will seem familiar to most historians of early modern medicine. Moreover, her presentation of the history of medical ordinances in Hesse-Darmstadt, the Germanies, and Europe, for example, while providing useful specifics on Frankfurt and Gießen, sticks closely to standard interpretations. For instance, no one is shocked to learn that the impetus for medical reform (starting in 1699) arose from the perceived need to control quackery better, and to achieve that goal physicians were to be placed at the top of the hierarchy of medical personnel. All other practitioners were to be subordinated to the academically-trained doctors. Not surprisingly, this relegation to a subaltern role drew howls of protest from the apothecaries. Likewise, the apothecaries resented the refusal to allow them any medical practice, which implied they were equated with barbers, midwives, bathmasters, and even unlearned empirics. A further, and especially vexatious, bone of contention was the physicians’ stubborn insistence on their right to dispense medicines, thus undercutting the economic livelihood of the apothecaries. These forms of subordination, or even, in the eyes of the apothecaries, degradation, were further exacerbated by a strict list of prices that did not always correspond to economic realities. In particular, the Gießen apothecaries protested at the unfairness of holding them to prices fixed for Frankfurt where raw materials and compounded drugs were cheaper. They forwarded all of these complaints in their gravamina to the Landgraf: they protested at the financial losses caused by quackery and self-dispensing; they sought a more equitable determination of prices; and most of all, they expressed their resentment at the diminution of their status vis-à-vis the physicians.

None of this is, of course, especially new, but Fischer-Mauch does a nice job of illustrating conditions in the setting of late seventeenth-century Gießen. Perhaps the most serviceable part of the book is the Valentini text that neatly exemplifies the play of forces—social, economic, cultural—involved in the tug-of-war between physicians and apothecaries for occupational standing and social respectability.

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Paula Findlen, *Possessing nature: museums, collecting, and scientific culture in early modern Italy*, Berkeley and London, University of California Press, 1996, pp xviii, 449, illus., \$18.95 (0-525-20508-1).

The histories of medicine and museums are thoroughly intertwined. In our own century, the monomaniacal collecting passion of Henry Wellcome has left a material legacy that still preoccupies more than one institution. During the previous century and a half, the likes of William and John Hunter ensured that museums played significant roles in medical education; while at the beginning of the eighteenth century, Hans Sloane, whose massive collection partly formed the foundations of the British Museum, drew much of his inspiration and indeed wherewithal from a medical career. Paula Findlen, in this fascinating and important study, asks us to cast our attention back even further to the very earliest site of the museum movement—to Renaissance and Baroque Italy—where the instincts of curers and collectors were similarly found intermingled.

Not content simply to describe and analyse the practices and processes of naturalist collectors like Ulisse Aldrovandi (1522–1605), Athanasius Kircher (1602–1680) and a host of lesser figures, *Possessing nature* says much of significance about the emergence of modern science and medicine from the cult of ancient wisdom, the development of natural history as