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during those decades. On so general a level, of course, this point has been well articulated before, for example by Henry Kamen’s The iron century (originally published in 1971). The authors depart from standard narratives, however, in emphasizing the ways in which certain early modern societies managed to escape the Malthusian dilemma of ever-increasing population and limited food supplies. They are persuaded by David Arnold, Esther Boserup, and especially Ronald Seavoy, that there were means by which peasants could break out of subsistence agriculture, and that the main mechanism lay in “becoming a commercial society, producing food primarily for sale to the market” (p. 204). In early modern Europe, the two first societies to find this solution were England and the Netherlands, and it was no accident, therefore, that they were the first agrarian societies to conquer the threat of famine.

What makes this book stand out from others, however, is the attention the authors lavish on religious interpretations of this period of new disasters and epidemics. But it is also here that the attentive reader senses an important difficulty. Cunningham and Grell tell us that all Europeans fitted their experience of mortality and threat into a renewed sense of apocalypticism, but almost all their examples come from Protestant Europe. At times they admit that apocalyptic expectations were stronger or clearer in northern Europe, and perhaps this explains why the book’s subtitle refers to “Reformation Europe”. Can it really be said that Southern and Catholic Europe shivered under the same expectations as their Protestant brethren? The evidence collected would seem to suggest otherwise. The authors are not, however, very well equipped to disentangle the various competing strands of apocalyptic thought. There was in fact no real consensus on what the white horse meant, for example, nor did Protestants agree on what the Apocalypse itself would be like. This was a point emphasized some time ago by William Lamont in his Godly rule: politics and religion, 1603–1660 (1969), and more recently by Robin Barnes, ‘Images of hope and despair: western Apocalypticism ca. 1500–1800’, in Bernard McGinn et al. (eds), Encyclopedia of Apocalypticism, vol. 2 (1998). If Grell and Cunningham had paid adequate attention to the varieties of apocalyptic expectation, they might have managed to present a more plausible thesis about the ways in which all Europeans used the Revelation of St John as the lens through which they understood their turbulent age. Even so, they have written an important book that stimulates even as it summarizes. The abundance of excellent illustrations also makes the book a joy to look at.

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Elizabeth Lane Furdell, The royal doctors, 1485–1714: medical personnel at the Tudor and Stuart courts, University of Rochester Press, 2001, pp. x, 305, £40.00, US$65.00 (1-158046-0518).

One can only welcome the idea of a book that seeks to bring together all the information on medical personnel (defined as physicians, surgeons, apothecaries, and others paid for medical services) at the Tudor and Stuart courts. Many of them are important figures in the history of medicine, Thomas Linacre, William Harvey and William Clowes among them. Others led lives of considerable variety: some were forced to flee abroad in times of religious or civil crisis, while others, like George Bate, survived in high office throughout every political turmoil. Some were highly learned, others mere placemen; others were more renowned for their activities away from court, as members of parliament, entrepreneurs, and even as a suspected pirate. Rodrigo López ended his royal
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service in 1594, hung, drawn and quartered as an imperial spy.

But there are serious difficulties in the way of such an enterprise, not least the fact that formal recognition of service to the royal household (however that is defined) by means of an official title and regular payment was slow in coming, and may not have been a regular procedure even at the end of the Stuart period. Hence an insuperable problem of definition. If, as this book does, one takes the view that anyone who received payment for medical services should be included among medical personnel, the list includes royal barbers, and possibly even a wise woman like Margaret Kennix, an empiric allegedly supported by Elizabeth I against the College of physicians in 1581. But the wider the net is cast, the harder it becomes to locate all the necessary information, for payments might be made in a variety of ways. While the household accounts of the monarch recorded a whole range of payments, they omitted others, which might be disguised under the heading of Christmas gifts or similar presents. To locate and identify all those involved is thus an enormously difficult task.

Professor Furdell’s expertise lies principally in the late seventeenth century, and it is for the later Stuarts that she is at her most reliable. The further she moves away from this period, the weaker her information and the greater the number of her errors. Her reliance for the most part on secondary sources makes checking her statements difficult, and, since she rarely specifies the type of document on which she relies, it is not always easy to estimate the extent to which any named individual was in regular attendance on the monarch, his wife or his immediate family. A tabulated list of all the personnel named, along with the relevant archival information, would have made clearer much of what is here presented in jejune prose.

Given the sheer difficulty of locating precise information in the royal accounts, it is perhaps unfair to complain that a slightly different focus would have revealed more details. A series of unpublished Cambridge PhD theses from the 1970s, for example those by Christopher Coleman and William Tighe, explored in considerable detail Tudor court finance, and it is odd to find David Starkey represented by only one article. Two major repertories seem never to have been consulted: the data-base of Tudor medical personnel established in the Oxford Wellcome Unit by Charles Webster and Margaret Pelling (whose work is here under-represented); and, even more surprising, Talbot and Hammond’s Medical practitioners in medieval England. The latter would have added several names for the reign of Henry VII, including William Lynch, Thomas Denman, Ralph Sentiler, Nicholas Halsewell, and the exotic Genoese doctor and astrologer, Giambattista Boerio.

It would also have confirmed that Lewis Caerleon continued medical practice at court after 1488.

Annoying errors abound: for example, there is no evidence that Brasavola treated Henry VIII personally (p. 28); Edward Wotton served as physician and Dean of the Chapel to Mary Tudor while Princess (p. 41, n. 60); and John Clement was paid as the King’s physician in 1538, but received no payment in 1539, since by then he had fled into exile (p. 41, n. 63). Whether John Caius left royal service in 1568 (p. 47) or 1556 (p. 73), the usual explanation should be approached sceptically in view of the fluidity of such “appointments”. Comments on the strong influence of Paracelsianism in the London College in 1581 (p. 74) are somewhat exaggerated. The account of the medical influence of Padua (p. 256) jumbles together the considerable influx of English students pre-1550, the lean years until the 1590s, and the brief decade and a half that saw Harvey and a few others return. But the notion that Venice created a second university at Padua misunderstands the role of the Counts Palatine as granter of degrees. Even odder
is the claim that in the sixteenth and seventeenth centuries continental universities like Salerno and Leiden taught little but Paracelsianism.

There is much useful material in this volume, and it will doubtless be consulted widely for biographical information on English royal doctors. But it is neither as comprehensive nor as accurate as one might wish, and the author's general understanding of the history of medicine in this period is shaky.

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There can have been few books so long awaited that, when published, have borne their considerable weight of learning so lightly. In 1985, John Benton argued that the most celebrated of all female writers on medicine, Trotula of Salerno, Chaucer's "Dame Trot", was a mirage. The tract that circulated widely under her name was nothing less than a composite assemblage of three different treatises, none of which, he believed, had a female author. His suggestion was taken up by Monica Green, fresh from her Princeton doctorate on late antique and early medieval gynaecological texts, who, with the agreement of Benton's widow, proposed to edit and translate this corpus. It could scarcely have been foreseen that this would entail a near total re-examination of medieval gynaecology, and a substantial revision of Benton's hypothesis.

The name Trotula appears to be a slang form (cf. Articella) and is not found in the earliest manuscripts. It may derive from Tro(c)ta, a common female name in early Salernitan records, and a healer of this name is also mentioned in the "Trotula" ensemble for a cure of a young woman. She is likely to have been the author of two, as yet unpublished, medical compilations, which include several recipes also found in Treatments of women, one of the three different works that make up the "Trotula" ensemble. The others are Women's cosmetics and The conditions of women (the latter also extant in an earlier version, On the diseases of women). Any or all of these texts may appear by itself, in whole or in part, in different redactions, and in other collections in a wide variety of European languages. Green's masterly unpicking of this complex puzzle is only summarized here, and those wishing to see the enormous labour that has gone into a few introductory pages must turn to her articles in Scriptorium 1996 and 1997, and the selection of her articles, Women's healthcare in the Medieval West, Ashgate, 2000. Together, text, translation and manuscript studies are indispensable for anyone interested in the development of medieval ideas on gynaecology.

The key to unravelling the mystery lies in the different approaches to theory and practice in the three treatises, The conditions of women is more theoretical, aware of the classical learned tradition of Galen and Arabic medicine; Treatments shows almost no interest in theory, and avoids many of the standard terms and explanations of learned medicine; Cosmetics, written by a man, makes considerable use of information from women, including Muslims. Style and content differ considerably between the three. But Green goes further in her deconstruction by relating their origin to the early stages of Salernitan medicine and to the complex intellectual and social background of Salerno. Building on the work of Patricia Skinner, she shows how the mingling of Greek, Latin, Arabic and even Jewish culture allowed the various original authors the opportunity to draw on different sources of information. Treatments explicitly refers to information gained from