Book Reviews

JACQUES GÉLIS, La sage-femme ou le médecin. Une nouvelle conception de la vie, Paris, Fayard, 1988, 8vo, pp. 560, illus., Fr. 150.00, (paperback).

Strictly speaking, in this work Jacques Gélis dwells on the substitution of the matron first by the educated midwife, and then by the obstetrician, as the central figure in the conduct of childbirth. In considering these changes as symptoms of long-term cultural mutations that occurred in Europe primarily from the fifteenth to the eighteenth century, he amplifies in various ways the scope of his subject matter. An occupation situated “at the crossroads of life and death”, which had much to do with morality and social control, midwifery involves a wide range of relationships. Hence the author, having presented much information and insight, has indirectly covered a web of different issues.

The book deals with social attitudes towards women, childhood, and family. Protecting children, and also protecting mothers’ lives appear as the most outstanding claims in the effort to improve the conditions of birth. Not only from this point of view do women appear in Gélis’s study, but also in a variety of topics concerning gender relations. The medicalization of birth is itself a process of gradual male intervention in a traditionally female domain, according to Gélis. He also examines modern debates on the role of women in procreation and child rearing, and the difficulties they faced in taking up midwifery as a profession.

Considerable emphasis is given by the author to the diverse forms of education for midwives and practitioners adopted in different countries, and to the theories, techniques, and debates of European luminaries on midwifery and obstetrics, a discussion that sheds light on how knowledge and power can overlap. These themes and their nuances are quite extensively developed in the first two parts of the book, particularly in relation to France. One could say that these parts are richer than the passages in which more specific facts and processes are put in the context of a broader picture of cultural changes.

Gélis’s main thesis is that birth raises questions about social conceptions of life, and indeed about correlative attitudes with regard to the human body. The transformation of birth into a medically-dominated event paralleled a process of the desacralization of nature and life, of the emergence of a modern, more “linear” and “segmentary” consciousness of the life cycle, which replaced the medieval “circular” one. In setting out to explore so wide a field, especially in the final part of the book, he seems to have gone too far from his original subject, a risk that he himself anticipates in the introduction. He also seems to have adopted a controversial picture of long-term mental changes in his attempt to explain the acceptance of the new professional healers. He argues that modern people could no longer resign themselves to a medieval passivity towards suffering and death. In spite of this, in general Gélis’s work is well-informed and readable.

Ligia Bellini
University of Essex


This is a bright and lively book, which, in its 81 pages of text and 46 of notes and bibliography, succeeds in its aim of showing that popular and learned medicine in seventeenth-century England were not clearly distinguishable. Doreen Nagy argues that the geographical isolation of many communities, the difficulties of travel, the small numbers of physicians and their concentration in London and towns like Bath meant that many places were without the services of “regular” licensed or university-trained practitioners. She also makes the point that the prices charged by physicians, apothecaries, and surgeons would have been too high for most people, especially the “settled poor”. Her conclusion is that the practice of popular medicine by women, faith healers, and others must have been widespread, given the lack of availability of regular practitioners and of the capacity of many to pay for their services.

In what is perhaps the most original part of the book, Nagy convincingly shows that curative methods (bleeding, purging, the mixtures of herbs, animal products, and minerals) were selected by each type of practitioner from a common amorphous pool of practical knowledge. “Medical