Buddhism, and suggests that āyurveda emerged in North India in the fifth century BC in literature preserved by Buddhist monks.

Ayurveda is a "humoral" system; the health of the body is controlled by three humours (dosas). Wujastyk takes issue with the commonly held interpretation that "disease is caused by an imbalance of the humours". He accepts that the idea of balance is certainly present, but he shows that disease may be more a question of misplacement than imbalance. Treatment is "allopathic"—the disease is to be countered by its opposite, as in western medicine. Remedies are largely plant, with some animal, materials. Ayurveda thus seemed immediately familiar to the first European traders, who brought with them the Galenic medicine that was practised in Europe up to the mid-seventeenth century.

The three main classical texts are those by Caraka, Suśruta and Vagbhata. The selections from Caraka deal with heredity, epidemics, and the early hospitals. Suśruta describes rejuvenation by somā, and has a large section on poisons and their antidotes. He details the training needed for a wide range of operative techniques, with their appropriate instruments. After his time, surgery disappeared from ayurvedic practice, to be taken over by itinerant practitioners handing down their crafts from father to son. Vagbhata (c. AD 600) included the work of Caraka and Suśruta in "the greatest synthesis of Indian medicine ever produced"; the selections are a general survey of medicine, the daily and seasonal regimen, the six savours, the humours, the vulnerable points on the body, and insanity.

The Bower manuscript is chosen for its information on the history of Indian medicine in the early fifth century AD, and for the importance of garlic in the āyurvedic materia medica. Kaśyapa (? seventh century AD—not previously translated) deals with the diseases of women and children, with miscarriages and the death of children regarded as the result of evil conduct in a

previous life. Śārṅgadhara (c. AD 1300) produced a relatively short text, which covered classical āyurveda, and added later techniques such as pulse lore and the use of metals in treatment. His prescriptions are now being used in the modern āyurvedic pharmaceutical industry.

Wujastyk describes the confusion that has always existed over the identification of medicinal plants, and he gives a useful bibliography for further work. There is an excellent index, English-Sanskrit and Sanskrit-English.

T J S Patterson, Oxford

Ivan Garofalo, Alessandro Lami, Daniela Manetti and Amneris Roselli (eds), Aspetti della terapia nel Corpus Hippocraticum. Atti del IXe Colloque International Hippocratique, Pisa 25–29 settembre 1996, Accademia Toscana di Scienze e Lettere "La Colombaria", Studi 183, Florence, Leo S Olschki Editore, 1999, pp. vi, 716, L. 130,000 (88-222-4798-1).

It was a good idea of the organizers of the 9th Colloque Hippocratique to focus on therapy, since this is the most baffling of all areas of ancient medicine. But after a useful beginning with a survey of some healing substances common to early Greece and the Near East (J Laskaris) and a magisterial survey by Jouanna of the therapeutic image of the Hippocratic physician, the problems posed by the theme to those without medical knowledge quickly become apparent. The authors, who are entirely classicists by training, are very good at tracing the influence of Hippocratic theories down into the nineteenth century, at lexical analysis, and at understanding the morality or guild behaviour that might lie behind the Hippocratic Corpus. They are often comfortable when dealing with magic and strange fumigations for women (excellent

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papers by Gourevitch and Hanson), and with Hippocratic notions of diet. Smith and Thivel both try in different ways to identify the contribution to therapeutics of the historical Hippocrates, but reach very different conclusions, although both suggest that we should look to some aspect of dietetics and their arguments contain much that is of value beyond the Corpus. Surgery as such is hardly mentioned, and the absence of any paper on drugs and drug therapy in the Corpus is a serious gap. Two more general papers look at the relationship between homoeopathy and allopathy in the Hippocratic writings (a somewhat confused piece) and at possible reasons for the success of the Hippocratic physician in the face of strong competition. This paper (by Demand) offers a variety of insights from anthropology to explain this success, but does not become involved with practical questions.

None the less, this is a very useful volume, simply through bringing together so many insights into this general theme. and, after all, a volume of conference papers can only contain what was offered to the conference. It is interesting to see how relatively seldom the authors stray from the more familiar treatises of the Corpus, which now include the gynaecological ones. Coan Prognoses, Prorrhetic II, Affections, and the surgical treatises are rarely quoted except by those authors who are talking more about reception and transformation than about the validity of the contents of the treatises. The valuable index of passages cited offers much food for thought, as does the very detailed bibliography. This conference also marks the substantial arrival of Spanish Hippocratic scholarship with no fewer than ten papers by Spanish scholars, mostly of a lexicographical content. This contrasts with the four speakers from Britain and the mere three from the USA. Much of this Spanish work is extremely technical, and can sometimes amount to little more than listing, but there are signs in several papers that a careful reading of Hippocratic Greek

can reveal a good deal about some of the suppositions behind the method of composition. This may not be quite what is meant by the history of therapeutics, but it offers at times new insights into the formative period of Greek medicine.

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The Wellcome Trust Centre for the History of Medicine at UCL

Juhani Norri, Names of body parts in English, 1400–1550, Annales Academiae Scientarum Fennicae, Humaniora, 291, The Finnish Academy of Science and Letters, 1998, pp. 470 (951-41-0832-9).

This is a piece of lexical research, and not part of anatomical history. Indeed, the core of the book is a lexicon of nearly 1,200 names, the product of a database constructed from thirty-three Englishlanguage texts. The lexicon is preceded and introduced by an elaborate apparatus relating to lexical fields and anatomy in particular. The more general introduction to medieval anatomy relies too much, perhaps, on the historiography of Charles Singer, but no damage is done to the lexical programme. This programme, although technical to the outsider, is broadly accessible and not too jargonized. Historians of medicine will recognize and locate this programme in relation to that of students of the vernacular, and especially of Linda Voigts. This book covers a late period, when English had a new renaissance, and seems to be part of a new language-based historical understanding.

Norri categorizes his source material into three groups: academic treatises, surgical texts, and books of remedies (the book as a whole forms a pair with Norri's earlier work on diseases). While the principle of classification of names is straightforward, the practice is very complex, requiring an elaborate justificatory lexical theory. What