Book Reviews

penetrated the original "medieval 'medispeak'" (p. xi) and has made the seventeenth-century medical terminology more accessible to modern readers. Unfamiliar medical and pharmaceutical terms are explained, and Burton also provides a useful glossary of the herbs, animal products and mineral substances cited in the text. The original sub-headings in each chapter have also been retained for ease of reference (i.e. Causes, Diagnosis/Signs, Prognosis and Treatment).

Although Burton has retained enough of the original text to convey the flavour of Rivière's *Practice of physic* his ruthless editing and removal of repetition means that some important elements of the original text are missing. For example, in Chapter X (Of a Cancer of the Womb) he does not include the author's discussion about the different forms of cancer that might occur. Furthermore, Burton is selective regarding the number of therapies that he lists. For example, while citing the use of frogs and river crabs in the treatment of cancer, he does not record the many other remedies recommended.

For those unfamiliar with the period, Burton provides a short Bibliography and Introduction to seventeenth-century medical practice.

Lesley Coates, Tunbridge Wells

Katharina Ernst, Krankheit und Heiligung. Die medikale Kultur württembergischer Pietisten im 18. Jahrhundert, Veröffentlichungen der Kommission für geschichtliche Landeskunde in Baden-Württemberg, 154, Stuttgart, W Kohlhammer, 2003, pp. XXVI, 258, €22.50, SFr 38.00 (hardback 3-17-018103-3)

Eighteenth-century German Pietism has not been short of historians. But while its theological foundations have been carefully explored, we still know woefully little about the everyday life of its members, and virtually nothing of their attitudes towards illness. Katharina Ernst's book (a revised version of her PhD thesis) is therefore a welcome contribution to the understanding of sickness within the framing of Pietism itself. She focuses on some of the leading figures behind Württemberg's Pietism, such as Albrecht Bengel, and his various pupils. She also sifts the correspondence and diaries of less prominent Pietists for reference to illness. With such information Ernst sets out to test the daily realities of illness against the theological ideals cherished in widely circulated normative Pietist publications on the subject by Philipp Jakob Spener, Samuel Urlsperger, and Magnus Friedrich Roos.

Ernst introduces the reader to current historiographical debates, followed by a thoughtful analysis of the methodological problems involved in the use of autobiographical sources. As only to be expected, she also discusses in detail the secondary literature on German pietism. While the density of information in her three prefatory chapters is often overwhelming, there are rewards in her source materials, which allow us to penetrate perceptions of, and reactions to, illness, cure, and moral evaluations of sickness, survival and death. In each of these chapters she relentlessly pursues these issues in relation to each of her chosen Pietists. While this method is occasionally tedious and repetitive, it nevertheless demonstrates how flexible Pietists dealt with the injunctions laid down in their Biblical interpretation.

The book's central claim is that the suffering physical body was vital to Württemberg's Pietists' faith. This is a bold statement that places Ernst in opposition to most of the secondary literature, which has generally argued for a neglect, even a complete rejection, of all physicality in Pietist culture. Ernst convincingly shows that while the interpretation of the Bible and other devotional literature was important to Pietists' spiritual education, it was the insight gained from human physical suffering that was believed to provide the ultimate salutary experiences on their thorny road to spiritual perfection. Württemberg's Pietists cherished their suffering bodies as laboratories of God's will whose workings were to be passively accepted. Although this ascetic attitude did not prevent them from seeking medical advice, therapeutic "success" was of minor importance. The endurance of physical suffering without complaint was celebrated as a step towards the divine.

Ernst's close analysis of her sources enables her to retrieve a wealth of new details on Pietists' daily experiences of illness. However, her exclusive focus on materials written by Pietists, members of a tiny religious minority in Württemberg who often lived far from each other, makes it difficult to agree with some of her more generalizing claims. The most striking example is her discussion of Pietists' understanding of nature in chapter 8. After having extracted all possible meaning from her material, Ernst concludes that eighteenth-century Württemberg Pietists inhabited an "enchanted" world, and that, in contrast to non-Pietist society (which underwent a Weberian process of "disenchantment"), God's influence continued to be prominent as the explanation of all kinds of natural phenomena including, above all. disease.

This sweeping argument emphasizes the uniqueness of Pietist culture. It is, however, hardly convincing in light of recent research on eighteenth-century understanding of nature, which has underlined the continuity of theological interpretation of natural phenomena at all social and intellectual levels. Ernst is aware that Keith Thomas's old "disenchantment thesis" cannot be maintained, but her book does not offer any grand alternative.

The wider culture of eighteenth-century Württemberg in which the Pietists lived, and with which they interacted, remains unexplored. How useful it is then to paint a picture of a Pietists' culture in isolation? How (if at all) did Pietists' attitudes towards disease differ from those of their non-Pietist neighbours, for example? Or, how far did their understanding of natural phenomena reflect, or was shaped by, more general intellectual trends in Enlightenment society in Württemberg?

Despite these lingering questions, Ernst's study is a lasting contribution to an area that has previously been written too exclusively from the theological top down. She offers us an enormously detailed description of the medical world of sick Pietists. In doing so she provides a pioneering contribution to how Pietists dealt with sickness, and shows how central this experience was for the construction of the Pietist faith itself.

> Claudia Stein, University of Warwick

Alan Derickson, *Health security for all: dreams of universal health care in America*, Baltimore and London, Johns Hopkins University Press, 2005, pp. xii, 240, \$30.00, £20.00 (hardback 0-8018-8081-5).

Histories of America's health system are often couched as enquiries into separate development. Why, in the early twentieth century, did the United States not follow Germany and Britain in passing legislation to secure national health insurance? Why in the post-war period, did America's health provision-voluntary insurance for the many, with statutory protection limited to the elderly and poor-differ so markedly from that available in the welfare states of western Europe? And why at the turn of the millennium, when some 44 million citizens of the world's wealthiest country lacked insurance coverage, did the USA remain "alone among the developed nations" (p. 157) in eschewing universal access to health care? These are some of the questions which animate Alan Derickson's new study of health policy debates from the Progressive era to the Clinton presidency.

Of course, they are also familiar questions, and historians of social policy have generally understood the American *Sonderweg* in terms of the decisive role of interest groups in its political system. Explanations typically centre on the greater wealth and leverage of organized medicine and the insurance industry that allowed the status quo to see off the challenge of reformers. Meanwhile they, unlike their European equivalents, lacked the support of organized labour, which was more ambivalent about national health insurance. Beatrix Hoffmann's study of the Progressive moment, and Colin Gordon's authoritative survey of twentieth-century health care politics are key