

which changing norms of medical sociability were tied to middle-class notions of respectable masculinity. Although Vandendriessche addresses how personal and professional honour was constructed in line with the values of the urban bourgeoisie within civil society, he does not analyse the way in which these were shaped by wider gender ideals, or how changing norms within medical societies also contributed to the redefinition of what was considered acceptable masculine behaviour outside of them. In the nineteenth century, the notion of honour was strongly tied to ideals of respectable masculinity; exploring the relationship between science, honour and masculinity would have offered yet another layer to understand how scientific practice was shaped according to norms of civil society. Nonetheless, this does not detract from the overall value of the book: Vandendriessche's study is a useful and welcome contribution to the history of the professionalisation of medicine throughout Europe.

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John Wiltshire, *Frances Burney and the Doctors: Patient Narratives Then and Now* (Cambridge: Cambridge University Press, 2019), pp. 212, £75.00, hardback/e-book, ISBN: 9781108476362/9781108754361.

In the preface to her monograph in aging studies, Andrea Charise subordinates the 'mere[...] cataloguing [of] instances of literary representation (an irksome critical mode [she] call[s] "spot the old person")' to a more nuanced approach that uncovers a 'constellatory essence of older age' in her work's historical periods of interest.¹ In *Frances Burney and the Doctors*, John Wiltshire refreshingly adopts a critical course in the latter vein. A cursory gloss over his book's table of contents, with chapter titles primarily referencing medical events in the eighteenth-century author's life, might initially suggest his work 'merely catalogu[es]' these incidents, a textual case of 'spot the Burney-ian medical passage'. Instead, Wiltshire's book presents its own 'constellatory essence' of cross-century patienthood with an intriguing premise that designates Burney as the inaugurator of the modern pathography.

The pathography, or illness narrative, refers to a genre of writing that tells stories of personal experience with ailment. The features that distinguish a pathographic account from, for instance, an enumeration of clinical symptoms in a standardised physician report, involve the former's dependence upon literary elements to convey these experiences. Pathographies tend to be characterised by a narrative structure that foregrounds the voice of the patient (or the patient's carer) in the context of an interaction with a medical figure. Though partially biographical, these works rely on myth- and metaphor-laden language to navigate the emotional extremes of the fears, losses and/or recoveries inherent in their experiences. The invocation of such elements is thought to give writers of pathographies an ability to find meaning in, and perhaps draw therapeutic value from, their ordeals.

Although medical humanities criticism commonly dates the conception of the pathographic genre to the twentieth century,² *Frances Burney and the Doctors* challenges this notion. Wiltshire argues that Burney was already sculpting narratives of medical encounters 150 years prior to their alleged emergence; her writings 'recreated drama of patienthood' (p. 16) by grounding the 'illness experience [within] encounters between actors in a medical drama' (pp. 5–6). From the outset, Wiltshire's settling on Burney as this genre's pioneer resonates with her penchant for integrating stage actions in even her nondramatic works. The strongest evidence supporting his choice, however, lies in Wiltshire's readings of Burney's accounts of select illnesses or medical procedures alongside topically similar, but stylistically disparate

¹ Andrea Charise, *The Aesthetics of Senescence: Aging, Population, and the Nineteenth-Century Novel* (Regina: University of Regina Press, 2020), xiii.

² Thomas R. Cole, Nathan S. Carlin and Ronald A. Carson (eds), *Medical Humanities: An Introduction* (Cambridge: Cambridge University Press, 2017), 126.

pieces by her contemporaries. He convincingly demonstrates how Burney, uniquely for her time, utilised drama-centred pathographic elements, while underscoring seminal eighteenth-century patient treatment issues that persist in our historical moment.

Across eight chapters, Wiltshire oscillates between different historical figures' views of the doctor-patient interaction to exemplify its dramatic representational complexities. The first chapter surveys key medical encounters in which Burney participated throughout her life (as a visitor, carer, or patient herself); the ensuing five close-read her and her contemporaries' accounts of individual encounters, and the final two examine the similar anxieties voiced in post-1964 pathographic texts. Chapter 2 pairs factual events surrounding British monarch George III's 'madness' in 1788–9 with multiple witness opinions on his condition, including those of Burney (then attendant to the queen). Reading almost like a Shakespearian drama, this chapter organically migrates from the king's sick-chamber to the queen's apartment, Burney's attendant-room and the public court. This perspectival interweaving highlights Burney's pathographic framing of illness and recovery as extending beyond the patient to a broader affected circle. If the monarch's malady at first 'metastasis[es] through the court, affecting everyone' (p. 42), Burney's later record of her accidental meeting with him, Wiltshire argues, contrarily sparks a remedial suffusion: when addressed kindly by the king and relieved of her initial terror at encountering him, Burney empathetically identifies in his apparent recovery and disseminates her cheer over his ameliorated situation.

Conciliation proves essential in Burney's recorded conflicts between doctor authority and patient agency, another recurrent thread in her writings. The fifth chapter's reading of Burney's 1811 account of her anaesthesia-free mastectomy calls attention to the alleviation afforded her by moments of mutual understanding with her doctors. Wiltshire outlines how, amidst her narrative's dramatic tension-building from unexpected surgery delays and her initial resistance to the medical team's orders, Burney depicts herself drawing strength from two events: the head surgeon's momentary insinuated concern over her predicament, which incites her to brave the operating table prior to her surgery; and her verbalised expression of pity for the anxious doctors during the procedure. Complicating the predominant critical perception of Burney's mastectomy narrative as a retaliation against "'masculinist" medicine' (p. 118), Wiltshire highlights these pathographic instances' assignment of empathy to assuage doctor-patient differences.

These fleeting but crucial moments presage the book's later focus on modern pathographies' investment in the effects of physicians' language, gestures and tones on patients' assimilation of their medical diagnoses. Wiltshire cites one autobiography's anecdote of a doctor who refers to a patient's artery blockage as a 'widow-maker' (p. 193) when conversing with that patient's spouse. The comment's inflicted suffering registers with the reader even more palpably given the especial prevalence of comparable anecdotes in life-endangering or end-of-life care contexts. Such contexts, Wiltshire's sixth and seventh chapters show, frequent pathographic narratives that feature patients' or carers' struggles to balance hope for a convalescent outcome against the reality of one's condition and trust in the caregivers' communications. Wiltshire analyses Burney's attempt to out-compete doctors' dire diagnoses in her own retrospective narrative recounting her husband's final days. Creatively foregrounding herself as an exertive hope-wielding carer figure in opposition to a husband-patient resigned to his fate, Burney casts herself and him as contrasting tragic characters in true pathographic style.

Wiltshire's delightfully readable work would interest anyone, from first-year students to advanced career scholars, in the long eighteenth-century studies, medical history, narrative medicine and 'traditional' medical fields. Exemplary in its thoughtful consideration of diverse perspectives (from both current and historical figures), his seamlessly crafted critical narrative is a testament to the kind of creative scholarship that cross-disciplinary ideological engagement cultivates. If, as the book's acknowledgments indicate, consulting the expertises of medical, literature and medical humanities departmental faculty generates works like *Frances Burney and the Doctors*, further such collaborations should be encouraged.

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