ideas of maternal and paternal contributions to the creation of the foetus. We do not learn, however, whether the bestowal of paternity was peculiar to medicine or if other arts and sciences also gained a male parent at this time.

As might be expected, in the practical arena physicians or communities of physicians who considered themselves the upholders of empiricism, of sound nonsense practice, unsullied by theory, have most often invoked Hippocrates. Invocations of this sort dealt with here include those of Thomas Sydenham and his circle, the fellows of the eighteenth-century Royal Society concerned to develop medical meteorology, the physicians of Paris medicine and Antebellum American doctors. All the authors dealing with these communities attempt to understand the defences of empiricism and the use of Hippocrates in a wider context. Other essays in the volume, however, remind us just how much texts can be manipulated. That Hippocrates might be used to endorse theory rather than practice seems unlikely at first sight. Yet Jole Shackelford in his chapter on the Paracelsian doctor Petrus Severinus shows exactly that. It was not the case, however, that chemical philosophers were united in their appeal to the Greek sage. In one of Andrew Cunningham’s examples of the use of Hippocrates in the seventeenth century, the chemical physician Marchmont Nedham shows downright hostility to the great man. Non-use is as intriguing as use. This is Robert Martensen’s theme. Martensen looks at the Oxford circle around Thomas Willis and finds not hostility to Hippocrates, simply indifference. Martensen speculates that since the Puritan doctors had appropriated Hippocrates and made him the father of plain speaking and an opponent of speculation he was of little use to Royalist theoreticians.

The ethical uses of Hippocrates are modern, no doubt because in one sense medical ethics are modern. In Susan Lederer’s essay on early twentieth-century America, Hippocrates enters the public sphere, on stage, screen and in paperback. At this time, critics of the profession dragged the oath through the mud of fee-splitting and illegal abortion to show how modern doctors had fallen from the standards set by the physician of Cos. Three essays on France, Britain and Germany in the inter-war years conclude the volume. The Hippocrates of this period is hard to sum up, although he clearly was employed to organize nostalgia for an organic lost world where the doctor was treated as a priest and the healing power of nature replaced modern technology. These three essays remind us, particularly Carsten Timmerman’s on Germany, that the doctors who wrote on Hippocrates at this time comprised the last generation to be schooled in the classics.

I may be mistaken, but Hippocrates no longer seems to have the presence in medical debates that he once did. Nor is he any longer a presence in a doctor’s education. It is hard (but not impossible) to invoke someone in your cause if you do not know what he said. Hippocrates lives however. In the popular imagination he is medicine personified. As David Cantor shows in his introduction, any computer game that needs a doctor has its Hippocrates. I have done scant justice to the essays I have mentioned and none to the excellent ones I have not. This is a most rewarding read about a man who was all things to all doctors.

Christopher Lawrence,
The Wellcome Trust Centre for the History of Medicine at UCL

Always acerbic, the co-founder of modern bioethics, Maurice Pappworth used to allege that Richard Asher’s reputation as a medical etymologist was an accident. As a wedding present, Asher’s wealthy father-in-law had given him a complete set of the *Oxford English Dictionary*; thereafter, faced with any inquiry, Asher would go upstairs to his library in Wimpole Street, look up the answer, and reply to the questioner. Now any inquiring letter would hardly be needed: Robert Fortune’s engaging new book will provide most of the answers.

Fortuine’s interest in words was sparked when as a medical student he encountered William Francis, the librarian of the Osler collection at McGill. Even before that, however, he had spent his undergraduate years studying classical and modern languages, and continued to do so as a physician to Native Americans, mostly in Alaska, where he is now a professor at the University of Anchorage. His aim is to examine the English medical vocabulary, its roots, its borrowings, and its imagery. Self-evidently a vast amount of work has been involved (the first-class index runs to thirty pages), but Fortune is generous about his sources. I was delighted to see some of the classic references quoted, among them books by Jespersen, Skeat, and Weekley (the first husband of Frieda von Richthofen, who later married D H Lawrence). But he wears his learning lightly, and justifies the inclusion of the word “delights” in the subtitle.

You are either a sucker for such books, or not, and I am, reveling in being reminded of derivations forgotten or learning new ones. I did not know, for instance, that “piebaldism” is related to *pie*, the old French for magpie; that the general practitioner’s “heart-sink syndrome” had been anticipated by the French *maladie du petit papier*, describing the patient who arrives at the doctor’s surgery with a written list of symptoms; or that the singular of fomites is *fomes*. And the idea that in writing the traditional Latin prescription the doctor could add *Ne tr.s.num. (Ne tradas sine nummo)—do not deliver without the money* if he doubted the patient’s ability to pay, was another gem.

Most critics who review books on words seem to share two aims: they try to detect any omissions or the author’s own grammatical mistakes. Discussing drug names, Fortuine does not mention Rifampicin and its derivation (from Jules Dassin’s film *Rififi*); he omits the Munchausen by proxy syndrome, and Lack of Moral Fibre, the Second World War equivalent of shellshock for combat pilots. As to his solecisms, he misuses “decimated” and “respectively”, there are too many unnecessary adjectives and adverbs, and participles dangle throughout. But these are trivialities: Fortune is a Burchfield, not a Fowler—a wry and expert commentator who realizes that language will evolve whatever he says, rather than an authority laying down fixed rules, and his aim is to record what has happened. And if the pages appear “drich” (Scots onomatopoeia, as Fortune will recognize, for its climate), at least we are spared those facetious cartoons so popular with writers on language.

My true criticism of his book is that he (or rather I suspect his publishers) has short-changed readers on developments in the second half of the twentieth century, pleading shortage of space. As a result, we are deprived of eponyms such as Crohn’s disease, Plummer-Vinson syndrome, and the Pap smear. For sure, there are other books on medical etymology (Dirckx’s *Language of medicine*, for example) or on eponyms (Firkin and Whitworth’s *Dictionary of medical eponyms*). But most people will purchase only one such book, and Fortune’s is the best buy. Perhaps he has already started on a comprehensive second edition; I hope so.

Stephen Lock,
Aldeburgh, Suffolk