are tucked away in dense (and very densely printed) footnotes that quite often climb almost half way up the page. The text meanwhile operates, sometimes repetitively, at a level of abstraction that smooths away local particularity. The eye is constantly required to jump between text and footnotes to get the most out of the discussion, so that the book can be taxing to read. Overall, the concept of the spiritual economy perhaps becomes a blunt instrument. It downplays the significance of ambient topography, “earthly” economy, and demography in determining hospitals’ functions and appeal to benefactors. And it tends to reify the hospital as a unitary participant in the “spiritual marketplace”: into a corporation affecting “a survival strategy” (p. 63), or adopting a “multi-functional approach” to aid “viability” (p. 96). These hints of “management speak” may not be the best way to understand who made decisions about hospitals and how—under what constraints. Her testamentary approach means that the author is most interested in—and her discussion most perceptive on—hospitals as they participated in the late medieval political community (1450–1540), when will evidence is richest. Commentary on earlier periods is significantly weakened by the author’s definition of charters as early forms of the will (and thus of a simple equation between individual intent, record and action), thereby underestimating the complex legal processes, or political and social networks, which prompted moments of record in charter or cartulary.

Dr Sweetinburgh has given us a significant addition to the literature of later medieval charity, to set beside the work of Miri Rubin, Patricia Cullum, Carole Rawcliffe, Nicholas Orme and Margaret Webster; but a less schematic way of deploying and conceptualizing her material might have made her contribution still more telling.


Jacques Gélis examines how some parents and relatives responded to children born dead, without the benefit of baptism. According to the author, early modern Europeans could resign themselves to the physical death of a child, but were tormented by thoughts of its spiritual death; an unbaptized child was forbidden burial in consecrated ground, and would remain forever in a state of limbo. Hoping for a miracle, relatives might take the child to a *santuaire à répit* and lay its body before a sacred image of the Virgin while praying for its temporary resurrection and subsequent baptism. Gélis’s study reveals that this practice was not uncommon in rural parts of north-eastern France, as well as in Belgium, Austria, and Switzerland from the sixteenth through the eighteenth centuries. Between 1569 and 1593 in Faverney in Haute-Saône there were, for example, 459 registered cases of children baptized after their brief return to life (p. 75). Though religious authorities were suspicious of the ritual, the Roman Church did not attempt to suppress it until 1729. After that the number of sanctuaries diminished, but some remained active into the twentieth century.

Drawing on accounts of miraculous resurrections recorded by the curés of various sanctuaries, Gélis provides a vivid picture of the ritual. Those caring for the child’s body frequently travelled long distances on foot to a reputed sanctuary. The corpse they then laid before the sacred statue or painting was described as rotten, stinking, stiff, or black, details both affirming its morbidity and enhancing the description of the transformation caused by the miracle (p. 97). Sometimes the child’s dead body was taken immediately to the sanctuary, but in other cases it was dug up after days of burial, with traces of earth left on its frame. Once at the sanctuary, the parents or relatives watched the body carefully for any “signs of life” justifying its baptism. These signs were remarkably consistent: a rosy hue swept over the...
child’s face, sweat appeared on parts of its body, traces of blood became visible at its nostrils, it opened and closed its mouth, or moved its arms ever so slightly.

For the most part, it was female witnesses who determined whether or not the child had miraculously returned to life. They would then baptize it *sous condition*, cautiously declaring “if you are alive, I baptize you in the name of the Father, the Son, and the Holy Spirit” (p. 121). Gélis calculates that in Avioth, women from the region baptized the child 61 per cent of the time, with 15 per cent of those rites performed by female midwives (p. 123). These statistics suggest that midwives had an important role to play in distinguishing between the tenuous states of life and death, potentially infringing on the authority of medical men. Male practitioners could be summoned, however, to evaluate the condition of a child’s body. At the sanctuary of Moustiers-Sainte-Marie in Aix-en-Provence, surgeons were consulted in only two cases, but in Pontigny near Auxerre a local surgeon was regularly called to give his opinion on the supposed miracles (p. 245). These examples show medical men and women moving between religious and medical domains with no apparent contradiction.

Overall, Gélis presents a convincing account of this ritual, shedding new light on cultural and medical practices in early modern Europe. In order to study the *mentalités* sustaining the miracle of répit, the author considers related issues such as historical understandings of children and baptism. *Les enfants des limbes* offers a sweeping narrative, spanning multiple countries as well as centuries, even as it attends to local differences and change over time. Yet the lengthy book is largely descriptive, with little overt analysis, though Gélis mentions that the ritual of répit functioned to promote solidarity between families and neighbours (p. 65). Despite his obvious mastery of multiple archival holdings, the author tends to cite secondary rather than primary sources, and sometimes makes broad statements without providing detailed evidence, practices capable of frustrating readers. All the same, Gélis covers the topic thoroughly, making an important contribution to scholarship on early modern medicine, family life, and childhood.

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**Linda L. Barnes**, Needles, herbs, gods and ghosts: China, healing and the West to 1848, Cambridge, MA, Harvard University Press, 2005, pp. xiii, 458, illus., £31.95, €42.50, $42.95 (hardback 0-674-01872-9).

This fascinating book reveals how western conceptions of religion, race and medicine have distorted images of China and its healing traditions. Linda Barnes has taken an anthropological approach to show how, from the medieval period to the mid-nineteenth century, such radical misconceptions of the Chinese and their healing traditions arose.

Barnes investigates the representation and (mis)understanding of the Chinese healing traditions in the West in its widest social context. In the process we see not only how great the distortions were but also how they arose. Several factors contributed. First of all, those who mediated China to the West were educated in the West and firm believers in western religion, civilization and science, and came to China not for academic study but for reasons of religion, trade or politics. Their observations and evaluations of China and its healing traditions were subservient to these primary goals and conditioned by preconceptions of race, religion, morality and medicine. Another part of the explanation is that a fair and objective dialogue of equality and mutual esteem between western and Chinese scholars was, for various reasons, all but impossible. Important too were European concepts of progress and modernity, developed since the Enlightenment, which conditioned western observers to see western culture as superior and Chinese culture and its healing traditions as primitive. In the encounter between China and the West, and especially in the prejudice-driven westernization of Chinese civilization, Barnes shows us how the