Omissions are minor. English readers might miss a reference to Charles Singer, 'A review of medical literature of the Dark Ages', Proc. R. Soc. Med., 1917, 10: 107–60, which contains, (p. 133), a Prognostica vera e libro Galieni, which should be added to the list on p. 103, cf. also Med. Hist., 1970, 14: 96–8. The text on falconry medicine, certainly written before 950, which was published by Bernhard Bischoff, (Anecdota novissima, 1984, pp. 171–82), should perhaps also have been included, given the laudable decision to describe texts on veterinary as well as on human medicine. Finally, it is worth noting that good photostats of many of the manuscripts of Dark Age medicine, including part of the now destroyed Herten manuscript, were made by Sigerist and can now be consulted at the Institute for the History of Medicine in Baltimore. All in all, the Centre Jean-Palerne must be congratulated on an excellent and most useful collaborative work.

Vivian Nutton
Wellcome Institute


The first modern study of medieval Liégeois hospitals, this is a well-researched, thoughtful and scholarly addition to the growing list of regional monographs on institutional poor relief in the Middle Ages. The area chosen is particularly interesting, moreover, in that it possessed well-established communal forms of relief (the so-called tables des pauvres) as well as hospitals. Much of the terrain is now well-trod. The author underlines the longevity and durability of hospital foundations; their multiplicity (15 in a city of about 20,000 in the late fifteenth century); the chronology of their foundation (the origins of most lie in the late twelfth and thirteenth centuries); and their diversity (there is from early on a leper-house, while later provision extends to the insane and to plague victims). As is regrettably usually the case with such monographs—if inevitability so, given the nature and shortcomings of the evidence—the reader learns less about the recipients of charity than about the institutions which catered for them and the buildings which housed them. Poor relief prevails over the poor themselves, and the mustiness of the ledger wins out over the aroma of flesh and blood. Nethertheless, Dr de Spiegeler does squeeze his material hard to extract something of the human from often unpromising sources. There are some excellent passages in particular on the religious communities who came to take over the running of the hospitals. These communities were especially numerous in this area and had some unusual developments—many of the female groups converting into béguines, for example. Dr de Spiegeler also highlights the tardiness of the “medicalization” of these hospitals: a number became crowded out with pensionaries, while the advent of medical personnel was late by standards elsewhere in Europe. The conclusion that prior to this hospitals were not medical institutions at all is perhaps a little shaky, in that, by his own admission, “l’organisation quotidienne demeure la grande inconnue”, but it tends to fall in with other analyses. Moreover, his analysis of charitable benefactions in wills confirms the widely-held view that piety and communal exigencies, rather than social need, were the dominant motivating factors behind the creation and support of charitable institutions. When faced with a social crisis, charitable institutions simply could not cope. Seemingly the most fragile aspect of medieval hospitals was precisely that which related to the provision of care for the poor and needy.

Colin Jones
University of Exeter

DAVID C. GOODMAN, Power and penury: government, technology and science in Philip II’s Spain, Cambridge University Press, 1988, pp. xii, 275, illus., £30.00/$44.50.

In December 1561, writing to Gabriele Fallopio from the court of Philip II in Madrid, Andreas Vesalius recalled gloomily “the very happy life I enjoyed while teaching anatomy in