Recent years have seen an increase in studies of the lived experience of early modern health care, and of the strategies of women who navigated the ostensibly male domain of therapeutics. It has become clear that, despite their formal exclusion from the practice of professional medicine, seventeenth-century women played a crucial role in managing health and administering therapeutics at the household level. Anne Stobart’s illuminating new study provides a window onto a world of domestic health care which has until recently been obscured from view.

Stobart, a historian of medicine and gender who is also a practising medical herbalist, is exceptionally well positioned to write on this subject. The book, which grew out of the author’s doctoral studies, is the culmination of years of extensive research conducted at archives across the south-west of England. It focuses primarily on four seventeenth-century aristocratic households: the Clarkes of Somerset, the Strodes of Dorset, and the Fortescues and Cliffords, both from Devon. Drawing on unpublished manuscript sources including letters, recipes and account books, the author applies both quantitative and qualitative methodologies to reconstruct the practical health care concerns and therapeutic strategies of the English gentry.

The book follows a tripartite structure organised around three broad themes. The first part explores how information about health care was circulated between families through private correspondence and exchange of medical recipes. The second part turns to account books, examining how attitudes towards health care were reflected in household expenditure. The final section looks at the practical treatment of illness and management of chronic disorders in the household. The book also includes several supplementary features which will be especially helpful for newcomers to the dauntingly unfamiliar terrain of pre-modern medicine. Stobart provides an extensive glossary of medical substances as well as short biographies of each of the key families, which serve as invaluable quick-reference guides throughout. Where appropriate, difficult passages from manuscript sources have been modernised for ease of reading.

Stobart suggests that the defining characteristic of seventeenth-century household medicine was its eclecticism. Pushing back against the traditional narrative in which early modern families sought the help of a medical professional only when strategies of ‘self-help’ had failed, Stobart argues that households took a more fluid view of health care, freely combining self-help efforts with expert consultation. Starting from the concept of ‘therapeutic determination’ – ‘the assessment of a medical situation and subsequent choices about the nature of treatment’ (p. 5) – the author convincingly demonstrates that the early modern household ‘was a key site for consumption of both medicinal supplies and medical services’ (p. 169). In addition, Stobart shows that women’s involvement in household medicine was more complicated than has previously been assumed, and that health care was an area in which traditional gender roles and expectations could often be undermined. The immediate demands of sickness in the family, Stobart argues, ‘could provide an opportunity for women to take on increased responsibility, and step beyond a dependent role, albeit on a temporary basis’ (p. 21).

The chief strength of Stobart’s work is its pairing of thorough and meticulous quantitative analysis with illuminating textual observations from the vast range of manuscript sources consulted (including more than 6000 seventeenth-century recipes).
The first chapter makes some fascinating and novel observations about letter-writing conventions concerning health and illness, such as the tendency to avoid giving bad news to a sick friend or relative for fear of exacerbating their condition, and the importance of the convalescent’s ‘coming downstairs’ for signalling the critical moment of their recovery. Another highlight is the chapter on ‘kitchen physick’, which looks closely at the apparatus of the early modern English kitchen and the prevalence of distilleries in the aristocratic household, providing a valuable material context for the point of convergence between diet and medicine.

At times there is a sense that the author has selectively overlooked certain features of seventeenth-century life and their role in practical health care. For instance, despite emphasising the important distinctions of gender and social status, Stobart gives very little consideration to how religion may have shaped therapeutic determination. Stobart notes that the Fortescues’ mistrust of physicians is reflected in the infrequency of payments to practitioners recorded in their accounts, but does not link this to the Protestant ethic of self-sufficiency which would surely have shaped the puritan-leaning Fortescues’ attitude towards medicine. Similarly, a discussion of the frequency of payments for ‘universal’ or ‘polychrest’ medicines in the accounts of the recusant Clifford family makes no mention of the fact that the most enthusiastic proponents of these cures, the Helmontians, tended to be Catholic. The author does not claim any expertise in the complex relationship between medicine and spirituality in this period, but since private faith clearly played an important role in shaping these households’ divergent medical choices, a cursory examination of these themes would have been helpful.

There are also places where the categories deployed for quantitative analysis prove more hindrance than help. This is particularly problematic in the second chapter, where the author divides the illnesses cited in recipe collections into ‘ailment categories’. Although Stobart claims that these categories are ‘primarily based on early modern understandings of health and disease’ (pp. 35–6), they frequently impose modern distinctions: ‘scurvy’, which in the seventeenth century was viewed as a disorder of the whole body, is classified as a ‘dermatological’ condition; ‘spleen’ and ‘melancholy’ are listed as ‘digestive’ and ‘psychological’ respectively, despite being essentially synonymous to many contemporaries (Table 2.1, p. 36). As a result, some of the author’s conclusions in this chapter are open to question.

Overall, however, Stobart presents a thorough and lucid exposition of a neglected area of early modern medicine. This book is a much-needed contribution to the growing literature of ‘self-help’ therapeutics, and sheds new light on the complex and ever-shifting dynamics of female domestic authority in seventeenth-century England. It will prove invaluable to students of early modern health care, gender and medicine, and the material culture of the seventeenth-century household.

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