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(p. 142); the meaningless Arabic 'rs proves to be a corruption of the name of the Lydian city of Daldis (p. 196); the obvious error of translating *pízos* "peas", as *aruzz*, "rice", is quite plausibly explained in terms of a corruption in the Greek text available to the Arabic translator (p. 196).

One is frequently struck by unexpected ways in which Arabic translators took their own vocabulary to apply to the task of translation. The Arabic *adīb*, for example, quite predictably renders *kósmios*, "well-behaved", or *pepaideuménos*, "educated", but for it to be taken as equivalent to *kritikós*, "one able to judge" (p. 136), is quite surprising. On the other hand, the problem may be that the correct reading of the Arabic (in several places in the passages) is *arīb*, "shrewd", "clever", orthographically very similar to *adīb* in manuscripts, especially of the eleventh century and after. In other cases, it is clearer that translators were encountering difficulties, perhaps due to problems involving an intermediary translation into Syriac. The Greek *schoĩnos* means "rushes", but the Arabic term used to translate it, *idhkhir*, means "lemon grass", a common pharmacological item in medieval Arabic *materia medica* (p. 184). The Arabic *arz*, "pine tree", is an appropriate rendering of *peúkē*, "[Corsican] pine", or *pítus*, "[stone] pine", but not *libanótós*, "frankincense tree" (p. 195). It is, of course, a valuable outcome of the compilation of this work that attention is drawn to such specifics.

Medical historians will continue to find this lexicon indispensable to the study of the transmission of Greek medical texts. The classics of the field loom large in the corpus, and many textual problems are discussed. Medical terminology is recognized as a distinct category and treated as such.

To judge from the scope of the fascicles published thus far, the *Lexicon* promises to be a work of considerable length. It is therefore encouraging to see the editors proceeding at an expeditious pace and providing cumulative glossaries and indices. It will be some years

before the work is completed, but it is already a research tool of great value.

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Andrew Wear, Johanna Geyer-Kordesch, and Roger French (eds), *Doctors and ethics: the earlier historical setting of professional ethics*, Clio Medica 24/Wellcome Institute Series in the History of Medicine, Amsterdam and Atlanta, GA, Rodopi, 1993, pp. viii, 303, £17.00, Hfl. 45.00 (paperback 90–5183–553–1).

One of the key characteristics of the development of principles guiding the practice of medicine in the twentieth century is the reliance placed upon independent advice and ideas drawn from sources external to the profession. For example, lay involvement in professional regulatory bodies was introduced in the 1920s in Britain and has since become an important component of modern self-regulatory systems. Interestingly, however, as the present volume reveals, ancient principles of medical ethics also derived considerable input from sources beyond the profession, such as rules of moral philosophy (as revealed in Vivian Nutton's chapter on the Hippocratic Oath and Roger French's chapter on Friedrich Hoffmann), legal theory (as is apparent from Johanna Geyer-Kordesch's chapter on infanticide in eighteenth-century Prussia), and religious dogma (a central theme linking all of the chapters). One striking example of the relationship between medical ethics and religion is to be found in Vivian Nutton's opening chapter, in which it is revealed that in some later versions of the Hippocratic Oath, the words were laid out in the shape of a cross (p. 24). The present volume contains many similar such instances of discoveries in the ethical regulation of medicine across Europe throughout history.

The present collection of ten chronologically arranged chapters on the earlier historical setting of professional ethics (a somewhat bland title), is based upon papers given at a

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conference held at Corpus Christi College, Cambridge, organized by the Wellcome Unit for the History of Medicine. It is the latest in the Wellcome Institute Series in the History of Medicine with all contributors being associated with the Wellcome Institute in some senior academic capacity, save for Professor Luis García-Ballester who is a member of the CSIC Unit of the History of Science in Barcelona. The work delves into the history of medical ethics starting with the Greek tradition and ending around the time of Thomas Percival's *Medical ethics* of 1803 (although some chapters raise issues which extend into the early twentieth century, such as Andreas-Holger Maehle's superb piece on the development of the ethics of animal experimentation).

Four themes could be said to link the chapters: the sources and influences which underly the declaration of medical ethical principles; the way in which ethical guidance given to doctors fluctuated over time; the relationship between the practice of medicine and the creation of ethical principles governing the conduct of practitioners; and the gradual increase in the extent and scope of ethical regulation in the profession. These themes are explored in a variety of contexts which describe how ethical principles evolved to meet a number of practical ethical dilemmas. For example, Johanna Geyer-Kordesch's discussion of infanticide in eighteenth-century Prussia, Michael J Clark's examination of the involuntary confinement of the mentally ill in Victorian Britain, Ole Peter Grell's analysis of the religious and ethical dilemma faced by physicians during the plague years of whether they should stay and treat the afflicted or flee in order to treat patients of the future, and Andreas-Holger Maehle's lengthy consideration of the ethics of vivisection already noted. As is usual in writings on medical history, a number of authors deal with these themes from the viewpoint of famous writers in the history of medical ethics (such as Gabriele de Zerbi, a teacher of philosophy and medicine at the University of Padua in the 1490s, Friedrich

Hoffmann, Professor of Medicine at the University of Halle in the 1690s, and Thomas Gisborne, an Anglican clergyman writing in the 1790s). It would, perhaps, have been preferable to have allocated more space to chapters which dealt with other crucial ethical dilemmas such as emotional and sexual relationships between doctors and patients, professional confidentiality (both mentioned briefly in passing by Roger French), and abortion. For the present reviewer, those chapters which examined specific ethical issues worked better than those which considered specific practitioners' writings on medical ethics, the latter of which tended to be largely illustrative accounts of the ethical tracts in question. None the less, each chapter provides new insights into the nature and antecedents of the ethical regulation of medicine from a wide variety of geographical and historical perspectives.

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John Wiltshire, *Jane Austen and the body: 'the picture of health'*, Cambridge University Press, 1992, pp. xiii, 251, £30.00 (0-521-41476-8).

Medical historians consulting this book may wonder "why Jane Austen?" rather than Aphra Behn, Defoe, Richardson, Smollett, Sterne, Scott, Thackeray, George Eliot, Henry James, James Joyce, or any number of others who were interested in "the body?"

It is not a question John Wiltshire wants to hear, nor one he answers. He writes about the author from an already privileged position, as if his readers had agreed in advance that Austen should be the subject of an inquiry about matters bodily and medical, even when construed in the loosest sense. Readers with other perspectives may think this material could have been better cast as a substantial "essay" that was not enlarged into a book. Others will have preferred more self-reflection on the principles guiding the method used, i.e., why, for example, the interpretations eschew