

light to read. It is well written and narrates some difficult alchemical concepts of the period in a very lucid and comprehensible fashion, even for readers who have limited knowledge about this topic.

Steve Sturdy, ed. *Medicine, Health and the Public Sphere in Britain, 1600–2000*. London: Routledge, 2003. xiii + 290 pp. \$95.00. Review by CELESTE CHAMBERLAND, UNIVERSITY OF CALIFORNIA, DAVIS.

In recent years, Jürgen Habermas's groundbreaking characterization of the public sphere as the main site of "discourse and opinion formation" independent of state control has piqued the interest of historians and sociologists seeking to decipher the intricacies of social interaction and the emergence of civil society in early modern Europe (7). By identifying the demarcation between public and private activity, Habermas has provided scholars with a vital analytical tool for assessing the broad social context of bourgeois capitalism and the legitimization of government action. However, as *Medicine, Health and the Public Sphere in Britain, 1600–2000* demonstrates, Habermas's theory provides a useful starting point for social and cultural historians but is limited in scope by an overly rigid assessment of the distinction between the public and private spheres and an exceedingly narrow definition of public discourse. A collection of essays authored by a diverse range of medical historians seeking to broaden Habermas's account of the public sphere, this volume offers an innovative assessment of the ways in which medicine historically has intersected with collective action and public institutions. As the book's contributors contend, expanding the boundaries of Habermas's deterministic theory to include a more extensive range of communities and multiple modes of action will enrich our understanding of civil society in general, and the medical sphere in particular.

As a key component in the distribution of public services, such as immunization and the general provision of health care, medicine furnishes a fascinating matrix through which the changing

dynamics of the public sphere and public discourse in Britain are illuminated. From the emergence of medical professionalization to the formation of public health policy, this volume explores a broad range of issues illustrative of the connection between medicine and matters of public concern. By providing detailed analyses of the critical link between the medical sphere, institutionalization and state involvement during the past four centuries, *Medicine, Health and the Public Sphere in Britain, 1600-1900* successfully elucidates the crucial role played by medicine in the development of public discourse and social action, and the ways in which matters pertaining to health care and the body have provoked much debate among patients, medical practitioners, government health councils and various communities throughout Britain.

The principal strengths of this volume lie in its comprehensive coverage of topics central to medicine's changing public functions, and its geographic breadth, which incorporates a variety of major British cities, including London, Edinburgh, Glasgow and Birmingham, as well as the relationship between the city and country in matters of public health legislation and the provision of institutionalized health care. From the controversies surrounding the professional conduct of physicians in seventeenth-century London to the heated abortion and fertility treatment debates of the 1980s and '90s, each chapter delves into noteworthy but often overlooked topics in medical history that highlight the dynamic relationship between medicine, collective action and social policy. Drawing on a wide range of methodologies and analytical tools, including demography, cultural history and detailed case studies, *Medicine, Health and the Public Sphere in Britain* will be of particular interest to historians of medicine and modern Britain due to its emphasis on medical matters of the nineteenth and twentieth centuries. While it offers an innovative exploration of medicine's public roles over the past two centuries, this collection of essays focuses less on the connection between medicine and the public sphere in the early modern period, with only one of the book's thirteen chapters pertaining to the seventeenth century.

“Public and Private Dilemmas: The College of Physicians in Early Modern London,” Margaret Pelling’s lucid assessment of the tension between public and private occupational activities inherent in the professional conduct of physicians—and the book’s lone chapter situated in the seventeenth century—offers a rich and detailed analysis of the ways in which seventeenth-century physicians faced discredit by abandoning “male structures and processes of authority” in favor of semi-private gatherings within a milieu that identified public practice as normative (39). In Pelling’s interpretation, the physicians’ withdrawal from public action not only attests to the continuing significance of the private sphere despite the emerging prominence of the authentic public sphere in the seventeenth century, as defined by Habermas, but also represents the “germs of the modern stress of privacy” (27). This chapter provides an illuminating account of occupational identity and the complex network of interactions between patients and practitioners in the early years of medical professionalization. Although it sheds much light on the social position and institutionalization of the College of Physicians, this essay focuses less on matters of public health or the ways in which the physicians’ private identity contrasted with the public roles of other seventeenth-century medical practitioners, particularly surgeons and apothecaries.

While Pelling’s essay successfully challenges Habermas’s privileging of public action over domestic privacy, other chapters further complicate his class-based theory by exploring the ways in which factors such as gender and locale influenced the division between public and private. In particular, Elaine Thomson’s essay, “Between Separate Spheres: Medical Women, Moral Hygiene and the Edinburgh Hospital for Women and Children,” offers an insightful account of the intersection between early twentieth-century medical women and moral hygiene with regard to the prevention of venereal disease and the entrance of Edinburgh’s public health departments into the “domestic world of the private sphere” (118). Thomson successfully demonstrates that the relationship between gender and the provision of health care and preventive medicine challenges Habermas’s clear-cut distinction

between public and private. Like Thomson, Adrian Wilson complicates notions of "bourgeois publicness" in "The Birmingham General Hospital and its Public, 1765-79" (99). Wilson's assessment of the connection between public action and Birmingham's general hospital in the eighteenth century astutely suggests that Habermas's narrow conception of the public sphere does not adequately account for complexities such as confessional difference and the clash between town and country.

By enriching and expanding Habermas's characterization of the public sphere, each chapter in *Medicine, Health and the Public Sphere in Britain* offers a vital counterpoint to traditional distinctions between civil society and the state and demonstrates that medicine represents a vital force in the construction of the public sphere and collective action. Although limited in chronological scope by its prevailing emphasis on the nineteenth and twentieth centuries, this volume nonetheless offers an innovative and wide-ranging assessment of the interplay between the state, society, and medical institutions throughout Britain during the past four centuries.

Christopher Baker, ed. *Absolutism and the Scientific Revolution 1600-1720: A Biographical Dictionary*. Westport, CT: Greenwood Press, 2002. xxxiv + 450 pp. \$99.95. Review by IRVING A. KELTER, UNIVERSITY OF ST. THOMAS, HOUSTON.

*Absolutism and the Scientific Revolution 1600-1720: A Biographical Dictionary*, edited by Christopher Baker, is one of the volumes being published by Greenwood Press in its "Great Cultural Eras of the Western World" series. Each volume attempts to treat a period of Western history that had its own distinctive cultural physiognomy. Earlier volumes include ones on the Renaissance and Reformation and on the late Middle Ages.

The book begins with a short introduction by Christopher Baker, explaining the layout of the book and the principles of its organization. He argues that by 1600 the Renaissance was losing