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attendances at the medical schools of Edinburgh, Leyden and Paris also remains very scanty and he seems not to have been granted a degree at any of them, or even to have received certificates of attendance. Goldsmith was a puzzle to his contemporaries, and he still is to us. He practised briefly in London (about 1756 to 1757), but on 21 December 1758 he was judged unqualified by the Surgeons’ Company for a job as hospital mate in the East India Company. It is recorded that “… Rejections were not frequent. …” (C. Wall, The history of the Surgeons’ Company 1745–1800, London, Hutchinsons, 1937, p. 119). He was again in practice for a short while in 1765, but his only other contact with clinical medicine was when he seems to have accelerated his own death by overdosing himself with James’s antimonial fever powder. He suffered the symptoms of toxicity reported by others (J. Pereira, The elements of materia medica and therapeutics, 4th ed., Vol. 1, London, Longman, et al., 1854, p. 730) and no doubt aggravated his state of terminal uraemia. The best account of Goldsmith and medicine is by Raymond Crawford, Proc. Roy. Soc. Med., 1914, 8 (Sect. His. Med.): 7–26.

It would be natural to expect that some evidence of Goldsmith’s medical knowledge, whether it authorized him to practise or not, would be found in his writings, but this aspect is not discussed here. In fact, interestingly enough, and unlike other literary medical “truant”, there seems to be little or none. He did, however, compose An history of the earth and animated nature (London, 1774, in eight volumes), based mainly on Buffon, and discussed in detail here (pp. 368–376).

FRANCES A. YATES, Astraea. The imperial theme in the sixteenth century, London and Boston, Routledge & Kegan Paul, 1975, 8vo., pp. xvi, 233, illus., £6.95.

Although Miss Yates’ books do not deal directly with the history of medicine, they help to provide the wide general background necessary for those concerned with the subject during the Renaissance. They are therefore essential reading.

The present work is a collection of nine essays, two of which are new, and the old ones have been re-written. The central theme is the associations made between certain sixteenth-century monarchs and the pagan goddess Astraea who fled the earth at the end of the Golden Age, but, like the Son of God was expected to return re-incarnated to begin a period of universal harmony and peace. Elizabeth I and Charles V of France are considered in this connexion, and, with her usual formidable erudition, Dr. Yates examines symbolism in the pageantry, literature and allegory of the Elizabethan and late Valois courts.

Contrary to her previous literary achievements, in this book Dr. Yates seems to be less successful in the support of her contentions, and as she omits to examine certain relevant sections of society her thesis is necessarily limited and biased. Nevertheless her book is another outstanding contribution to renaissance studies, which brings to our attention many previously unknown, or vaguely known, phenomena and it may inspire others to extend the theme. As well as being of general interest to the medical historian, he can also learn from Dr. Yates’ techniques. Like the history of medicine, her field of study covers several areas and in her interdisciplinary research she has often been able to demolish the walls between them.

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There are similar problems in medical history where medicine is juxtaposed to other areas of knowledge, and one of our primary tasks is to break down the barriers that are encountered.

RICHARD L. BLANCO, Wellington's Surgeon General; Sir James McGrigor, Durham, N.C., Duke University Press, 1974, 8vo., pp. xiv, 235, illus., $9.75.

During the French Revolutionary and the Napoleonic Wars vigorous attempts were made for the first time by both the French and the British to improve the soldier's health and welfare. No doubt this was a direct result of eighteenth-century enlightenment and the consequent humanitarianism. The French military surgeon, Baron D. J. Larrey (1766-1842), is well known but his British near-equivalent, James McGrigor (1771-1858), is less renowned. Nevertheless, his role was almost as important, and this book is the first to trace his career in detail. He introduced sweeping reforms in preventive medicine, evacuation of the wounded, organization of hospitals, field and static, medical and surgical therapy as applied to soldiers, and in the administrative and other aspects of military medicine. From the national point of view, as well as raising the status of the military surgeon himself, McGrigor was largely responsible for the creation of the Royal Army Medical Corps. He served in many parts of the world, and like Larrey, recorded his experiences in an autobiography and reports of clinical cases; he encountered eye diseases and plague in Egypt, typhus in Germany, yellow fever in the Caribbean, typhoid in Holland, and scurvy when in the Indian Ocean. At Waterloo he was Wellington's Director-General of the Army Medical Department, and he retired in 1851. Throughout his service, by means of his immense energy and devotion to duty, he could demonstrate to sceptical generals the great benefit that healthy troops with improved sanitary, surgical and medical facilities were to an army.

The author is a historian and has produced an excellent, scholarly account of McGrigor, based on his Autobiography and Medical sketches. A lack of medical knowledge is at times apparent, but there are no serious errors. There are copious notes, an extensive and valuable bibliography, and finally a useful 'Bibliographical essay on British military medicine, 1750-1850'.

Little serious work has so far been carried out in the field of military medicine and many fascinating topics await the competent and qualified scholar. Even in the vital period 1793-1815, covered by this book, there is still ample room for further investigation, and one such endeavour has just begun.

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