importance of healing miracles, whether actual or potential, as a motive for conversion. Preachers say little about this, but there are other “less orthodox” texts that may bridge the gap between the age of the gospels and that of saintly healing from 350 or so onwards. St Augustine was well aware of the gulf that might separate his own explanations and practices from those of his flock. The final essay surveys writings on syphilis from 1495 to 1504 in order to discover any moral stance. It carefully lists the various causes suggested for the disease, and explains soberly and sensibly the relatively small part attributed to divine wrath as a remote cause of infection. It notes the acceptance, from 1500 on, of sexual intercourse as the main way in which the disease was caught, and shows that none of the physicians recommended refusing to treat syphilitics, or, indeed, attributed their illness to specifically sexual sinning. This is extremely useful, as far as it goes, and stands in sharp contrast to some recent fashionable formulations. Yet, as with many of the pieces in this volume, one can assent to their conclusions, while wishing that the author had taken the wider argument further. Comparison with Temkin’s article on the morality of syphilis in his The double face of Janus shows where such an argument might lead.

In his responses to the problems posed by others Darrel Amundsen, as this collection shows, generally offers a sound assessment based on a close acquaintance with the primary sources. To wish that he had struck out more often on his own, or interpreted some of his texts more imaginatively, is intended less as a criticism of what he has given us than as an acknowledgement of the value of his conclusions.

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Marie-Luise Windemuth, Das Hospital als Träger der Armenfürsorge im Mittelalter, Sudhoffs Archiv, Beihet 36, Stuttgart, Franz Steiner, 1995, pp. 164, illus., DM/SFR 66.00. This book presents an institutional history of Christian almsgiving through the medium of the hospital from the early Middle Ages to the seventeenth century. It draws upon a wide range of examples from Scandinavia to Jerusalem, with especial emphasis on Germany and Switzerland. The author has relied almost exclusively on secondary sources in German; and, although her bibliography is most impressive, there are some surprising omissions, such as the survey chapters by Michel Mollat in Jean Imbert’s Histoire des hôpitaux en France (Toulouse, 1982), which cover much of the same ground. Dr Windemuth begins with a general discussion of measures for poor relief adopted by the Church before the ninth century. Chapters on monastic almshouses and cathedral hospitals examine attempts to deal, respectively, with the problems of urban and rural poverty. The process of “communalisation”, whereby civic authorities and private individuals came increasingly to assume responsibility for the management of hospitals, is also described, as are the arrangements made across Europe for the segregation of lepers and the work of three religious orders devoted specifically to the care of pilgrims and the sick. In her study of the Antonines, who cared for sufferers from ergotism, Dr Windemuth investigates the spiritual and physical remedies at their disposal. Although, like many writers before her, she presents evidence from Grünewald’s magnificent altarpiece (which was painted for an Antonine hospital), she does not refer to Andrée Hayum’s illuminating study, The Isenheim altarpiece: God’s medicine and the painter’s vision (Princeton, 1989), which adds greatly to this subject. The work of the knights of St John in the Middle East and Europe, and of the order of the Holy Ghost in Germany is considered in some detail. Here, as elsewhere, the reader may occasionally wish for rather less information about dates and places and more analysis: what proportion of its net income might a hospital spend on almsgiving? Did this change with the passage of time? And what effect did demographic, social and economic trends have on these institutions?
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The two great fourteenth-century catalysts of famine and plague do not figure in Dr Windemuth’s study: tantalizing references to corrodians (who paid for their places) suggest that some hospitals faced serious financial problems or may, even, have turned their backs upon the poor. Her chapter on leprosaria, for example, contains a fascinating account of the rigid system of licensing in sixteenth-century Switzerland whereby lepers (and no doubt other sick paupers too) were carefully screened before being allowed support at the tax-payer’s expense. Yet there is no attempt to set this policy in the wider context of religious change and draconian measures to control the poor. The author takes a Panglossian view of her subject: the “prevailing social reality in which love and justice were mediated through Christian charity” is not one which all medievalists will immediately recognize. The highly ambivalent theological response to disease in general, and leprosy in particular, brought victimization and exclusion as well as Christian compassion.

Given the recent attention paid by historians such as Caroline Walker Bynum and Merry Wiesner to women’s role as the traditional providers of charity and health care in medieval and early modern Europe, it is a shame that they are not accorded greater prominence here. St Elizabeth of Hungary, a ubiquitous role model, is mentioned only twice in passing, and one would have liked to learn more about the experience of nurses and female patients. The celebrated hospital of the Holy Ghost in Lübeck, which appears neither in the text nor the plates, could have furnished some good examples. In all other respects, Dr Windemuth’s choice of high-quality illustrations adds greatly to the value of this useful survey.

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Christa Hagenmeyer, Das Regimen Sanitatis Konrads von Eichstätt, Sudhoffs Archiv, Beiheft 35, Stuttgart, Franz Steiner, 1995, pp. 262, no price given (3-515-06510-5).

Sources, texts, Wirkungsgeschichte—this subtitle clearly shows Christa Hagenmeyer’s focal point in this publication: she offers Konrad von Eichstätt’s Regimen sanitatis within the framework of his sources and his influence of the subsequent Regimen-literature, especially on that in his native language. The structure of this edition follows a chronological order. The introduction deals with the position of the Regimen sanitatis amongst medical writings and shows its importance by the great effect it has had. This is followed by a detailed description of the sources of Konrad’s Regimen. She is able to show that with regard to both formal aspects and contents the text has been modelled on its Arabic sources. In order to clarify the dependence on those sources Christa Hagenmeyer introduces a special kind of signature in the edited text. The three main sources, Avicenna’s Canon medicinae, Rhazes’ Liber ad almansorem, and Averroes’ Colliget, are listed in the chapter containing the sources and are divided into segments, each of which has been marked by a siglum. The Avicenna quotations are marked by α, the quotations taken from Rhazes are marked by β and Averroes’ quotations can be identified by γ and they are also numbered. In the text, quotations are shown as follows: the beginning of each quotation is marked by a siglum in brackets (i.e. “(α1)” for the first Avicenna quotation). The end of the quotation is shown by another siglum which carries an apostrophe after the Greek letter (i.e. “(α1)’”). In the part containing the sources there is the list which shows where the exact passage can be found in the Canon medicinae. The edited text is of course segmented by the large number of quotations; this kind of signature does, however, have an invaluable advantage: it presents Konrad von Eichstätt’s compilation technique to the reader, needing only minimal space to do so. This seems to be an exemplary kind of source-organization for scientific editions of medieval text compilations, and the disadvantage of text-segmentation is justified by the great advantage of clearness. The few quotations from Hippocrates and Galen are discussed in a separate chapter.