by contemporary circumstance, by social, economic, artistic, technical and cultural conventions, emphases, inhibitions and restraints”. Indeed, the double negative, “not... uninfluenced” is too weak. The acquisition and conveying of anatomical knowledge and the factors behind book production are expressions of the same complex sets of motivations in each era. One does not “influence” the other.

The idea that progress in conveying anatomical knowledge is “influenced” by contextual factors does indicate quite accurately that the old triumphalist history still stands at the heart of Roberts’ and Tomlinson’s enterprise. The heading of chapter 5, “The great leap forward” (Vesalius and co., of course) leaves no doubt on that score. In spite of apposite remarks on the factors that affect the nature of anatomical illustration in the various discursive sections by Roberts, the general tone of the historical narrative (particularly in the commentaries to the plates by Tomlinson) is dismissive of intellectual motivations which lead to illustrations giving expression to concepts which the authors deem to be incompatible with progress in “factual anatomical illustration”. Early illustrations thus come in for particularly rough treatment. Medieval representations come into the category “pre-scientific”; early gravida illuminations are said to be “no better than symbolic”; the artist who illustrated Guido da Vigevano’s Anathomia “would, of course, have been aware of the ludicrous nature” of his representation of a “miniscule” penis and scrotum. Even later products are censored for not conforming to present notions of representational utility. Thus the obsessively detailed and particularizing obstetrical atlases of the eighteenth century, which illustrate forms life size, are described as “cumbersome and, indeed useless”—but this is a judgement made from the standpoint of the modern structures of anatomical learning. In the production of the great eighteenth-century atlases in Britain, often sold by subscription, the manically detailed representation of an individual specimen, the consistent striving to perfect techniques of engraving, and the regal magnificence of the volumes are all of a piece with the promotion of British science’s remorseless progress towards the goal of empirical truth—within a system of noble and institutional patronage.

Roberts and Tomlinson have on their own account produced a book which will be of considerable use as an instructive and visually impressive survey. However, its somewhat schizophrenic agenda, which tends to leave social context and empirical knowledge at war with each other, prevents it from providing the great re-alignment in the telling of the conventional story that is really needed.

Martin Kemp, University of St Andrews

BARBARA MARIA STAFFORD, Body criticism: imaging the unseen in Enlightenment art and medicine, Cambridge, Mass., and London, MIT Press, 1991, pp. xxi, 587, illus., £49.50 (0–262–19304–3).

The body has traditionally been the focus of artistic and medical attention; for each discipline it has carried complex meanings. How such meanings were conveyed in the Enlightenment is the subject of this physically and polemically heavy book.

Art historian Barbara Maria Stafford’s concern is to show how logocentrism—theory in general and the privileging of language (p. 34)—has devalued the visual, the immediately felt, the sensual. In medicine, as in art: “Individual execution or handling,” she tells us, “precluded being exclusively wedded to abstract or general principles” (p. 40). For Stafford, painting, sculpture and architecture are rooted in “body performance”. She supposes that: “Since the eighteenth century, one trend in Modernism has been to eliminate touch and other signs of manual construction” (p. 131).

Logocentrism, she suggests, in its ordering, its dismembering, its rationalizing, is essentially a masculine concern (p. 33), and logocentric physiognomics “was 'neoclassical' and male in its linguistic and singleminded will to impose sequence and logic on experiential confusion. Pathognomics, however, was ‘Rococo’ and female in its tolerance of optical indirection and refusal to subjugate baffling inconsistencies” (p. 127). Yet she does not make clear whether
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these male and female attributes are social constructs, or biologically given—one suspects she intends the latter—thus, while she may interestingly describe how meaning was carried, she cannot discuss how meaning was historically constructed and situated.

This a-historical tendency may be discerned in her discussion of physiognomy where she describes Antoine-Joseph Pernety’s *Maladies de l’âme* of 1777 as “an important prolegomenon to Lavater’s semiotic” (p. 89) yet tells us later (p. 91) that Johann Caspar Lavater had published his *Physiognomische Fragmente* two years earlier in 1775. She invokes psychologism in a broad historical sweep in her attempt to dispel confusion—grounding human activity in “ancient neural pathways along which our ancestors groped”, whereby, after the fall of the Roman Empire, “Paleolithic hunt magic became transformed into pleasurable bodily diversion associated... with aristocratic power...” (p. 121). I could find no explanation as to how this transformation occurred.

There is also a traditional art historical search for origins: studies of musculature by Jaques Gamelin “adumbrated” Théodore Géricault’s male figure studies (p. 75); “Goya, not Courbet, first transported the caricaturist’s phantasmagoric mixture of distorted corporeality and animality to the level of the modern, or ‘real’, allegory.” (p. 199).

It is essentially the usurpation of the bodily by the mental, the physical by the theoretical, the feminine by the masculine, which is Stafford’s theme. But this is not simply an intellectual exercise. Occasionally a tangible wrath erupts as when she describes how the logocentric legal profession dares to interpret the visual evidence of video tapes in medical liability cases (p. 180). The art historian, she claims, by virtue of specialized knowledge would much more sensitively and expertly deal with such information. Need one ask: who educates the experts?

It would be difficult, in the fragments of text reproduced here, for the reader to appreciate the veiling verbosity of this volume which evoked an immediate and sensory resentment in this reviewer; a pity, for there is much stimulating material here.

Ian F. Sutton, University of Essex

PETER W. GRAHAM and FRITZ H. OEHLSCHLAEGER, *Articulating the Elephant Man: Joseph Merrick and his interpreters*, Baltimore, Johns Hopkins University Press, 1992, pp. x, 212, £18.00 (0–8018–4357–X).

GORDON R. SEWARD, *The Elephant Man*, London, British Dental Association, 1992, pp. 15, illus., UK £3.99, overseas £7.00 (0–904588–35–1).

In February 1937, Dr Charles Humbert presented a case of “preacromegalism” to the readers of the *Journal of the American Medical Association: Robert Wadlow, an eight foot eleven inch boy of seventeen. Wadlow was not named, but the initials “R. W.” and mention of his home town were enough to make the identification simple. Within a few weeks, Wadlow and his family were besieged by pressmen and freak hunters, their lives invaded by letters and round-the-clock telephone calls. Robert had become “the Giant Wadlow”, a public spectacle born out of medical discourse and sustained by the needs of modern culture to celebrate and censor difference, to feel a part of and yet repelled by *lusus naturae*. “Anyone”, Wadlow complained, “in the name of science has a right to come into a home, make whatever cursory observations he could, and then broadcast these observations to the world.”

Wadlow, who was highly intelligent and did not feel ill, quickly learned that freaks possess no privacy. Their minds, bodies and lives are open to the gaze of public and professional alike; they are probed and prodded like patients in a hospital, however much they resist being labelled sick and demand to be treated like “a normal person.”

The interest in freaks of all kinds remains today as strong as it has ever been, although “freak shows” are no longer common. These two studies, the latest of the hundred or so devoted to the “Elephant Man” illustrate at once how our perception of human difference has, and has not, changed since the days of Robert Wadlow. Seward presents briefly the medical case, commends to us the diagnosis that Joseph Merrick, the Elephant Man, suffered from proteus syndrome (rather than, as thought until recently, neurofibromatosis), and prints many contemporary and