

only mentioned twice in the entire book (p. 34, p. 200), once in passing and once when she lists various recipes for its cure. In itself, this is no great flaw; but she also reproduces a good deal of information on early modern efforts at provoking 'vomits' in horses (p. 170)—which would have been anatomically impossible (horses are not capable of vomiting due to the angle and musculature of the oesophagus). These recipes thus raise an interesting question Curth does not address: if vomits were not possible to induce, then what, exactly, was going on in these proposed remedies? Were they a simple case of bowing to the cross-species model for disease? Was a 'vomit' for horses not what we think it is? Were the recipes ever tried, and if so, what were the results? In her defence of the idea of medical effectiveness, then, she occasionally lose track of the social, cultural and other implications of the texts she analyses. The same might be said of the discussions of magic and astrology, since these beg for greater investigation of how religious and other beliefs articulate with assumptions of the empirical conditions in which remedies and explanations would have been tested.

By far the volume's strongest and most compelling aspects involve her analysis of what Curth calls the 'veterinary marketplace' (p. 8) of horse-healers, and her presentation of extensive original research on manuscripts, receipt books, household books and other places where animal medicine was discussed, preserved and exchanged. In the latter material she does an excellent job of teasing out the circumstances of gender and class that governed who wrote about animal health—and the consequent challenges facing the historian of medicine who tries to reconstruct the identities and motivations behind extant sources. Much of the book feels repetitive and sometimes unnecessarily combative, especially in Curth's assertions of scholarship's various biases, or its lengthy justifications of its claims. However, in a field that is, outside of the author's own contributions, still largely unexplored territory, this is a worthy addition to the history of veterinary medicine.

doi:10.1093/shm/hkv053

Advance Access published 30 June 2015

Karen Raber

University of Mississippi
kraber@olemiss.edu

Nancy G. Siraisi, *Communities of Learned Experience. Epistolary Medicine in the Renaissance*, Baltimore: The Johns Hopkins University Press, 2013. Pp. ix + 163. £23.50. ISBN 978 1 4214 0749 4.

This small and elegant volume contains a revised version of three lectures delivered at the Charles S. Singleton Center for the Study of Premodern Europe of the Johns Hopkins University and deals with *epistolae medicinales*. Although a 'minor genre of Renaissance learned medical discourse' (p. 3), most historians of early modern medicine will have come across it, be they interested in the practice, theory or social, political and cultural aspects of medicine. According to their own background and to the *epistolae* they met with, they will have formed differing ideas of the nature and aims of these publications. Up to now, it was quite difficult to put these diverging views into perspective. Today, with Siraisi's book, we get a clearer idea of what these publications are about.

The book is divided into three chapters, corresponding to the three lectures. The introduction and the first chapter explain the emergence and some central characteristics of the genre. Siraisi sees the reason for this 'sixteenth-century innovation' (p. 8) on the one hand in a humanist enthusiasm to revive ancient epistolary form and, on the other hand, in its form which meets the Renaissance taste for miscellanies. This form allowed the author to deal with a great variety of topics, corresponded to the growing importance of sharing personal experience, and fostered the notion that dialogue is a good method to establish truth.

Siraisi ascertains two main functions of letter writing: corresponding to the ideals of the Republic of Letters, it is primarily a vehicle for engaging in a spirited debate. Secondly, it serves—at least in the case of some authors—more practical purposes, that is the procurement of new books, knowledge of innovations in theory or practice and a variety of other useful information. The same order of priority is also visible in the presentation of the *epistolae* of Nicolò Massa (1550, 1558) and Girolamo Mercuriale (1587, 1589–90, 1597, 1604).

The second chapter examines the *Epistolae medicinales* of Johann Lange from Heidelberg (1554, 1560). These letters were published mostly without date and name of the correspondent; in many cases the question is whether these are real letters or only literary compositions. This does not mean, however, that we are dealing with academic treatises out of touch with reality. Quite the contrary, Lange's letters are much more concerned with medical practice than the other examples in this book and, most interestingly, they give insight into his personal life and duties as a court physician. The third chapter concerns the network of Orazio Augenio in Turin. It is an example of how letter writing—and especially publishing—could be used to build a medical reputation in a competitive milieu. Augenio belongs to a relatively small group of medical men who used the epistolary genre (1579, 1592, 1602) as his primary means of publication, as a catchall format for all sorts of treatises, reports and remarks. It served him especially to gain in stature in a controversy and to recruit supporters.

Siraisi does not present a big book on a great number of letter collections. She has made a much wiser choice. On the solid footing of her broad knowledge and understanding of Renaissance medicine she has selected some main Italian and German representatives—and this is mainly an Italo-German genre—and examined them from various angles. The result is a highly readable, stimulating book, which helps us to understand the motives of the authors, detect hidden messages, and reflect about various interpretations of medical texts. It makes clear that letter collections diverge widely in style and content, according to personal interests and the life situation of their authors, but also depending on which genre of medical writing they should resemble, be it letters, consilia or disputations. It shows that Renaissance authors developed new forms of publication, which leaned on ancient examples but met new demands in a changing scientific and social setting.

The subtitle of the book is, however, somewhat misleading. This is not a book about epistolary medicine at large but about a genre of medical publications. Just as in the case of Barbara Duden's *The Woman Beneath the Skin* (1987)—based on Johannes Storch's published case studies of patients—we are dealing with literary compositions.¹ Some of them may be original, unchanged letters, some may have been revised and many were written with the prospect of publication, sometimes even without a real addressee. Obviously these letters are closer to Erasmus' ideal of humanist letter writing than to Melanchthon's rather short and casual letters for practical purposes and mutual exchange of information. Siraisi mentions similar informal, unpublished letters exchanged between Mercuriale and Theodor Zwinger in Basel. The 40,000 letters identified so far by the Würzburg-based research project *Frühneuzeitliche Ärztebriefe des deutschsprachigen Raums (1500–1700)* suggests that physicians wrote letters on a more regular basis than we might have thought.² Now that we have a better understanding of the *Epistolae medicinales*, it

¹Barbara Duden, *The Woman Beneath the Skin: A Doctor's Patients in Eighteenth-Century Germany* (Cambridge, MA: Harvard University Press, 1991).

²Frühneuzeitliche Ärztebriefe des deutschsprachigen Raums (1500–1700), <<http://www.medizingeschichte.uni-wuerzburg.de/akademie/index.html>>, accessed May 2015.

would be interesting to know how they relate to the physicians' daily business of letter writing.

doi:10.1093/shm/hkv054

Advance Access published 21 June 2015

Hubert Steinke

University of Bern

hubert.steinke@img.unibe.ch

Christopher Bonfield, Jonathan Reinartz and Teresa Huguet-Termes, (eds), *Hospitals and Communities, 1100–1960*, Bern: Peter Lang, 2013. Pp. ix + 430. £52. ISBN 978 3 0343 0244 9.

This collection of 14 articles is the product of a conference held in Barcelona in 2009 by the International Network for the History of Hospitals (INHH). The overarching theme of both conference and book is 'Hospitals and Communities', and, in order to provide a more coherent treatment of this extensive topic, the editors have subdivided the essay collection into five sections. Such a treatment is especially valuable because their contributors range exceedingly widely geographically and chronologically, from Rafaël Hyacinthe's work on the Jerusalem *leprosarium* in the twelfth century to Rita Pemberton's study of hospitals in Trinidad and Tobago in the late nineteenth and twentieth centuries. Moreover the final chapter takes the reader into a different dimension because it offers a case study of how ancient hospitals can engage with new communities, at times well beyond their boundaries, through the use of computer-generated modelling and other materials: maps, drawings, translations of appropriate documents, that are available through the project's website. As Christopher Bonfield describes, at the core of this AHRC-funded project on the Great Hospital of Norwich, instigated by Carole Rawcliffe, is the 3D reconstruction of the hospital's development over time that offers 'communities' of users across the globe access to understanding its history, a blueprint for future collaborative projects between historians, computer specialists and the guardians of remarkable hospitals and similar buildings.

Looking at the more conventional case studies, the editors have divided the collection into sections on: communities and isolation; communities and the poor; hidden (or reluctant) communities, and communities and war. In part this provides a means to draw together common ideas, but also offers ways to consider more carefully and fruitfully exactly what historians mean by 'community', especially how this term requires expansion to explore often a wide range of constituencies both inside and outside the institution. Such a nuanced approach has been employed by anthropologists, in particular, for some time and it is excellent to see its adoption here. For example, among the sizeable proportion of essays investigating southern European hospitals is Jane Crawshaw's assessment of Venice's *lazaretti* during the fifteenth to seventeenth centuries. Adopting the symbolism of the 'well-fortified castle' and the 'garden' used by contemporaries, she examines how those in authority, particularly the Health Office magistrates, sought to demonstrate to the populace the effective value of quarantine when plague sufferers were removed to certain islands in the lagoon. These complex metaphors in terms of how they could be read by differing groups, as well as their inherent multi-layering, is skilfully contrasted with the view of these isolation hospitals as 'Hell itself', thereby underscoring the importance of investigating multiple communities, their inter-relationships and how these might alter over time.

In the section on communities and the poor, two chapters focus specifically on the idea of confraternity. Carole Rawcliffe, as one would expect, provides a comprehensive survey of confraternities linked to hospitals in medieval England, and the various ways these organisations interacted to offer communities for the living and the dead. Her opening example is