## Comptes rendus / Book Reviews

Michael R. McVaugh — Medicine Before the Plague: Practitioners and their Patients in the Crown of Aragon 1285-1345. Cambridge: Cambridge University Press, 1993. Pp. xv, 280.

The history of medicine, once an awkward hybrid of professional hagiography and history of science, has in the last three decades emerged as an important branch of social history. Many studies produced by the new medical history have been devoted to the "professionalization" of medicine. As Michael McVaugh observes in the conclusion to Medicine Before the Plague, the standard account of professionalization and its social concomitant, medicalization, rests on an argument that runs as follows. During the Middle Ages, medicine was transformed from a craft-based activity into a new kind of practice, grounded in a specialized body of knowledge institutionalized in the new universities. Physicians used the prestige of this learning to consolidate their legal identity and establish a collective monopoly over medical care, as well as control of auxiliary occupations. Few attempts have been made, however, to test this model through close-grained studies of medical practitioners and their patients in medieval Europe. McVaugh proposes to use the exceptionally rich administrative and judicial archives of the Crown of Aragon (the title given to the dynastic union of Catalonia, Aragon, and Valencia) to do exactly that. The results are fascinating in detail, convincing in presentation, and provocative in their implications.

McVaugh's exploration of the relationship between medical learning and what one might call the "health care system" begins, not with the medical practitioner as one might anticipate, but with a particular group of medical consumers: the family of the count-kings of the Crown of Aragon. In the last decades of the thirteenth century, Jaume II became increasingly preoccupied with attracting qualified medical personnel into his service. He wanted a lot of medical attention and was willing to pay for the best; what is most interesting, however, is his confidence that secular medicine, based on the scientific book-learning purveyed in the universities, was by far the most efficacious and valuable health care available. McVaugh demonstrates that Jaume's subjects by and large shared his optimistic

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admiration of the new learned medicine and were willing to reward it with money and prestige. Though individual physicians had to persuade clients of their expertise, society at large was eager to believe that learned medicine was a superior product. Indeed, the major point of McVaugh's study is that both professionalization and medicalization in the Crown of Aragon were overwhelmingly driven by consumer demand and expectations, not by the physicians' collective ambitions to dominate the field. These consumers had quite clear notions of what proper medical care was and what it was worth. Physicians, on the other hand, preferred to operate as individual entrepreneurs rather than band together to lobby for a monopoly. More surprisingly, they actually collaborated with surgeons, apothecaries, and barbers. Health care in the Crown of Aragon was a seller's market, and co-operation was ultimately more profitable than rivalry.

The coincidence of a demanding and discriminating clientele with a weakly stratified medical profession is all the more curious in that medical degrees were still very rare in this period. How did town councils looking for a city physician, or even Jaume II, judge medical competence? How did someone establish himself as a physician? The answer lies in the science on which the new medicine was based. Far from being confined to the academy, this new learning was appreciated by the count-kings, who commissioned translations from Arabic into Latin and from Latin into Catalan, and whose letters to their own doctors and to members of their families reveal a respectable familiarity with medical concepts and terminology. Moreover, one did not have to hold a degree to have a modern medical education, as witness the physician Pedro Cellerer of Daroca, a student of Arnau of Vilanova who even edited some of Arnau's works, but who never graduated from a university. Even small town doctors with no academic status owned books and clearly "tried to absorb or at least associate themselves with the new learned medicine" (p. 87). Hence when attempts were made to introduce licensing in the first decades of the fourteenth century, "the regulations seem to reflect a public perception of the advantages of a learned and scientific medicine rather than the efforts of local practitioners to maintain an existing monopoly" (p. 70).

The assumption that physicians and surgeons were deadly rivals in medieval and early modern Europe is not borne out by the evidence from the Crown of Aragon. Here we find doctors and surgeons teaming up to form partnerships, split fees, and, significantly, share knowledge. The two were "in fact functioning as something of a single occupational community" (p. 112) because their areas of expertise broadly overlapped and because the public did not care to make a strict distinction between them. Apothecaries and physicians were also closely linked by technical and economic necessity — indeed, too closely linked for the public's comfort, who suspected fee-splitting and price inflation. McVaugh's research also overturns the received wisdom that medieval guilds were rigidly hierarchical and exclusionary. On the contrary, there were several avenues by which one could obtain medical training, and it was fairly easy to change professions.

The confidence placed in learned medicine by the subjects of the Crown of Aragon was the driving force behind a genuine movement to "medicalize" certain domains. McVaugh looks at three in particular: sexuality, evidence in criminal trials, and leprosy. In canon law suits for annulment of a marriage on the grounds of impotence or sexual incompatibility, doctors increasingly displaced matrons as experts in sexual anatomy and physiology. The doctors' matter-of-fact, naturalistic approach to sexual matters might seem to contrast with ecclesiastical moralizing, but the Church courts seem to have had little difficulty in acknowledging this as an area of medical expertise. Civil courts likewise took to summoning medical men, especially surgeons, to testify whether a wound was fatal. In Catalonia, such expertise was legally formalized as the desuspitatio and was a major source of income for surgeons. To an ever-growing extent as well, learned physicians were given the responsibility of determining whether one was a leper, a delicate matter in a time when such a diagnosis entailed loss of property and civil rights. McVaugh's analysis of the medicalization of leprosy is particularly interesting for the way in which it links this process both to the creation of an original medical literature on the differential diagnosis of this disease and to the decline of public hysteria and moralizing. Overall, the public in general seem to have been not only compliant, but enthusiastic. Medicalization had its limits, though; public health, hospital work, and psychiatry remained areas where lay expertise and lay values continued to dominate.

Despite the financial and social stakes, physicians in the Crown of Aragon felt no need to form any kind of guild or *collegium* to promote their collective interests. Indeed, when such a *collegium* was formed by royal decree in 1341 and 1342, it was on the initiative of a single physician, Francesc de Pla, whose motive was to gain personal control over the lucrative business of *desuspitationes*. His colleagues immediately boycotted the *collegium* and succeeded in effectively suppressing it. Licensing committees continued to be appointed by the count-king, and the doctors seemed to like this arrangement. On the whole, physicians in the medieval Crown of Aragon were individuals who looked after themselves; competition, in their eyes, came from other physicians, not outsiders. McVaugh suggests that in the "boom" years before the plague, when both the market for medical care and public confidence in its value were expanding, personal autonomy won over collective protection.

This brief review can touch on only some of the major themes of this richly documented and beautifully argued study. How particular physicians and patients applied the principles of medieval preventive medicine and therapeutics, how doctors and patients negotiated fees, and how medieval societies understood malpractice are examples of many issues which this book illuminates and transforms. *Medicine Before the Plague* crowns over two decades of Michael McVaugh's meticulous and original scholarship in medieval medical learning and practice. Its particular conclusions will be benchmarks for further attempts to reconstruct the social context of medieval medicine. Its deft handling of masses of diverse documentation, lucid arguments, and delightful literary style will, one hopes, set the standard for this continuing research.

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