

Comptes rendus / Book Reviews

Joseph Shatzmiller — *Jews, Medicine, and Medieval Society*. Berkeley and Los Angeles: University of California Press, 1994. Pp. xi, 241.

This slender volume presents a lucid survey of the remarkably successful implantation of Jewish medical practitioners in southern European medieval society from about the mid-thirteenth to the mid-fifteenth centuries. Although the affinity between Jews and the medical profession is often assumed to be axiomatic, indeed something of a trans-historical cliché, Joseph Shatzmiller argues persuasively that the phenomenon owed its origins in the late medieval period to fortuitous circumstances. Prior to this time, Jews enjoyed no particular collective reputation as healers and, in contrast to classical western or other cultures, could not point to any distinctive body of medical literature in Hebrew inherited from antiquity.

According to Shatzmiller, the combination of a sharply increased demand for educated medical practitioners and the Church's reluctance to respond positively — instead it disapproved of clerics involving themselves with bodily healing — opened the way for Jews to enter the medical marketplace. One might quibble with the positing of a “massive medicalization of society ... at the beginning of the thirteenth century” (p. 13), and Shatzmiller himself notes the ineffectiveness of most of the Church's prohibitions. But the plausibility of his scenario is strengthened by the concurrent appearance of Jews as moneylenders (often, it seems, a Jew would do both), a situation that took advantage of the same two factors: increased social demand for a service and the Church's inhibition of supplying it. One might add that many alternative occupations were forbidden to Jews.

The merit of this study, however, does not depend on any central thesis as much as on its collection and interpretation of a vast body of previously published, mostly archival research on the formation, status, and functioning of Jewish medical professionals in regions, towns, and cities of southern France, Spain, Italy, and elsewhere in southern Europe. Shatzmiller's documentation is vast — the notes and bibliography are nearly equal in length to the text. Addressed to the general reader, this work is a finely selected distillate from highly specialized scholarship, including the author's own earlier book (*Médecine et justice en Provence médiévale : documents*

de Manosque, 1262–1348, Aix-en-Provence, 1987) and numerous articles on related subjects over nearly 30 years.

Jewish practitioners constituted a significant proportion of local medical personnel whose numbers relative to the population were also impressive throughout the territory under study. In the city of Manosque in Haute Provence (population 3,500), Shatzmiller identified 33 medical practitioners during the first half of the fourteenth century (an average of seven per decade), of whom half were Jewish. Similar high percentages of Jews in the profession, amounting to 10 times more than their presence in the local population, are estimated for the cities of Perpignan and Marseilles, the island of Crete, and elsewhere, while perhaps as many as 10 to 20 per cent of Jewish families in these areas of high density worked as medical professionals.

Jews could be counted as “professional” healers since legal documents referred to them in this titled capacity, despite the fact that very few were admitted to study at a university to acquire medical degrees. The fabled receptivity to Jews of the Montpellier medical faculty was largely a myth, but Italian universities at Bologna and Padua were friendlier. By and large, Jews learned medicine through private arrangements as apprentices. Their knowledge of Arabic permitted direct access to valued Islamic medical texts as well as earning them status and income as translators into Latin while they built their own substantial Hebrew libraries. Some established enviable careers and family medical dynasties that served in princely courts at Arragon and Navarre over centuries, and some Jewish doctors even tended Popes. Royal favours dispensed Jewish practitioners from paying taxes and from wearing identifying marks required of other members of their community, and legislation sought to give them special protection against assault on the road.

Shatzmiller’s collective portrait of Jewish medical men and women (the latter enjoyed a particular reputation for treating eye diseases) appears bright with but a few sombre hues, ranging from the lower fees they received as municipal doctors to accusations of sexual abuse, poisoning, and malpractice that generally seemed to end on a fortunate or indecisive note. Despite being part of a despised group, Jewish practitioners were consulted by all levels of Christian society and they sometimes worked together with Christian colleagues. Shatzmiller believes Jews may have benefitted from a certain mystique in their capacity as healers.

The archival documents from which this study derives — notarial and other legal records that Shatzmiller himself concedes are “dry” and lacking in “human qualities” (p. 119) — do not lend themselves to a textured examination of attitudes held by and toward Jewish physicians or even of their medical practices. The most fully developed instance presented, that of master Bonafos, a fourteenth-century surgeon at Manosque, remains sketchy. Despite the quantitative richness of the documents and the author’s skill in their interpretation, one is left with a profusion of glimpses of names, dates, and places, a scattering of points but not an overall picture.

Any unified synthesis of Jewish medical practitioners in medieval Europe will depend heavily on these findings regarding numbers, institutional arrangements, and

intriguing deontological customs such as the physician's contractual agreement to undertake treatment of a hopeless case as "practically dead", which ensured that the physician be absolved of responsibility for an unsuccessful outcome. At the same time, a synthesis, if one is possible, would need to incorporate other kinds of sources such as Jewish healers' own writings about their practices and careers and literature on Jews and diseases, notably the Black Death. The notions of medical professionals, and especially medicalization, need to be qualified to avoid anachronism. In the case of Jewish practitioners, as with the vast majority of their Christian counterparts, "professional" status graded imperceptibly into other kinds of less official healers who need to be considered. On the other hand, as Shatzmiller notes in a final section on "other economic activities", very few, even at the upper end of the medical hierarchy, could earn a living exclusively through that occupation.

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Charles Tilly and Wim P. Blockmans, eds. — *Cities and the Rise of States in Europe, A.D. 1000 to 1800*. Boulder: Westview Press, 1994. Pp. 290.

This collection of papers, edited by sociologist Charles Tilly and medieval historian Wim Blockmans, takes on a very large topic. It aims to examine the influence of cities and city-systems on the formation (or transformation, as the editors prefer) of European states over a period of some 800 years. Although it is not as clear, there is a sub-theme: the authors and editors are also concerned with the effect on cities of the consolidation and growing power of nation-states. For Tilly, who seems very much the driving force behind the book, this brings together two major issues that have featured prominently in his prolific writings. Much of his recent work has been in the field of comparative history, and the present project draws heavily on issues raised in his 1990 book, *Coercion, Capital, and European States, A.D. 990–1990*. He has also maintained a concern with cities and urbanization, however. One of the first books he ever published, in fact, was entitled *An Urban World*.

In his sweeping introduction, Tilly sets out a challenging agenda for the contributors: to examine all aspects of relations between cities and the emerging states that sought and eventually managed to exert control over them. Although the agenda is long and complex, Tilly has a fairly clear idea of what issues are of particular importance. The story of state development revolves largely around the problem of acquiring a monopoly over the means of coercion. To become a strong state was to achieve this goal. However, this required amassing the means to subdue rivals, inside or outside a state's territory. As the technology of warfare became more sophisticated and more expensive, rulers of states were forced to seek out fresh sources of capital. Cities then became tempting targets, as urban merchants and capitalists sat on significant pools of wealth. This did not always lead to violent conflict between rulers and cities. Much of the book, in fact, focuses on the great diversity of relationships that grew up between monarchs and princes and the urban