

friendship. Whether for gathering evidence about the profession or for satisfying curiosity about practitioner's lives, these volumes should benefit anyone interested in nineteenth-century medicine.

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Sabine Sander, *Handwerkschirurgen: Sozialgeschichte einer verdrängten Berufsgruppe* [A Social History of a Displaced Profession], Göttingen: Vandenhoeck & Ruprecht, 1989. Pp. 383. 78DM. ISBN 3-525-35745-1.

In traditional history of medicine in Germany the education, distribution and professional activities of the artisan-surgeons are played down, due to a professionally determined bias. Oddly enough, the present-day social history of medicine—though to a large extent expressly aligned against the traditional history of medicine—remains wedded to this bias. Even the most recent of contributions to the history of occupations repeat the medical practitioners' usual criticism, in which artisan-surgeons are grouped with quacks.

It is in this context that Sander's work achieves its special significance. The introduction (pp. 11–21) places her contribution within the current discussion of history of medicine/social history of medicine. A further feature of her work is its avoidance of the usual emphasis on Prussia. Sander focuses on South Germany, especially (Old-) Württemberg. The first chapter delineates 'The framework: Württemberg's medical services in the eighteenth century'. The second chapter, on artisan-surgeons (pp. 54–230), presents the surgeons' activity, economic and social situation, educational background, distribution and professional autonomy. A concise summary (pp. 231–43) places the results within the discussion raised. The remaining 140 pages of the book are taken up by extensive scholarly apparatus (pp. 244–331), and an extremely informative appendix containing tables and graphs (e.g. on the sphere of activities, fortunes, sizes of practices etc. of artisan-surgeons). The last part of the book is an index of names, places and topics (pp. 374–83).

Sander's book is impressive through its intensive use of broadly based primary sources. This forms the basis not only for an historical cross section of the situation and work of the artisan-surgeons, but also for reconstructing the artisan-surgeon's working day, using individual examples (pp. 91–110). Of course, this can, at first glance, give the impression of Sander having presented her work in the historical-empirical tradition (which approach, by the way, would be entirely justified, given the state of research on this topic). It is indeed in an intensely critical vein that Sander discusses not only traditional history of medicine but also the more recent social history of medicine and its concepts. In terms of social history, it is just this discussion, linked as it is with the archival material, which constitutes the virtue of this book. Although Sander avoids the development of an encompassing theory, e.g. 'medicalization' (p. 17), she discusses the relevant concepts and conceptualities—to take but a few examples: a stratified model 'for the social location of the surgeons' (pp. 112 ff.), further indicators for the discussion of the surgeons' 'social status' (pp. 125 ff.), and the position of the surgeons in the 'market for medical services' (pp. 177 ff.).

Sander manages to remove much of the debris of tradition-based approaches and to correct many historical misjudgements which had been handed down from the subject's professional exponents. For example, she shows the great importance of the artisan-surgeons for the middle and upper-class population of the urban periphery. She also demonstrates that artisan-surgeons and university-based medical professionals, after their long separate existence did not peacefully merge. Instead, the latter displaced the

surgeons by labelling them as *Medicaster*, and finally—with the aid of state legislation—as 'quacks'.

Within the social history of medicine, Sander's work is impressive, above all, for its independent approach. Sander distances herself equally from the traditional style of medical history and from the new social history of medicine. But theories of professionalization and other concepts of social history are introduced into critical discussion and applied in archival studies. It is in this fashion that Sander avoids the two traps of the respective methods of research: the elitist delusions of traditional-style literature as much as the excessively theoretical social historical approach. Thus readers whose orientations are primarily in social history might feel that they are missing out on a stringent conceptualization. But Sander's work is always social historical, and within the literature of the occupational history of the medical profession, her book will achieve a definitive status.

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Eberhard Wolff, *Gesundheitsverein und Medikalisierungsprozess: Der Homöopathische Verein Heidenheim/Brenz zwischen 1886 und 1945*, Tübingen: Tübinger Vereinigung für Volkskunde e.V., 1989. Pp. 239. N.p. ISBN 3-925340-60-2 (pbk.).

This is a rather specialized study of homoeopathic medicine in that corner of Württemberg just north of Lake Constance, where reception for such practice among the village and small-town people was a friendly one. From the outset, then, Wolff establishes a scenario where a more rural population was interested in what was widely considered a more 'natural' therapy, based on nature's gifts and laws, as opposed to, presumably, the city slickers who went for the academic, high-brow doctor's cures. The author pays special attention to the element of lay medicine as it had generated a specific attraction for rural Württembergers since the 1820s, and he traces this development through World War I, the Weimar Republic, and the Third Reich. Although he never leaves the regional venue, he is able to weave into his story related developments in the professionalization of physicians, national social legislation as originally decreed by Bismarck, public hygiene, and some aspects of formalized medical education.

Beyond this more parochial history of the Heidenheim League for the Support of Homoeopathy, which still possesses much of the quality of a doctoral dissertation, Wolff deals with the social makeup of the local clientele receiving medical aid, and with the manner in which a succession of homoeopathic practitioners have fitted into their midst. As the author can show, that relationship most usually was an ideal, symbiotic one, much in the mould of the one between parishioners and parish priest. Most Heidenheimers were of the lower middle class, with more lower-class workers living there as (small) industrialization progressed. These were upwardly mobile people with an interest in self-education and other sorts of popular enlightenment and culture short of the big-city kind. The small-town physicians serving such men and women themselves felt at home on this provincial turf; they were generally suspicious of allopathic practitioners who were known to observe the sciences of the schools.

The author shows that the patients of Heidenheim's homoeopathic doctors tended to be conservative nationalists, but not national extremists (and not exactly socialists, either). Since this was also true in the 1920s, it would explain the reluctance with which National Socialist ideals of medicine were received in the area. After Hitler's takeover in January 1933, writes Wolff, the Heidenheim Union met the new Nazi leaders half-way, to compromise in the acceptance of whatever was necessary for eventual survival.