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general sound in principle, some of it curiously unaltered since the days of Theodoric and Johannes de Mirfeld. Evidently a seventeenth-century neurosurgeon kept his fingernails long in readiness for the removal of an exposed pericranium. The selected case histories of Scultetus (23 out of the 100 concern the skull and brain) make interesting reading showing a conservative approach to treatment which is commendable.

Dr. Bakay, whose scholarly treatment of a serious subject is occasionally, and delightfully, betrayed by a spontaneous wit, has tried with success to view surgical problems of that time in the light of reasonably fair knowledge of anatomy but dismal ignorance of brain function. Experience counted for much: Scultetus probably did not believe the astrologer-surgeons who held that it was dangerous to trephine at full moon when the brain was thought to be swollen and 'near to the skull', but he may well have been aware of the phenomenon of a post-traumatic cerebral oedema even if not of its underlying mechanism. Trephination for a comminuted fracture of the skull, he stated, should be undertaken when the patient had recovered from the immediate shock but not after the third day: the operation would then be fraught with danger.

W. H. MCMENEMEY

Gerard van Swieten and his World 1700–1722, by FRANK T. BRECHKA, The Hague, Martinus Nijhoff, 1971, pp. x, 171, illus., 31.50 guilders.

The aim of this book—as is clear from its title—is to present Gerard van Swieten and his world. This is no modest objective, for it requires a grasp of all the facets of a personality of the Enlightenment who was deeply rooted in the social and cultural conditions of The Netherlands but who was destined to reach the climax of his activity, which became historically relevant, in the complex organization of the Hapsburg Empire. These facts as well as van Swieten's sphere of action provide material for chapters in every biography of van Swieten: Early years in Holland; A pupil of Boerhaave; The commentaries on Boerhaave; The Dutch Enlightenment; The appointment at Vienna; Personal physician to Maria Theresa; Protomedicus of the Court; Director of the Imperial Library; His activity as scientist and practitioner; His influence on European medicine; The reform of the Medical Faculty; The introduction of bedside teaching in Vienna; The foundation of a school of medicine; The foundation of new (Tyrnau) and the reform of existing medical faculties (Prague, Freiburg-im-Breisgau, Pavia); The organization of the Austrian medical service; His co-operation in drafting the public health laws of Maria Theresa; Censorship; His attitude towards Jansenism, etc.

The first task for anybody attempting such a biography must be to assign to these chapters the space in his biography which is due to them because of their historical importance. It is self-evident that van Swieten's Viennese period must be placed in the centre as it was here that van Swieten's activities achieved historical dimensions.

The present author has divided this vast material into four great chapters: I. The early years (pp. 7–50); II. Leiden (pp. 51–97); III. Maria Theresa (pp. 98–110); IV. Vienna (pp. 111–46). Our misgivings are aroused by the fact that in a book which comprises 171 pages, only 35 (pp. 111–46) are given to the Viennese activities of van Swieten, while 90 pages (pp. 7–97) are devoted to the Dutch period. This evident disproportion might be justified if it had yielded convincing results. Brechka's

assiduous research on the genealogy of van Swieten in the archives of Leyden was undertaken in the hope of finding the answer to a question which has often been asked in connexion with the early years of van Swieten: how far was van Swieten indebted to Jansenism?

From an intellectual and political standpoint this is a central question. The correct answer is very difficult to find—for van Swieten never made an open statement concerning his attitude towards religion—and to do so would require a full command of all the methods of historical research. One cannot find the answer by describing in great detail the educational climate of the University of Löwen or by accepting Emile Appolis' theory that between orthodox catholicism and strict Jansenism there was a medium wing, the so-called third party, to which van Swieten is ascribed by Brechka. According to the publications of Grete Klingenstein (*Staatsverwaltung und kirchliche Autorität im 18. Jhd. Das Problem der Zensur in der thesesianischen Reform*, Vienna, 1970) and of Peter Hersche ('Gerhard van Swieten's Stellung zum Jansenismus', *Internat. Kirchl. Zt.*, 1972, 61, 33–35) this theory is no longer justified. Both historians proved convincingly that van Swieten cannot be labelled a Jansenist, that on the contrary he was an opponent of the church of Utrecht. The fact that Hersche found the documents for proving his theory in the same Dutch archives which were used by Brechka (the archives of the Oud Bischoppelijke Clerezij) does not particularly recommend Brechka's method of research.

Furthermore the author is greatly handicapped by language problems. Thus Brechka makes a grave error in judging van Swieten's personality. He was a man of great energy and assurance, following his aims with authoritarian certainty and strictness, but on page 73 he is described as a timid man, marked by a basic shyness (p. 115). What is the reason for this serious faux pas? The author states: 'Haller described him as a timid ["gescheuter"] man.' His deficient knowledge of the German language prevented the correct translation of the term 'gescheut' as 'clever'.

But there are other and even more regrettable mistakes. On p. 45: the Jansenist Gabriel du Pac de Bellegarde was never van Swieten's friend (see Hersche p. 46f); p. 91: Jean Baptiste Bassand was never personal physician to Charles VI, but from 1724 onwards to Francis Stephan of Lorraine; p. 111; in his function as first physician van Swieten was not the immediate successor of Garelli, but was preceded by Bassand and Engel; p. 114: van Swieten was raised to the nobility not in 1750, but in 1749; he was raised first to the barony of The Netherlands and in 1753 to a barony in the Austrian (Erblande) domains; p. 132: van Swieten never lectured at the University of Vienna.

We have already emphasized that the account of van Swieten's Viennese period is far too summary as compared with the Dutch period, so it is not surprising that the author has omitted to refer to some of the main fields of van Swieten's activity, for instance to his function as head of the public health reforms of the Austrian empire. It is not even mentioned that it was he who founded the medical faculty of Tynau (today Budapest) and who was responsible for the reform of the faculties in Prague, Freiburg/Breisgau, and Pavia. One also looks in vain for the names of his most prominent pupils, e.g. Auenbrugger. Certainly the great losses of the archives in the years 1927 and 1945, to which Brechka makes no allusion, led to great difficulties

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for research on these problems. But obviously Brechka is not familiar with the medico-historical literature of the van Swieten era. The books of Hecker and Puschmann, which today are still indispensable, are not referred to, nor are A. v. Rosa's and Max Neuburger's important publications of original sources. Though Brechka quotes many times from van Swieten's letters to the Portuguese physician R. Sanchez, the standard work on Sanchez by David Willemsse (*Janus, Suppl.*, Bd. 6, Leiden, 1966) is unknown to him. But that Brechka remained ignorant of the existence of the manuscript of Egydius van Swieten (474 pages) is the gravest insufficiency of this book. This manuscript is a complete biography of van Swieten ready for the printer, and is kept in the Haus Hof- und Staatsarchiv. Had the author found it, this work would have shown him all the various chapters of importance, even those which he himself did not recognize as such; and to some extent this manuscript would have been a substitute for the lost archive materials.

We regret that a modern biography of van Swieten is still to be written, but in view of the difficult situation with regard to the source materials it is understandable. Brechka's book cannot fill the gap, although we have to be thankful for many interesting facts of van Swieten's Dutch period. It must also be acknowledged that Brechka has appreciated the importance of van Swieten's role as an intermediary of western European science and culture as well as his intellectual position between traditionalism and progress, but by his incomplete command of the available sources Brechka has unfortunately failed to give us the outstanding biography of Gerard van Swieten.

ERNA LESKY

Ein Mensch namens Dürer, by R. F. TIMKEN-ZINKANN, West Berlin, Gebr. Mann Verlag, 1972, pp. 225, 88 plates DM29.

This very revealing study of the artist's mentality is based on thorough knowledge of the literary remains and correspondence of Dürer and his friend Pirckheimer and a wealth of secondary literature, together with a penetrating analysis of Dürer's artistic work.

Philological, statistical and medical methods are used, not to overpower the reader's judgement, but to complement Dürer's own written statements, or, if in contradiction to them, to elucidate the artist's personal attitude towards reality. The complexity of his character is analysed sympathetically. New observations are made on the connection between Dürer's religious development and his art theory, and on his self-identification in the many portraits made before a mirror and others which bear his general features. A fair assessment of his enigmatic married life is attempted and contradictory statements about his economic position are carefully balanced. In an appendix theories aiming at making a German of Dürer's Hungarian-born father are refuted.

In his article of 1969 ('Some aspects of epidemics and German art about 1500', *Med. Hist.*, 1969, 13, 359-62) Dr. Timken-Zinkann hinted at the possibility of a syphilis infection in Dürer's early journey to the West of Germany. The book adds a new sign for this hypothesis found in the self-portrait of 1498 in Madrid. If Dürer acquired the infection prior to 1494, perhaps through visits to bath-houses, he would have been one of the first victims during the early spread of the disease in Europe.