

technologies continue to affect our wellbeing, sharing a similar discourse to that articulated by George M. Beard – the proponent of neurasthenia – a century earlier. It would have been interesting to see a more developed analysis of this theme, since *Exhaustion* focuses entirely on human experiences. Looking at the exhaustion of the Earth's resources might have provided an opportunity to explore the concept more broadly, and contributed to answering some of the questions raised in the book's introduction.

Written in an engaging style, *Exhaustion* offers a comprehensive introduction to the history of the condition. It will be useful to readers interested in its particular topic, but also provides opportunities for learning about some of the principal issues in the cultural history of health and disease up to the present day.

Violeta Ruiz

Autonomous University of Barcelona (UAB), Spain

doi:10.1017/mdh.2016.129

Olivia Weisser, *Ill Composed: Sickness, Gender, and Belief in Early Modern England* (New Haven, CT: Yale University Press, 2015), pp. ix, 281, \$85.00, hardback, ISBN: 978-0300200706.

In *Ill Composed: Sickness, Gender, and Belief in Early Modern England*, Olivia Weisser analyses approximately ninety primary sources from 1630–1730 to provide vivid pictures of how the sick thought about, experienced and communicated their sufferings. Her primary concern is to capture the voices of patients with the title phrase 'ill composed' referring to both the physical state of sickness and the act of writing about it (p. 15). This is above all a sociological study influenced by the theories of Talcott Parsons from the 1950s, and Weisser views both sickness and gender as socio-culturally constructed. In the introduction she defines sickness as 'a learned and patterned cultural exchange' (p. 2). The author argues that illness can best be viewed as stories of symptoms that came and went and needed to be interpreted and communicated by patients. This gave them varying degrees of autonomy and authority that would fade away after the 1730s with the rise of increasingly scientific or disease-based medicine. Gender as a concept is not examined in any detail but it becomes evident this book is an attempt to ameliorate the neglect of it in the historiography of early modern patients and practitioners.

The first chapter, 'Curing and Caring for the Early Modern Body', gives an overview of how patients and practitioners interacted and the considerable use of self-medication. Weisser sets this within the context of early modern humoral theory, and the theory of the six 'non-natural' causes of illness. 'Learning How to Be Ill' considers the significance of religion, morality and identity in how men and women developed narratives of sickness, as they struggled to make sense of their symptoms and sufferings. The third chapter, 'Emotional Causes of Illness', includes an interesting discussion of the role of emotions in acting as explanations for the causes of ill health. Chapter 4, 'Suffering on the Sickbed', analyses the self-writing and correspondence of Weisser's subjects for what they reveal of the experience of being bedridden in the social space of the sickroom. How they attempted to interpret and communicate bodily discomfort is then examined in 'Perceptions of Pain'.

All of these chapters are based upon findings from the author's survey of the writings of thirty men and twenty-two women from the middle to upper levels of English society from 1630–1730. Weisser is aware of the bias of her sources toward the wealthy and is careful to draw conclusions that show how gender was and was not significant in sickness.

For example, women's illness generally had a pattern of a sudden and traumatic onset followed by long periods confined to bed. Their narratives and symptoms were influenced by what they learnt of the experiences of others from consulting books, receiving letters or talking with family and friends. Bedridden women fretted over who chose to visit them and how comforting such visitors were, thus demonstrating the affective nature of their sufferings. Men focused more on the experience and meaning of their bodies rather than interpreting their illness with regard to the words and opinions of others. Sickness was literally measured by the number of days they missed attending to their businesses or occupations.

The final chapter turns to the question of the language of poverty and sickness. In 'Illness Narratives by the Poor', the author examines 648 pauper petitions, tersely drafted by legal clerks and submitted to Quarter Sessions. Weisser is careful to acknowledge that petitions are indirect evidence at best but concludes that while the rich explained and experienced their symptoms in terms of piety, gender and posterity, the poor understood their sufferings in terms of 'hard work, responsibility, and need' (p. 161). Finally, two helpful appendices give biographical information on the patients discussed and the medical complaint and occupations of the pauper petitioners.

This is an elegantly researched and written account of the lived experience of being sick in early modern England. The strength of the work is in Weisser's ability to allow the sufferers to speak for themselves with grace and clarity. How significant gender was in terms of how they thought about the causes and symptoms of their illness is a murkier issue. Weisser states in the introduction that based on her sample (essentially all the sources she could find) she would argue that early modern English men and women perceived illness in gendered ways that 'fall along a spectrum of difference rather than any strict male-female binary' (p. 3). This interpretation raises the issue of how useful the concept of gender actually is in explaining male and female suffering. Often it appeared that social and economic status was more of a reason for the differences the author found in the narratives, rather than masculinity and femininity. It would have been helpful if Weisser had included an explanation of what she sees as the inherent traits of early modern gender difference and hierarchy. The large size of her sample may also have precluded her from engaging in depth with secondary works that have previously analysed some of these accounts. The lack of theory is, however, certainly countered by the thoughtful and lucid fashion in which Weisser approaches the topic and the sympathetic way in which she analyses the various records left by her subjects. It is to be greatly hoped that the author continues her intriguing research and publishes more on the significance of gender in spinning the complex web of narratives that sought to understand sickness and suffering.

Lynda Payne

University of Missouri, Kansas City, USA

doi:10.1017/mdh.2016.130

Theodore Jun Yoo, *It's Madness: The Politics of Mental Health in Colonial Korea* (Berkeley, CA: University of California Press, 2016), pp. 248, hardback, ISBN: 9780520289307.

The introductory chapter of *It's Madness* is full of arresting statistics and stories. Since 2014 South Korea has had the highest suicide rate in the world – at 29.1 people per 100 000 of the population it was more than double the OECD average of 12.5. Barely 15% of South Koreans who have a formal mental health diagnosis seek treatment for it,