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HOUSEHOLD MEDICINE IN SEVENTEENTH-CENTURY ENGLAND

ANNE STOBART, *Household Medicine in Seventeenth-Century England* (London and New York: Bloomsbury Academic, 2016; x +289 pp.; ISBN 978- 1-4725-8034-4)

The seventeenth century was a period of great change in England: political upheaval, increased socioeconomic polarization, religious change, and, as Anne Stobart reveals, in the meaning and nature of household medicine. She notes that there were many issues to consider regarding the extent to which new expensive chemical and mineral compounds, and changing professional practices that were driven by developing medical marketplace dynamics, should be accommodated within the English household that customarily had based its healthcare regime on the Galenic model. Stobart admirably picks up on the evolution of household medicine over a period in which anatomical knowledge progressed as Paracelsian influence became stronger.

This book is divided logically into three sections that cover in turn medical knowledge, household resources, and actual practices. The first part on information gathering and exchange considers the transfer of medical ideas, which were often derived from printed or manuscript texts, and were expressed in written communications between individuals within households who were responsible for healthcare management. The second part of the book considers the acquisition of lotions and potions, including

buying or producing the ingredients with which to make them. In illustrating how the meaning of healthcare at home underwent a degree of change during the course of the century, Stobart deftly shows that associations between self-help and professional help were far from clear cut, and that many criteria combined to impact upon decision making. The final section discusses the practicalities involved in treatment, including diverse approaches to actual self-help measures and nuanced interactions with medical practitioners. She shows that priority was often given to the recuperation of household members, and particularly of children, with charitable provision apparently taking a backseat.

Stobart's methodology is primarily a qualitative one. She looks for trends in medical practices by drawing on a range of family records, such as household accounts, from which information about spending on healthcare is collected and scrutinized. The author also uses letters, diaries and collections of recipes to assist with analysing beliefs, concerns and methods of communication that were passed on within and between families and practitioners. Although the author is correct in pointing out that any case study represents only the practices of that particular family, and that possession of medicines do not necessarily mean they were used, Stobart does actually provide enough examples in this book to make a convincing case for her thesis. Due to the nature of the sources used, however, her evidence for the evolution of healthcare at home over the period is weighted heavily towards the experiences of the nation's well-to-do section of society. While this leaves scope for further study that would produce a fuller picture of medical practices, covering a broader section of the social spectrum and most of the population, *Household Medicine in Seventeenth-Century England* is a must-read book. This well-written account, which effectively combines much sophisticated primary research with up-to-date historiographical engagement, is involved and elaborate, and yet at the same time it is easy to follow. I would recommend this book to undergraduates and graduate students alike, and it should find a place on many medical history library shelves—PAUL S. LLOYD, *University of Leicester, UK*.