

author suggests, but is instead just replacing one “regime of fear” (p. 84) with another. The answer cannot be ascertained from the present study. The insufficiently penetrating and uncorroborated generalizations of the book at points render its claims speculative, rather than convincing.

In conclusion, *Islam's Marriage with Neoliberalism* offers a broad history and analysis of the relationship between Turkey's changing economic conditions and Islamic political actors. I recommend it to those who want to know more about religion's role in Turkey's new economic and political context. While it does provide a wealth of useful information, those looking for a more analytically incisive examination of economic and political change under the Islamist AKP government will benefit from reading other books along with Atasoy's.

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**Miri Shefer-Mossensohn. *Ottoman Medicine: Healing and Medical Institutions, 1500-1700*. Albany, NY: Suny Press, 2009, xvi + 277 pages.**

Taking the intersections of medicine and society as the focus of her research, Miri Shefer-Mossensohn problematizes Ottoman medicine in the period between the sixteenth and the end of the seventeenth century, using pluralities within the medical world as the starting point of her discussion. The book offers a narration and analysis of the understudied field of the Ottoman medical history; it should be considered as a part of the new cultural and social history of medicine. Medicine here is perceived as a cultural and social construct. This is why the author argues that how people perceive their medical world depends on their perception of their own society (p. 2).

The book evaluates the tradition of writing medical history of the Ottoman world within contemporary Western and Turkish academia. The lack of Ottoman medicine in Western historical literature has gradually begun to be filled since the 1980s. Shefer-Mossensohn warns readers that the book does not intend to offer a complete account of medical developments in the Ottoman Empire of the sixteenth and the seventeenth centuries, although she admits that such a monograph also needs to be written. She also underlines the difficulty to undertake such a comprehensive study mainly due to the scattered nature of the sources.

From the very beginning, Shefer-Mossensohn emphasizes that the value of the history of medicine is not limited to history *per se* (p. xi). She presents the idea that the history of medicine is one of the platforms on which modern ways of dealing with sanitary issues are also discussed, including the debate on orthodox medicine itself. Hence, she proposes for students of medicine a reconceptualization of the Western, the modern, and the (Middle) Eastern. In line with this political and theoretical agenda, she proposes two layers: to study medicine itself, and to look at Middle Eastern society in the given timespan.

For Shefer-Mossensohn, the ill person is considered the “other” in the society. The focus on *terra incognita* where the patient is lost is discussed in terms of a cultural conception of the medical world. The writings of authors such as Mustafa Ali or Evliya Çelebi are used in order to construct a monograph discussing the developments in the region composed of Anatolia, the Balkans and the Middle East. It is argued that the Ottoman medical tradition is based on mainly by the translation of Arabic works, within a process during which hospitals were transformed into bureaucratic institutions.

Shefer-Mossensohn deals with the difference between the elites and the non-elites in terms of the relationship that they established with health and illness. The study is composed of four main chapters: The first is on plurality in medicine and discusses different types of medical treatments. Shefer-Mossensohn distinguishes three basic types of medicine: popular folk medicine, prophetic or religious medicine and elite medicine based on Galenic humoralism. She argues that Ottoman medicine in general, unlike its Western counterpart, considered the human body as an integrated system. That system was closely connected to its physical environment.

Shefer-Mossensohn posits that these three types of performing medicine were seen as complementary to each other. They all had their own source of medical knowledge, that is, prophetic medical knowledge was based on translations of Arabic texts, popular medicine on oral transmission of knowledge, and elite medicine on the Galenic literary transmission of the humoral tradition, and specific therapeutic methods. Sometimes, they shared specific treatments, such as in the case of blood-letting.

The second chapter problematizes the concept of the body, what she calls “the integrative body.” The extrinsic (physical or ecological) and intrinsic (spiritual or personal) elements are explained as constitutive elements of the totality for of the human body, and the difference between health and well-being is stressed. The idea of holism as espoused by the

Ottomans is explained as a tool to put forward the ideas of “balance” and an “integrative outlook,” forming an entity composed of body and mind in relation to the environment. The human senses, water, belief, and the conceptualization of illness and health are underlined. Mustafa Ali and Evliya Çelebi, European travelers and miniatures, all provide rich data on these types of treatments.

The third chapter analyzes medicine in terms of social benevolence and order focusing on the institution of charity or gift exchange by stressing their political function. The importance of *zakat* (alms) and *vakıfs* (endowments, see p. 110) worked within that system, and creating a benevolent image that was expected to attract people, especially in the case of the *vakıf* hospitals. The donors, besides perpetuating their name, wanted to accumulate divine favor by adding an avenue to deal with the “needy poor,” or the non-poor foreigner. But here the “patients only” law worked in contradiction to European hospitals. By referring to Foucault, the author underlines that in early modern society institutions offering medical charity also had a social control function; however, the manner in which Ottoman hospitals worked was different from what Foucault has described: instead of exclusion, inclusion was preferred. Various services for various social groups meant that medical charity was used to create loyalty within society. Thus, medical charity was an instrument for social belonging, and it was vital for social cohesion.

The final chapter problematizes the conception of disease and space in terms of cultural perceptions. The chapter argues that the medical environment was vitally urban. Several etiologic themes—such as miasma, contagion, jinns (spirits) or celestial causes—were manifested inside hospitals, which indeed were erected within major urban centers. These centers were formed in complexes allowing for the mingling of the sick and the healthy, which also illustrates the lack of fear of disease, unlike in Europe.

The infrastructure necessary for hospitals (such as running water and sewage systems) accounts for the hospitals being built as part of mosque complexes, which also introduced a charitable environment. The relationship of spatial organization and medical knowledge in the author’s account necessitates to envision architecture and space as “active ingredients of the society” (p. 145), because she deals with how the Ottomans perceived and made use of these buildings. Hence, the choice of the founders of these charitable complexes was anchored in logistic, financial, and socio-cultural requirements which led to build hospitals that fostered a developed image of benevolence where therapeutic processes were fortified by ecological concepts—that is, the purity and beauty of the environment.

The author concludes with two questions: Was the Ottoman medical system really Ottoman, and was it successful in the eyes of the Ottomans? Her answer is that the Ottomans actually created a unique system in contrast to scholars arguing that it was only a local branch of the Arab-Muslim tradition. She does not argue that the system was totally independent from this tradition; rather, “the process of localization and Ottomanization of medical knowledge and practices” (p. 182), as she calls it, was still rightly claiming to be part of that tradition.

The localization and Ottomanization of culture has already been studied by scholars such as by Cornell Fleischer in regard to Mustafa Ali’s biography and by Gülru Necipoğlu in regard to Ottoman art and architecture. Shefer-Mossensohn follows the same historiographical approach and to applies it to the medical world of Ottoman society in the sixteenth and seventeenth centuries, by underlining that this Ottoman character did not appear within the whole empire in the exact same way. The Ottomanization of the medical system mainly happened due to the change of the language of medical writing from Arabic to Ottoman Turkish and due to the transformation of the inherited hospitals into bureaucratic and hierarchical institutions.

The use of anthropology is one of the strongest points of the book, in terms of relating poverty with health, by researching on the diet of different economic groups. Medical dietary constituted one of the major means of disease prevention and treatment, which Shefer-Mossensohn deciphers for the Ottoman case from the *Kutadgu Bilig*. Looking at a medical environment from the angle of nutrition habits and access to food can be an important contribution to the history of medicine.

In the description of the therapeutic and hygienic uses of the water, she discusses the notion of privacy in the Middle East, revisiting Iris Agman’s work on the concept and redefining it via “groups defined in terms of gender and family that were supposed to be separated” (p. 81). She adds a medical dimension to the debate on the public sphere in their Middle East: “private and public domains were not opposite poles but positions on a continuum” (p. 82).

When discussing philanthropy in early modern Ottoman society, the author refers to Malinowski and Mauss to explain the aspects of hierarchy, patronage and obligation, which played a major role within the process of gift exchange. Gift exchange theory is used to explicate how Ottoman charity created strong bonds, and in the case of medical charity, offered intimacy and physical contact between the two sides.

A wide range of sources bolsters the study, such as documents on the diet of soldiers, recipes of dishes prepared in the soup kitchens, and

lists of products bought for the hospitals, in addition to the narration of travelers. These sources are used to show social hierarchies within Ottoman society via descriptions of existing medical environment. The vague nature of the borders between medical branches (or disciplines) lead to a complex structure formed of several treatments, such as blood-letting, cauterization, surgery, and drug preparation. Her differentiation of disease and illness is an important emphasis to the study of a history of medicine. The modern concept of disease, she underlines, is a bio-medical definition based on germs and viruses, and very different from the concept of "illness," which designates a social and cultural condition, under which the person cannot fulfill his/her "normal" behavior.

Shefer-Mossensohn's most important contribution is to move both Middle Eastern studies and history of medicine in a non-Western case to a theoretical level. She demonstrates that sanitary issues, which might be (and have been) placed at the margins of the study of non-Western early modernity, can also be a legitimate and necessary subject to illustrate the dynamics of early modern Ottoman society.

On the whole, Shefer-Mossensohn offers a distinctive account of the medical world in the sixteenth and seventeenth centuries within a broad perspective. She introduces social history to the tradition of writing Ottoman and Turkish history of medicine as well as a variety of concepts and ideas from Michel Foucault to Roy Porter and their revisionist successors, useful for understanding a society through medical terms. Few scholars have worked in the field of Ottoman Turkish medicine, and Shefer-Mossensohn offers readers a guide to the study of early modern Ottoman society in respect to health and disease/illness.

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**Wendy M.K. Shaw. *Ottoman Painting: Reflections of Western Art from the Ottoman Empire to the Turkish Republic*. I.B. Tauris: London, 2011, xv + 208 pages.**

Last year, Wendy M.K. Shaw published a new study on painting and its institutions in the late Ottoman Empire and early Republican Turkey. It presents a discussion which leaves out miniature paintings and covers the period from the late eighteenth century to the Kemalist 1930s. The