

Uroscopy in Early Modern Europe. Michael Stolberg.

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Many historians of science and medicine see uroscopy as an arcane, medieval diagnostic practice, more empirical than learned, under ridicule and disappearing from learned medical practice in the early modern world. Persuaded several decades ago by sociologist Nicholas Jewson and philosopher-historian Michel Foucault, they enthusiastically accepted a quaint view of the premodern medical world as one where (mostly) elite patients patronized (mostly) artisan-status medical practitioners; the patron's illnesses, real or imaginary, governed the actions and advice of even the best-educated practitioners. The title of Jewson's famous 1976 article, "The Disappearance of the Sick Man from Medical Cosmology, 1770–1870" (reprinted, with historiographical commentaries, in *International Journal of Epidemiology* 38 [2009]), evoked a sense of loss as patients in bedside-medicine times became cases in an era of hospital medicine, and later still consumers in the wake of laboratory-based medicine. For Foucault the loss came instead at the hands of a surveillance state, but from both influential models a grand edifice within modern medical history, piously built by re-centering the narrative on patients rather than doctors, depended on what was largely a great simplifying myth about European medical practices of earlier times. Michael Stolberg's work presents significant challenges to these claims about the medical world we have lost.

Uroscopy involved looking at urine in a jar (called a *matula*, or jordan) in order to see through the fluid to the hidden illness processes at work in the patient's body. To show how ubiquitous and fundamental uroscopy remained across the early modern centuries, Stolberg mines some erudite medical texts and academic medical diatribes devoted to the careful assessment of an ill patient's condition from more than an inspection of his or her urine, following a secular trend to suppress published, learned discussion of uroscopy. Misdiagnosis could undermine educated physicians' knowledge claims or reputations. However, most of Stolberg's evidence comes from manuscript sources: handwritten notes, diaries, physician journals, court records — in short, a cache of evidence barely

inferred if one's study of early modern medicine is based on printed texts and treatises. These results convince: physicians had no serious doubts about the assessment of patient pathophysiology from his or her urine, for the procedure was firmly in line with Galenic theory. At the same time, uroscopy endured by patient demand; their unshakable trust persisted into the late nineteenth century. Stolberg's insights are especially keen and delightful regarding women's preference for uroscopy, a process that allowed patients both anonymity and the power to make their own decision whether the physician was indeed expert. Uroscopy was also regarded as a more objective medical assessment, not at all supporting Jewson's model of a subjective premodern personal relationship between physician and patient. Reading urine led to a *judicium*, borrowing from the language of the courtroom, but the process of reading urine was also highly ritualized.

Stolberg's book includes handsome color illustrations of commonplace late medieval "urine wheels," and a set of color reproductions from seventeenth-century Dutch genre paintings that includes a practitioner holding urine jars aloft. These paintings were popular — and thus found buyers — and allowed the artists to showcase their virtuosity. In a fascinating chapter Stolberg discusses paintings that feature young women in their own homes, with the grand physician making his diagnosis. From many hints in the picture viewers can see all the obvious signs of issues linked to sexuality (pregnancy, lovesickness, adultery, hysteria, and so forth). But other Dutch paintings feature a more humble uroscopist, surrounded by books, baskets, and alchemical paraphernalia, inspecting urine brought to him by messengers.

Why did uroscopy almost disappear from learned works on medical practice by the eighteenth century, even as the newer chemical physicians distilled "thousands of liters of urine" (139) in the search for secrets their competition could not access? To advance their expertise over unlearned competitors, educated physicians found their anatomical expertise from public dissections gave them greater cultural capital in making knowledge claims about the inner recesses of the human body. To the extent that they still wrote about uroscopy, it was typically in the vernacular and to expose the tricks that charlatans used. But advertising one's frequent contact with bodily excretions also did not support elite physicians' social aspirations. Stolberg presents a wonderful and marvelously compact study, offering much more than can be mentioned in a brief review.

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