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Joël Coste, *Les Écrits de la Souffrance: La Consultation Médicale en France (1550-1825)*. Ceyzérieu: Champ Vallon, 2014. 269 pp. Glossary, tables, appendix, biographies, bibliography, and index. 25 € (pb). ISBN 978-2-87673-4.

Review by Lianne McTavish, University of Alberta.

In his latest book Joël Coste, a medical doctor, professor of public health at the Université Paris Descartes, and director of studies in the history of medicine at l'École Pratique des Hautes Études, examines 2,003 letters of consultation written by 122 different authors in France between the years of 1550 and 1825. Such letters were typically solicited from respected physicians working in either Paris or Montpellier by those living outside of the major centers, including people suffering from chronic illnesses, the members of their family, and the regular doctors who had already made efforts to treat their clients locally. Lengthy and full of detail, the consultation letters written about difficult cases by esteemed physicians often describe the medical problem, outline the causes and processes of the condition, offer a diagnosis and sometimes a prognosis, and end by recommending medical remedies as well as a daily regimen for the client in question. These letters provide rich historical sources able to shed light on, among other things, early modern French medical practice, the literary genre of the consultation letter, and relationships between clients and doctors, all issues of concern to Coste.

The book is organized into three sections: Part one covers the procedures related to soliciting consultation letters from urban physicians who could not examine the suffering client in person, considering the medical consultations that preceded the request for expert advice, the cost of said consultation letters, and the conventions followed by those who wrote them. Part two investigates more closely the contents of consultation letters, focusing on their narrative description and representation of various illnesses. The third part highlights the medical advice given and argumentation styles used by the authors of consultation letters, as well as the complex relationships between different practitioners, and between doctors and clients, that the letters reveal.

Coste's interest in the consultation letters that survive in both printed and manuscript form is not new. Scholars have long recognized the value of these sources, analyzing examples from Italy, Britain, and France to consider, for example, the shifting roles and medical practices of doctors, the differing treatments prescribed for men and women, and the literary representation of pain.[1] Although many studies focus on the letters written either to or by a particular physician in the eighteenth century, such as Hans Sloane (London), Étienne-François Geoffroy (Paris and Montpellier), or William Cullen (Edinburgh), others have, like Coste, taken a broader view.[2] In 2013, Robert Weston published *Medical Consulting by Letter in France, 1665-1789*, reading closely some 2,500 letters by 100 different physicians and surgeons to consider the context and practice of producing consultation letters. Among other discoveries, Weston found that the medical advice offered in the letters indicated a relatively stable adherence to the Galenic understanding of sickness and health, despite the increasing dissemination of iatrochemical ideas.[3]

Coste insists that his approach to the consultation letters is both more systematic and attentive to medical content than that of Weston or other predecessors. The author has indeed used quantitative

methods to an extraordinary degree, applying a standardized grill to each letter in order to tabulate numerous categories of concern, including the health problems addressed, therapeutic processes advocated, forms of argumentation utilized, and social or medical hierarchies enforced. The resulting statistical information is featured throughout the nine chapters of the book, and in nine tables presented as appendices. When Coste interrogates the issue of exactly who demanded medical consultations by letter, for instance, he finds that (when indicated) the request was made 22 per cent of the time by either the patient—Coste’s term—or the patient’s family, 64 percent of the time by the ordinary physician, and 13 percent of the time by another medical practitioner. Coste notes a pattern that gradually changed so that by the second half of the eighteenth century, the request for expert advice originated 80 per cent of the time from the ordinary physician (p. 39). His careful enumeration of the words commonly used and social status of clients (when revealed) in the letters will no doubt be of benefit to current and future scholars, who can mine Coste’s book for their own purposes, finding data on the particular ailments they might be studying, the ages, sex, and location of patients, as well as the particular therapies prescribed, including how they changed over time. The sheer amount of statistical information provided in the book arguably provides its strongest contribution to the study of early modern medicine.

All the same, there are some drawbacks to approaching the letters as sources from which to extract data, as if they reflect medical practice and knowledge in a relatively straightforward fashion. To be fair, Coste highlights the narrative conventions and literary structure of the letters, while admitting that many of the consultations written by such esteemed physicians as Paul-Joseph Barthez in the eighteenth century were collected and edited by others, published as examples worth replicating by aspiring doctors (p. 34). Yet Coste also argues that the letters offer “un reflet direct de la pratique médicale” [a direct reflection of medical practice] (p. 9). This conception of the letters as data sets that provide historical information is reinforced by the author’s habit of reproducing long sections and sometimes even entire letters throughout his book. Coste’s authorial voice fades into the background as the letters take center stage, implying that these texts provide evidence requiring little critical or cultural analysis.

This intense focus on the manifest content of the consultation letters informs the most controversial aspect of Coste’s book: his steadfast application of the method of retrospective diagnosis. Drawing on his medical knowledge and with reference to the most recent diagnostic manuals, he classifies the cases in terms of specific disease entities, suggesting, for instance, that a thirty-two-year-old Jewish woman featured in a letter written in 1737 was suffering from paranoid schizophrenia, indicating the historical presence of this condition (p. 126). This mode of argumentation has been rejected by many historians, especially those specializing in the history of the body, because it presumes the historical continuity of conceptual categories, ways of seeing, and biological as well as psychological functions.[4] Coste dismisses scholarship that insists on the historical and cultural specificity of physical experience and understandings of embodiment by conflating it with Foucauldian interests in the medical gaze and processes of medicalization (p. 178). According to the author, those who focus on the history of the body tend to assume that medical practitioners increasingly came to dominate their patients. Coste finds no signs of domination or alienation in the consultation letters that form his database. On the contrary, he argues that patients, including those who were not aristocrats, often took the initiative in requesting consultation letters; they also read medical publications and patronized irregular healers (p. 179).

Yet Coste’s emphasis on the collaboration and negotiation between various medical practitioners and their clients overlooks similar arguments made by historians of the body, while underestimating the complexity of Foucault’s arguments about power as diffuse, elusive, and productive rather than only oppressive.[5] In a recent book about consultation letters informed by literature on the history of the body, Sonja Boon, for example, examines the letters written by individuals to the Swiss physician Samuel August Tissot during the eighteenth century, noting how the authors understood the body in ways that were informed by contemporary local and national political issues.[6] Although Coste sets himself apart from this kind of methodology instead of engaging fully with it, a range of scholars may find his study of early modern French consultation letters useful for their own research purposes,

potentially discovering previously unknown letters and authors, while bringing their own assessments to the statistical data that Coste produces.

NOTES

[1] See, for example, Lisa Wynne Smith, “An Account of an Unaccountable Distemper’: The Experience of Pain in Early Eighteenth-Century England and France,” *Eighteenth-Century Studies* 41, 4 (Summer 2008): 459-80; Séverine Pilloud, “Mettre les maux en mots: médiation dans la consultation épistolaire au XVIIIe siècle: les malades du Dr Tissot (1728-1797),” *Canadian Bulletin of Medical History/Bulletin canadien d’histoire de la médecine* 16 (1999): 214-45; Marco Bresadola, “A Physician and Man of Science: Patients, Physicians, and Diseases in Marcello Malpighi’s Medical Practice,” *Bulletin of the History of Medicine* 85, 2 (Summer 2011): 193-221; and Wayne Wild, *Medicine-by-Post: The Changing Voice of Illness in Eighteenth-Century British Consultation Letters and Literature* (Amsterdam and New York: Rodopi, 2006).

[2] See, for example, Lisa Wynne Smith, “Reassessing the Role of the Family: Women’s Medical Care in Eighteenth-Century England,” *Social History of Medicine* 16, 3 (December 2003): 327-42; Laurence Brockliss, “Consultation by Letter in Early Eighteenth-Century Paris: The Medical Practice of Etienne-François Geoffroy,” in Ann La Berge and Mordechai Feingold, eds., *French Medical Culture in the Nineteenth Century* (Amsterdam: Rodopi, 1994), pp. 79-117; and Rose Guenter, “‘Doctor William Cullen, Physician, Edinburgh’: A Consultation Practice in the Eighteenth Century,” *Bulletin of the History of Medicine* 48, 3 (Fall 1974): 338-51.

[3] Robert Weston, *Medical Consulting by Letter in France* (Farnham: Ashgate, 2013), pp. 115-38.

[4] See, for example, Andrew Cunningham, “Identifying Disease in the Past: Cutting the Gordian Knot,” *Asclepio* 54, 1 (2002): 13-34, and Jon Arrizabalaga, “Problematizing Retrospective Diagnosis in the History of Disease,” *Asclepio* 54, 1 (2002): 51-70.

[5] My own work, for example, argues for the negotiation of authority between male and female medical practitioners as well as clients within the early modern French lying-in chamber: Lianne McTavish, *Childbirth and the Display of Authority in Early Modern France* (Aldershot: Ashgate, 2005). For Foucault’s understanding of power dynamics, see his *History of Sexuality: An Introduction*, trans. Robert Hurley (New York: Pantheon Books, 1978), pp. 92-6.

[6] Sonja Boon, *Telling the Flesh: Life Writing, Citizenship, and the Body in the Letters to Samuel Auguste Tissot* (Montreal: McGill-Queen’s University Press, 2015).

Lianne McTavish
University of Alberta
lmctavis@ualberta.ca

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