

Joel Peter Eigen, *Witnessing insanity: madness and mad-doctors in the English court*, New Haven and London, Yale University Press, 1995, pp. xv, 240, £22.50 (0-300-06289-3).

In his *Trial by medicine* (1981) Roger Smith gave a magisterial account of the history of forensic psychiatry in the late-nineteenth century, mainly focusing on insanity pleas in the murder trials that took place after the McNaughton Rules of 1843. Smith's basic picture is that of a titanic battle of ideas between law and psychiatry, between the two incommensurable concepts about human agency. While law regarded free will as the sacrosanct basis of responsibility and culpability, medicine embraced the somatic and organic determinism of human action. Smith's sophisticated sociology of legal and psychiatric knowledge has been virtually unchallenged for about fifteen years. At last, Joel Peter Eigen's *Witnessing insanity* has provided a radically different interpretation from Smith's, especially about the relationship between the two professions over the question of insanity before the McNaughton Rules.

Eigen's book is conceptualized as a monograph on the making of forensic psychiatry in England in the late-eighteenth and early-nineteenth century. His core source material is formed by some 330 reports of insanity trials in the Old Bailey Sessions Papers, spanning the period from the trial of Earl Ferrers in 1760 to that of Daniel McNaughton in 1843. Having made a thorough and systematic survey of those hitherto little-used reports, Eigen demonstrates that in the early-nineteenth century appearances by medical witnesses in insanity trials sharply increased—from 10 per cent of all insanity cases in the first decade of the century to 70 per cent in the 1840s. This discovery is in itself somewhat predictable. Many historians of psychiatry—most notably Andrew Scull—have maintained that in the same period psychiatrists or “mad-doctors” tried to gain public recognition as experts on questions about insanity and to consolidate their professional

status in the state machinery. What is innovative in Eigen's work is his interpretation of the causes of the increased use of the expert medical witness in insanity trials.

Historians have until now asserted or assumed that psychiatrists invited themselves into the courtroom. Eigen convincingly shows that they were in fact invited by lawyers. Lawyers, not doctors, were the most important protagonists in and the initiators of the new practice of using expert psychiatric witnesses in the early-nineteenth century. Due to a new legal practice, the role of defence lawyers became more important and they became more ambitious and innovative. As a part of this mode of defence, the emerging advocacy bar often guided medical witnesses by deftly crafted questions and led doctors into expressing their “expert” opinion. The real cause of the doctors' entrance onto the legal platform is, Eigen argues, the new legal practice.

This raises some obvious questions: how can one reconcile Eigen's new interpretation and Smith's old one? Did the happy relation between law and medicine rapidly turn sour around the mid-nineteenth century? Did lawyers suddenly feel threatened by the newcomers whom they had patronized before? Was there another legal change? It is strange that Eigen has not given any answer to these.

Another fresh interpretation presented in the book is of the crucial role played by lay culture in the making of the medico-legal notion of insanity and culpability. In the late-eighteenth century, juries in London were already familiar with the notion of constraints on human agency. When they returned *non compos mentis* verdicts on those who had committed suicide under extreme distress or when they exonerated those who had been impelled by destitution to commit theft, they were expressing the idea that one's capacity to form intent is greatly affected by external circumstances—by social calamity, domestic distress, personal agony, and so on. Insanity was, Eigen argues, regarded as one of those constraints on the will. More importantly, Eigen maintains that the whole point of the

legal practice of taking these constraints—including insanity—into consideration was the attempt to *understand* the actions of criminals from their own point of view. The crime committed under insanity thus became an understandable act, and the insane criminal became an individual whose motivation and will were fathomable. Rather than simply labelling the insane with the stereotypes of madness or explaining them away as alien figures, lay culture in the late-eighteenth century was therefore moving toward creating the Foucauldian modern individual in the courtroom: carefully examining the vitiated will of the insane criminal in order to reconstruct and understand his or her mental world.

Eigen's achievement is thus manifold. It will become the standard citation work on English forensic psychiatry before the McNaughton Rules. It has challenged the present orthodox interpretation of the rise of forensic psychiatry, which will no doubt stimulate discussion and further research. Most importantly, it asks fresh and important questions which will command the attention of many historians of psychiatry. Few will fail to benefit from reading *Witnessing insanity*, following the fine and careful lines of arguments, and pondering on numerous questions invoked by them.

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Lynn Gamwell and Nancy Tomes, *Madness in America: cultural and medical perceptions of mental illness before 1914*, Cornell Studies in the History of Psychiatry, Ithaca and London, Cornell University Press, 1995, pp. 182, illus., £31.50 (0-8014-3161-1).

The discursive approach adopted in this book is consciously inter-disciplinary, as is manifest by the divergent backgrounds of its co-authors (art historical and historical) and by their declared object of merging images and words as discourse. The authors have clearly aimed at engaging with a more general

readership, not just with professional historians. In this intent the book succeeds well, and the authors are wise to concentrate on changing and differing “perceptions of mental illness”, rather than on provision for the care and treatment of mental illness. In this connection, their politically correct agenda of being careful with “the selection and placement of pictures that were racist, sexist, homophobic, or demeaning to the mentally ill” (p. 8), is far from resulting in a sanitized history. Rather, the authors address important racial, social and sexual ideologies that shaped peoples' perceptions of mental illness throughout their survey, and they remain thoroughly committed to an account of America's psychiatric history that fully respects its cultural, ethnic and sexual diversity. The book ranges widely and intelligently through American history, from the seventeenth century to the eve of the First World War. Of necessity this means that the authors have been highly selective in their analysis, and that their account is at times rather superficial and question-begging. It may seem regrettable that the book is anchored by a minimal amount of references (all embedded, as inconspicuously as possible, in the text) and by a very cursory bibliography, but this also helps to ensure a “popular” feel to the narrative.

The book is lavishly illustrated, with almost 200 black and white and colour illustrations. The authors deserve particular credit for unearthing a host of images unfamiliar to historians or previously unpublished. Their approach and use of disparate sources often throw up unexpected insights, as when they reveal that those cherished items within our junk food culture, cornflakes and coca-cola, were medicalized in their original marketing, the former as prophylactic health food and the latter as an “ideal brain tonic and sovereign remedy for headache and nervousness” (pp. 112–13 and 139, and Fig. 2.80). Some of the images are so powerful that they may almost be left to speak for themselves, as with Buchanan's medical map of the female body anachronistically imposed on Praxiteles'