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Office hours: Wed 5:30 to 6:30 and Thursdays 2:30 to 3:30

Evaluation and Assignments: (for more info see below)

- 5 assignments: 1 non-essay @ 10% (due in week 2 and 3)
- 2 short essays @ 15% each (one due week 11)
- 1 short essay @ 20% (due any time before end)
- 1 short essay @ 25% (due any time before end)
- class participation @ 15%

NB – HAND IN ALL ASSIGNMENTS ON TIME AS I WILL BE OUT OF THE COUNTRY IN DECEMBER. I WILL NOT MARK LATE ASSIGNMENTS.

Educational Objectives:

1. To understand history (of medicine) as an object of study in itself, with a history, philosophy, sociology, and objectives.
2. To recognize and understand the reasons for major trends in recent scholarship, with optional emphasis on various periods, on Canada or other places.
3. To enhance ability to read, understand and evaluate (medical) historical scholarship and writing.
4. To enhance ability to recognize the merits and defects of (medical) historical scholarship.
5. To improve skills at (medical) historical scholarship and writing.

Readings

1. Course pack
2. Weekly supplements (Books are to be found in Queen's library; photocopies of selected **articles** can be made from my collection – during office hours).

How does it work?

In general every class will be divided in two. The first part will introduce a theoretical issue based on readings in Course Pack done by all students. The second part will explore examples of historical work related to the theoretical issues chosen by each student.

If the class is large, two groups may be created so that each student will be responsible for reporting only every second week. But all students are responsible for compulsory readings in every week. It is advisable to read examples in every week even if you are not expected to speak in class.

Using the suggestions provided for each week and the Course

Bibliography at

<http://meds.queensu.ca/medicine/histm/882.html>

From the authors listed for each week, select **at least** two items to be examined for each class. Those marked * are on a compulsory list that **must be** read by all students; they are in the course pack. Students should be prepared to discuss all readings in class. Keep track of what you have read—i.e., keep your own bibliography. No two students will have read entirely the same material.

The course can be shaped to cater to special interests of period, place, subject matter. e.g., Canadian, American, or European history, medieval, early modern Europe, nineteenth century, or special topics within medical history, such as gender, surgery, professionalism, etc.

OUTLINE OF COURSE by DATE and TOPICS

WEEK I: Introduction: Question and argument ;

UNIT I: Subjects: Week 2-5: "Tatrocentric" medical history and its critics:

WEEK 2 Sep 21: Subject: Doctors Assignment #1 due for discussion

WEEK 3 Sep 28: Subject: Patients Assignment #1 due on paper;

WEEK 4 Oct 5: Subject: Diseases

WEEK 5 Oct 12: The "new" Subjects (none of the above)

UNIT II WEEK 6-9: Unit II: Method: Sources, Evidence, and Interpretation

WEEK 6 Oct 19: Sources; Written, Oral, Images, Artifacts; Archives Visit

WEEK 7 Oct 26 Method: Evidence and Interpretation:

WEEK 8 Nov 2 **Class Cancelled –work on Assignments and Class 9**

WEEK 9 Nov 9: Method: Interpretation and Theory as Historical Method:
The '-ISMS:' and the Mistakes:

UNIT III WEEK 10 to 12

WEEK 10: Nov 16 Historians and Their Texts: History as Narrative Art

WEEK 11: Nov 23 Texts: History of Medicine as narrative art. Prepare
Assignment #5 for class discussion

WEEK 12 Nov 30. Class will be based on presentation of individual
research for Assignments #3, #4, # 5 due by this date or earlier

How much work is enough?

Do **NOT** be afraid of books!!!

The bibliography is long to provide choice—not to intimidate. By the end of the course you should be familiar with approximately **50 items** (including the weekly assigned readings). Students are **not** expected to read their choices cover to cover. It will be up to students to focus or to vary the readings according to taste and interest.

N.B. Each student should keep a complete list of her /his own readings (and notes) for preparation of essays.

DETAILED OUTLINE

WEEK I: Introduction: Question and argument: the crux of the matter

(***R.G. Collingwood**, "Question and Answer," 1939)

QUESTION: Did RGC learn to like the Albert Memorial?

What is history about?

change and its causes; realism and relativism; truth; the present?

What is the purpose of History?

Styles to consider:

narrative / chronicle; a moment, a period, and longue durée

re / deconstruction: a moment, a period, and longue durée

memory and imagination; metahistory

ideas and things

biography: (great (dead white) males), everyman, everybody, somebodies, nobodies, and outcasts

overview of course outline: be familiar with the three units; History has a History, a Philosophy, a Sociology

Unit I: Subjects: Week 2-6 : "Iatrogenic" medical history and its critics:

To consider: -

- Traditional subjects: The Hippocratic triangle: Doctor, Patient, Disease
- Criticisms of iatrogenic history: History of medicine as history of science;
- History of medicine as social, cultural history; history of medicine as sociology and anthropology

Questions: what's left out of traditional history of medicine? social context, economics, hospitals, governments, therapeutics, alternative practices, and beliefs? Are there any reconciliations?

WEEK 2: Assignment # 1 discussion and...meaning of "historiography"

Subject: Doctors: All Doctors Great and Small (and Their Detractors)

To consider: heroes /villains /everyday life in medicine /ordinary practitioners /individuals vs groups; practice; profession; alternative medicine

Questions: Find examples of so-called "older" versions of doctor-as-subject versus "newer" versions.

Are the "older" versions always old?

Is the study of groups replacing the study of individuals?

What is the status of biography in history today?

How have portrayals of doctors changed?

Readings:

general: Bentley; Brieger (1993); Burnham (1996 or 1999), Burnham, 2005 pp. 1-31, 80-107, Duby, France and St Clair, Linker; Meyerhoff, 1959; Murphey, Sarton; Saudan; Soderqvist

specifics: Ablard; Ackerknecht (1967); Arney; Bausell; Birken, Bittel; P. Black; Blécourt, Bonner; Bynum; Church; Citrome; Cook (1994), Cooper; Cunningham; D'Antonio; Debus, Dowling; Duffin (1998 or 2007), El Hai, Fairman; Farr (1980, 1983), Freidson, Ferngren; Finger; Gawande; Geison, Gelfand (1986), Gentilcore, Green (1999); ***Grmek (1998)**, Hansen (2000), Hamarneh, Hanawalt; Hau; Havelange; Huisman, Illich; Imber; Jacyna (1983), Joël, Kater, Keel, C.R. King, Lafleur; Lawrence, Malkin, Marland (1995), Marx; Mattern; McDonell, McDonald; McKeown; Morantz-Sanchez; More et al.; Mortimer; Noel; Nye; Nuland (1989), Park (1985), Risse (1975)l Rogers; Rutkow; Savitt (1996); Seaborn; Sigerist (1958), Shortt (1981b "Clinical"), Savage-Smith, Schlich; Starr, Taylor; Townsend; Tuchman; Urban, Wallace, Warner (1998), Weiss Adamson, Weisz (any 1986-2006), Wilson (1980); Wooton; Zink

Canadian specifics: Bernier (1989, 1993, 2003), Bliss (1984, 1999, 2007, 2011); Brown (2000); Collin; Connor (1989), Duffin (1992), Duffin (1993), Gidney and Millar, Horlick; McGinnis; ***Mitchinson (1993)**; Pound; Roland 2008; Rutherford; Shortt (1983); Shortt (1986), Stonehouse; Strong-Boag (1979), Tesson; Twohig (2002), Vandervoort

WEEK 3: Assignment #1 due

Subject: Patients: women, infants, the poor, Jews, Blacks, the insane, the "deviant," doctors themselves, individuals vs groups, medicalization

Question: why and how should we include patients in medical history?

Readings:

general: ***Porter (1985)**, Jewson

specifics: Bates; S.E Brown; Burnham, 2005, pp 32-54, Comacchio (2008); Connolly; Duffin (1988); Cordell and Gregory; Davidson et al. (2006); Freedman; Hepburn (2000); Howell and Ford; Jewson; Jones (1993); Leavitt (1986); Lederer; Marland (1987, 2003), Macmillan; Roland (1992), Sherwood (1988, 1995), Shorter (1982 or 1989); Savitt (1978 and 2007); Shuttleworth; Skloot; Terry; Turner et al; Veatch

Canadian specifics: Arnup, Bourgeault; Comacchio (1993, 2000); Ferguson, Grygier, Kelm, Lux, Mitchinson (1991, 2002), Reaume (2000, 2007); Strong-Boag (2002)

WEEK 4: Subject: Disease: symptoms, observer, patient (again)

Medical knowledge: realists and relativists: positivistic accounts versus social construction

Questions: does disease exist? if so, how?

Readings

general: R. Anderson (2007); ***Arrizabalaga**, Burnham, 2005, 55-79, Carter (2003), Figlio (1978), Foucault, Getz, Hudson (2000); Jackson, Duffin

(2005a), Risse (1978), Risse (1979); Rosenberg (1992); Rosenberg and Golden (1992); ***Rosenberg (2003)**. Sontag, Stevenson

specifics: Anderson (2008); Benedictow; Bloch (1973), Borris; Brandt (1987); Burnham (2009); Byrne; Cantor; Cohn (2002 and 2010); Condrau; Connolly; Duffin, *Lovers*, (2005); Duffin and Sweetman (2006); Garza; Gilbert; Grob; Harley; Hays; Elliott; Fee & Fox (1989); Fleck; Grmek (1990); Hacking, Hansen (1998); Hirschbein; Hodges; Holt; Jacyna (2000); Jones (2004); Kalitzkus; Lerner (2001); Packard; Packard and Brown; N. Pemberton; S. Pemberton; Potter; Porter (1994); Prins; O. Roland (1990), Rosenberg (1962); Scull (1993); Shorter (1992); Snowden; Thucydides; Trembinski; Tyshenko; Young; Vaught; Wailoo
Canadian specifics: Clow; Duffin (1996, 2005 [any 1 of 3 chapters]), with Sweetman 2006); Dressel; Edginton; Feldberg; Hackett; Lux; McLaren; Mills; Moran and Wright; Simmons; Stonehouse; Szabo

WEEK 5: The "new" Subjects: bodies; hospitals; therapeutics/ practice; policies; health; instruments and technology; politics; alternate forms of care; regions; disability; race; policy; narrative medicine; medicine in literature.

Questions: Are new topics really new? Or are they old topics revised?

Readings:

general: Barkan,, Barry, Brandt (1991), Broman; ***Brieger (2004)**; Burnham (1993), Burnham, 2005, pp. 108-141, Burke (2001 any essay); Davis; Green (2000); any essay in Huisman and Warner (2004); Jordanova, Leavitt (1990), Lock, Dorothy Porter (1988 or 1991), Roy Porter (2001); Reiser; Rorty et al; Savage-Smith, Shortland, Shorter (1997); Sharpe (2001); Siraisi (1984), Wright and Treacher

specific: W. Anderson (1996, 2006 and 2008); Anolik; Bishop; Bivens; Blum; T. E. Brown; Brandt (2007); Canaday; Carter (1982, 1995); Collin (1994); Cook (2007); Davis; Duffin (2009); Durbach; Foertsch; Frank; Gilman (2008); Harrison et al; Haslam; Henderson; Howell; Kuhn; Krueger; Laqueur, Lawrence (1988); Lesch; Lombardo; Ludmerer; Martin; Mol; Pressman; Procter and Schiebinger; Reiser; Rheinberger; Risse (1999, 2004); Rosenberg (1989); Rosenberg and Vogel (1979); Reiser; Rütten and Reppert; Savitt; Schiebinger; Scull (1994), Shortt (1981); Sournia; Squier; Stafford; Stanton; Stern and Markel; Stevens; Stevens et al. (2006) Sullivan (1994); Teigen (1999); Tone (2001 and 2009); Warner (1986); Wallis (1995); Weaver and Wright; Werbel

Canadian specifics: Adams 1996 and 2008; Baillargeon; Bernier (1993); Carr and Beamish; Cellard; Collin; Crellin; Connor (1990, 2000); Connor and Connor; Gagan (1989) and (1990); Gagan and Gagan (2002); Gorham; Heaman; Keating; Kroker; Laver; McLaren (1990); McLaren and McLaren (1986); MacDougall; Mitchinson (2002); Naylor; Reaume (2007); Shortt (1982, 1986); Stonehouse; Tesson; Toman and Stuart

WEEK 6-9: Unit II: Method: Sources, Evidence, and Interpretation

WEEK 6: Sources

NB!! CLASS WILL BEGIN WITH VISIT TO QUEEN'S ARCHIVES

To consider: Books, journals, other texts, manuscripts, case records, patient letters and diaries, newspapers, artifacts, oral history, buildings, images, comics, magazines, and iconography

Questions: how have sources on medical history changed? why?

Readings

general: Bliquez; Bryant; Burke (2001 essays by Prins or Gaskell); Clarke, Davis; Edmundson (1993); Hann; Morton; Rosenberg and Golden (1991), Robertson (1988); ***Tomes**; Risse and Warner, Worden, Zinn
specific: Anderson and Homan; Bates, Benison; Benson and Selekman; Burke (2003 or any year); Cohn; Duffin (1994), Duffin and Li, 1995; Edginton; Fox and Lawrence, Gilman (1978, 1982); Givens; Golden and Rosenberg; Smith; Hansen (1997, 2009); Henderson; Horrocks; Jorland; Katnitzky; Klinger; Kluchin; Larouche; Loughlin; Lund; Penner; Peterson; Plock; Ritchie; Rosenberg (1962); Stern et al.; Summers; Teigen (1995); Upchurch; Warner and Edmudson; Wall (any article)

Canadian: Connor and Connor (1991); Craig (pt 1 &/or 2); Drees; Duffin (1993); Dunn; Edmundson (1991); Goulet and Paradis; *Historical Methods*; Mansell; Pope; Robertson (1988); Roland and Bernier (2000); Roland and Potter (1979); Toman (2006); Twohig (2006)

WEEK 7 Method: The '-ISMS:' and the Mistakes: Interpretation and Theory: opinion and objectivity; uses and abuses of presentism / Whiggism; externalism vs internalism; positivism; marxism; feminism; structuralism; autoplagiarism

Questions: What did Butterfield mean by Whig history?
What did he think of moral judgments in history?
What did Berlin think of moral judgments in history?
What do you think of moral judgments in history?

Readings

general: Ashplant and Wilson; ***Berlin**; ***Butterfield**; Ginsburg, Goldstein; Grmek (1995); Fischer; Hall; Popper; Wilson and Ashplant
specific: Berridge; Cooter (any date); Ehrenreich and English; Gilman 2008; Lerner (2005); Lustick; McLaren (2000); Nuland (2007); Nye (1993 and 2010); Pande; Park (2006); Prescott; Savitt; Shail et al.; Sigerist (1936); Winnick
Canadian specific: Feldberg; Mitchinson (1991); Palmer; Pierson and Prentice; Sherwood; Strong-Boag (1979); Simpson

WEEK 8: Cancelled Duffin away

WEEK 9 Method: Evidence and Interpretation: "Cliometrics" and imagination; fact, myth, and culture; demography; fallacies; everyday life / vie quotidienne; thick description; bean-counting; computers

Questions: how do we know evidence is reliable? what can we invent with imagination? What are new questions? new interpretations? myths and revisions? What is the difference between history and fiction?

Readings

general: *Collingwood (1946); Christianson; Hepburn (2001); Hirsch; Kiple; Ludtke, Lusk; McNeill, Maulitz; Muller; Schoemperlen; Simminton, Stuard, Thackeray

specific: Baumeister et al.; Barry, Broman, Cohn; Elshakri; Fairman et al (2010); Gelfand (1987), Godden et al, R. Farr; Léonard; Lindemann; Long; Lustick; Meyerowitz; G. Murphy; Nye (1993 and 2010); Preston and Haines, Porter and Wear, Shapin

Canadian specific: Comacchio (2000); Crowley; Curtis; Gaffield, Handlin, Roland (1999)

WEEK 10 (UNIT III): Historians and Their Texts:

National Styles of Medical History: myth or reality?

Questions:

Why did Teigen create his classifications of different histories?

What did Getz mean by a "silver lining"—where did it come from?

Does a historian participate in his/her text?

Does/should history have (a) purpose(s)?

Readings

general: Auge, H. Bloch (1992), Braudel, Duby, Duffin (2004 or 2005b); Gilderhus, Muller, Teigen (1996)

specifics: Chalmers; Cook (1990); Cotti; Corbellini and Preti; D'Antonio; Debus; Evans, Faure, Festschrift (for Rosenberg); Fleming, Freeman; *Getz; Hannaway; Hudson (2004); Jarcho (1989, 1990); Kushner; Lellouch, Loewy, McNeill, Midlefort, Musser, Miller (1972) or 1973; Nuland (1988); Peitzman; Pickstone (1993 or 1999); Pigeaud; Price; Pioreschi (1991, 1992); Privato; Rosen, Rosenberg (1992 and 2007); Shapin; Shortt (1982); Siraisi (1991); Sivan; Statler; *Teigen (1996); Rutten; Temkin (1968); Tomes et al. (2008); Vanzan-M.; Wallis (1995); Weindling; Weiss Adamson; Wilson (1980); Woolgar

Canadian specifics: Correspondence CBMH (1990); Heaman et al; Mitchinson (1993); Neilson; Robertson, (1985); Roland (1995); Shortt (1981a); Spaulding 1990; Weisz on Bates (2009)

WEEK 11: Texts: History of Medicine as narrative art.

Questions: How does style influence history?

What is the justification for a history publication?

Will websites replace books?

Assignment #3—Prepare to discuss in class. Also examine at least one of the digital items on the list below

Readings

general: Burnham (1996), *Clive; Dray; Hunter; Joy & Smith; Morton & Norman; Epstein, Galdston; Lawrence

specific: The *Welch Medal and *Sarton Medal laureates

<http://www.nlm.nih.gov/hmd/collections/digital/index.html>

http://library.wellcome.ac.uk/doc_WTD019705.html

Canadian specific: Berger; *Hannah Medal laureates; Pickering; Renaud;

<http://www.civilization.ca/cmc/exhibitions/hist/medicare/medic00e.shtml>

Week 12 Continuation of individual essay research for Assignments 4 and 5 and/or continued discussion of Assignment #3 medals if needed.

HAND IN ALL ASSIGNMENTS AND PERSONAL BIBLIOGRAPHY

ASSIGNMENTS: Historiography of Medicine:

With the exception of Assignment #1...the best Assignments will refer to items in the bibliography (ie display ability to apply what you've learned). Students who do not use the library will be penalized.

NB Clue!!! Do not overlook mini-assignment for Week 11 – it applies to everyone! (you can recycle the book and the historian for other assignments)

NB DO NOT HAND IN ASSIGNMENTS TO THE HISTORY OFFICE.
HAND IN ALL ASSIGNMENTS IN CLASS—OR HISTORY OF MEDICINE MAILBOX AT 78 BARRIE ST.

ASSIGNMENT 1 QCAT and the History of History: 10%

TWO PAGES!! (DUE: for discussion wk 2; written wk 3)

work with QCAT:

pick one or a few of your favorite topics

enter various key words and notice the number of items found and their years of publication (other things to notice: nationality; microphotography projects).

Is publishing on your favorite topics increasing or decreasing?

Can you account for the increases and decreases in literature on certain topics over time? Try comparing different key works,

e.g. "great doctors" versus "ordinary doctors"

e.g. "myth + history" versus "fact + history"

e.g. "social medicine + history" versus "science + medicine + history"

e.g. "women + medicine" versus "men + medicine"

Write up your results in point form, or graphs, or outline. Bring to class for discussion and to hand in (**MAX. 2 pages—marks off for font <12 pt**).

ASSIGNMENT 2: A HISTORIAN: 15% Find at least two things about a (medical) historian, ideally both "pro" and "con." Obituaries and book reviews are good sources. Account for the different opinions. Briefly write your findings. Bring them to class for discussion (especially weeks 11 and 12) and hand in

written assignment with references (4 or 5 pages). NB the historian will be part of your focus, but your MAIN focus should be the people who write about the historian. You can use the medal lists in the course pack. Other suggestions below.

ASSIGNMENT 3: ACCOUNTING FOR PRIZES

Essay 15 % for discussion week 11. Pick one item from the Welch Medal, Hannah Medal, or Sarton Medal laureates in course pack. Account for its being recognized for excellence. Consider why it won the medal when it did. Prepare to discuss in class. You may use these books and authors as ideas for other assignments.

The assignment is about the book, the quality of its research and writing, BUT it is ALSO about the reception of the book and why committees thought it deserving of a prize. Use reviews and what you learned in the course to help you decide about the factors influencing the selection. (4 or 5 pages)

ASSIGNMENT 4: SEVERAL REVIEWS of ONE HISTORICAL BOOK (OF YOUR CHOOSING –

Essay 20% (due any time before end of course) Analyze as many reviews of a single book on a historical topic (by a single author) as you can find. Account for their similarities and differences. NB The topic is the REVIEWS not the book itself. Be prepared to present your research to the class at end of course and hand in written assignment with references (5 to 10 pages). ADVICE: A BAD CHOICE IS A BOOK WITH FEW REVIEWS OR REVIEWS THAT ARE UNIVERSALLY IN AGREEMENT

ASSIGNMENT 5 : SEVERAL HISTORIES OF A SINGLE TOPIC 25% (due any time before end of course) Find several histories (books or articles) written about the same topic. Account for their similarities and differences in the light of the course. Be prepared to present your research to the class at end of course and hand in written assignment with references (5 to 10 pages). WARNING!!!! DO NOT WRITE A HISTORY OF THE TOPIC YOURSELF!!! ANALYZE THE HISTORIES WRITTEN BY OTHERS. IT IS A CLASSIC REVIEW OF THE LITERATURE.

Some suggestions (but feel free to pick anything you like)

e.g. history /ies of a disease e.g., authors on tuberculosis include:

e.g., history /ies of a discipline e.g., obstetrics; war medicine; surgery;
psychiatry

e.g., history /ies of epidemic/s Eg Bubonic plague, cholera, smallpox, AIDS

e.g, history /ies of practice

Hippocrates, Celsus, Reiser, Wangenstein

e.g., history /ies of therapeutics

Warner, Sullivan, Bigelow

e.g., mortality: cliometrics-demographers and the historians

Preston and Haines, Coleman,

e.g., pathologies of memory, Hacking, Young

CLASS PARTICIPATION: 15%

attendance is not enough – what else?

Intelligent remarks rather than mouthiness

Evidence of preparation

Evidence of use of library

PREPARE YOUR PERSONAL BIBLIOGRAPHY!

Rising to challenge (e.g., choosing a book over the shortest article)

Ability to listen to and engage with classmates to foster discussion

Useful Resources

John Burnham. What is medical history? Cambridge, UK ; Malden, MA : Polity, 2005 (on reserve in Bracken)

Jacalyn Duffin, History of Medicine a Scandalously Short Introduction, UTP 2nd ed 2010 (on reserve in Bracken)

C.G. Roland and Jacques Bernier, Secondary Sources In the History of Canadian Medicine (Wilfrid Laurier Press 2000)

A Global Encyclopedia of Historical Writing, ed. D. R. Woolf (New York; Garland 1998)

W. F. Bynum and Roy Porter, eds. Companion Encyclopedia of the History of Medicine (London and New York: Routledge, 1993)

National Library of Medicine website: <http://www.nlm.nih.gov/>

Medline and Pubmed available through Queen's Library

Index Catalogue of the Library of the Surgeon General

The Wellcome Library, London UK. <http://library.wellcome.ac.uk/>