Scientia Canadensis

Canadian Journal of the History of Science, Technology and Medicine
Revue canadienne d'histoire des sciences, des techniques et de la médecine

Scientia
Canadensis

Histoire de la pharmacie en France et en Nouvelle-France au XVIII^e siècle. Par Stéphanie Tésio. (Québec: Presses de l'Université Laval, 2009. xxx + 331 p., ill., tab., notes, bibl., ann. ISBN 978-2-7637-8622-3 \$34.95)

Christopher M. Parsons

Volume 35, numéro 1-2, 2012

URI : <https://id.erudit.org/iderudit/1014006ar>

DOI : <https://doi.org/10.7202/1014006ar>

[Aller au sommaire du numéro](#)

Éditeur(s)

CSTHA/AHSTC

ISSN

0829-2507 (imprimé)

1918-7750 (numérique)

[Découvrir la revue](#)

Citer ce compte rendu

Parsons, C. M. (2012). Compte rendu de [*Histoire de la pharmacie en France et en Nouvelle-France au XVIII^e siècle.* Par Stéphanie Tésio. (Québec: Presses de l'Université Laval, 2009. xxx + 331 p., ill., tab., notes, bibl., ann. ISBN 978-2-7637-8622-3 \$34.95)]. *Scientia Canadensis*, 35(1-2), 212–215.
<https://doi.org/10.7202/1014006ar>

such as Saenger's are rare examples of "bad" science. In contrast, Kutcher argues that clinical studies are "fundamentally problematic" (p.10) by nature, involving failures, changes of direction and mixed goals. In this version, Saenger's work reflects the actual—as opposed to the idealized—nature of clinical research.

Kutcher also draws our attention to the human face of clinical trials; in Chapter Five, for example, he follows the story of Maude Jacobs—one of the study participants—through her course of treatment, the devastating complications arising from it, and her efforts to provide for her family in her final days. It is the nature of clinical trials to regard participants/patients as "proxies." In this context, the patient is a sample, a unit, a member of a cohort to study investigators. By giving one such "unit" a name, face, personality and history, the author moves this discussion from the abstract to the personal and concrete. While the goal of clinical experimentation may be the advancement of science and improved treatment of patients, physician-scientists would do well to remember the very real impact of such studies on the individual health and lives of their trial participants. Moreover, it would behoove society to recognize the inherent cost and risk of human experimentation, instead of trusting to the comforting picture of a victimless science.

Contested Medicine is therefore not only an important contribution to our understanding of the Saenger controversy. It is also a probing analysis of the continued contradictions and difficulties inherent in modern clinical research. As such, this is not only an impressive work of medical and scientific history; it is also essential reading for anyone involved or interested in modern clinical trials.

TABITHA MARSHALL
Hamilton, Ontario

Histoire de la pharmacie en France et en Nouvelle-France au XVIII^e siècle. Par **Stéphanie Tésio**. (Québec: Presses de l'Université Laval, 2009. xxx + 331 p., ill., tab., notes, bibl., ann. ISBN 978-2-7637-8622-3 \$34.95).

Stéphanie Tésio's *Histoire de la pharmacie en France et en Nouvelle-France au XVIII^e siècle* is an ambitious book that offers a rare view of the transmission of European medical institutions to a New World colony, through a detailed comparison of the social lives and medical practices of apothecaries in Lower Normandy and the Saint Lawrence Valley. The book proceeds in a linear fashion, tackling the impressive scope of the project piece by piece. Three sections detail different aspects of the social and professional realities of medical practice on both sides of the Atlantic.

The first section, "Organisation des apothicaires," defines the subject of the book: the apothecary. Examining the legal definitions and roles of apothecaries and their siblings in the medical world of eighteenth-century France, doctors and surgeons, Tésio also analyzes the process by which the trade was passed from generation to generation and from master to apprentice. The second section, "Au cœur de la pharmacie," focuses on the medical practice and intellectual life of apothecaries. Finally, section three, "Réseau social et niveau de vie" looks at the family and social life of apothecaries and addresses everything from Godparentage to marriage strategies and how medical practitioners earned their living. While the book covers the entire eighteenth century, Tésio pays considerably more attention to Canada under the French regime than as it evolved after the conquest.

The argument of the book is subtle and is developed slowly as, chapter by chapter, the medical community of the Saint Lawrence Valley and that of Lower Normandy are explicitly compared. While continuities in medical thought and practice remained as the French medical regime took root in New France, the author suggests that differences emerged out of New France's unique legislative, medical and social environments. In chapter two, for example, Tésio compares the legal structure of medical practice in New France and Lower Normandy to suggest that practitioners in the colonial context enjoyed a relative freedom in their scope of practice; Tésio argues that Canada had a more fluid medical world numerically dominated by surgeons who expanded their practice in response to new legal realities and the relative absence of doctors and apothecaries. Similarly, in chapters five, six and seven, Tésio examines the books that informed the medical practice and theory of apothecaries on both sides of the Atlantic as well as the use and preparation of specific treatments and remedies. In both cases, the author argues that French medical thought and practice remained relatively unchanged in the Canadian context, demonstrating the meagre impact of Canadian *materia medica* (such as Maidenhair's fern or ginseng) in both Normandy and Canada and the continued importance of traditional remedies and therapies such as purgatives and bloodletting. This is perhaps one of the most important points of the book. Her close analysis of the libraries and inventories of drugs belonging to deceased medical practitioners shows the parallel use of texts such as Nicolas Lémery's *Pharmacopie universelle* by French and Canadian practitioners and a common reticence to expand the usage of remedies of American origins beyond such well known adoptions as mechoacan and cinchona. As she develops her argument Tésio refuses to resort to caricatures of either the French or Canadian medical community and demonstrates real skill at avoiding easy arguments of creolization or the slavish dependence of colonial practitioners on metropolitan models. Her own summary of her argument, that some things changed and others stayed the same as medical

practitioners crossed the Atlantic, unfairly simplifies this nuanced account of the partial transfer of medical institutions from France to Canada.

Tésio routinely apologizes to the reader for a lack of adequate sources with which to offer a more robust analysis, yet page after page of text and tables demonstrates the wealth of information that she is able to marshal from careful and thorough research in archives and libraries on both sides of the Atlantic. The presentation of this information can, however, leave the reader feeling drowned in detail. For example, the 75 tables of the book are filled with useful and interesting data but feature small fonts and an overwhelming amount of detail. At times this information is left to speak for itself and is offered with scant analysis by the author. As she considers the medical practice of the royal physician Jean-François Gaultier, for example, two paragraphs of summary are followed by three and a half pages of tables which are offered with neither commentary nor conclusion. In addition, Tésio's focus on the minute details of apothecary life suggests at times that she may have defined the subject of her research too narrowly. Even as she notes the important presence of religious communities in her consideration of colonial medical practice, for instance, Tésio doesn't often extend her research to consider their influence on the world of Canadian apothecaries. There is similarly no effort to study the transmission of French remedies and therapies to Native American communities.

In contrast to her detail driven account of apothecary life, the larger picture into which the work is situated is often left vague and ill-defined. This is visibly apparent in the book's short bibliography and a lack of footnotes, but was also evident in how Tésio conceptualized and presented her project. There is little doubt that this book offers an important contribution to the study of medicine in the eighteenth-century French Atlantic World in its own right, yet *Histoire de la pharmacie* might easily have added an important French perspective to a growing literature on the history of science and medicine in the eighteenth-century Atlantic World that has focused almost exclusively on the examples of the English and Spanish empires. If Tésio worried that these trans-imperial comparisons might draw the readers focus from the object of her study, she might easily have integrated insights from works such as Kenneth Bank's *Chasing Empire across the Sea: Communications and the State in the French Atlantic, 1713-1763* (Montreal and Kingston: McGill-Queen's University Press, 2002) to look more closely at similar information networks that stretched across the Atlantic from New France to Old.

Yet these are criticisms of framing rather of the content of *Histoire de la pharmacie*. While it may be left to readers to connect the dots and draw larger conclusions from the work, Tésio has done a remarkable job in bringing the medical world of early Canada and Lower Normandy to life

and has made an invaluable contribution to the history of medicine in the eighteenth-century French Atlantic World.

CHRISTOPHER M. PARSONS

McNeil Center for Early American Studies

***The Making of the Northern Ontario School of Medicine: A Case Study in the History of Medical Education.* Edited by Geoffrey Tesson, Geoffrey Hudson, Roger Strasser, and Dan Hunt.** (Montreal/Kingston: McGill-Queen's University Press, 2009. 229 p. ISBN 978-0-7735-3649-4 \$44.95).

This book provides a fascinating history of the first five years of the Northern Ontario School of Medicine (NOSM) which opened in 2005 with campuses at Laurentian University in Sudbury and Lakehead University in Thunder Bay, Ontario. The book is written by twelve authors who all in some way or another were intimately involved with the establishment of the NOSM, and played key roles in the preparation, negotiation, and making of the NOSM. The book not only provides a detailed history of this unique experiment in Canadian medical history—the establishment of a School of Medicine for medical practice in rural and remote communities—but the book also forms an intriguing introduction to northern culture and health. How to best meet the health needs of rural and remote communities and how to make sure health services are available and accessible has been a pressing question for northern communities ever since modern health care spread. Attracting and retaining health professionals into remote and rural communities proved to be an ongoing challenge, and therefore, northern communities in Ontario banded together to lobby for a Northern School of Medicine when the political climate seemed right and receptive to do so during the 1990s. An ardent process of negotiation and careful laying out of supporting evidence about the viability of such a northern experiment eventually resulted in the Ontario government's decision to create the NOSM in May 2001. The first students arrived in September 2005. The establishment of the School was negotiated, and then founded, based upon the evidence-based “notion that doctors with an extensive rural exposure during medical education and training are more likely to practice in rural areas” (p.29).

The book chronicles the history of this unique opportunity to make a difference in the lives and health of northern communities and to develop an innovative approach to medical education with an emphasis on rural health and community-based care. In one of the last chapters of the book,