Oxford DNB: November 2021

Welcome to the eightieth update of the Oxford DNB, which adds forty-eight portrait likenesses from the collection of the Royal College of Physicians, and two new articles. The release has a special focus on portraits of medical practitioners active in the early modern period.

From November 2021, the Oxford Dictionary of National Biography (Oxford DNB) offers biographies of 64,161 men and women who have shaped the British past, contained in 61,830 articles. 11,860 biographies include a portrait image of the subject – researched in partnership with the National Portrait Gallery, London.

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British public libraries, and how to gain access to the complete dictionary, are available here.

**November 2021: introduction to the update by Ludmilla Jordanova**

**Portraits, Biographies, and Medical Practitioners**

The *Oxford Dictionary of National Biography* contains numerous people concerned with the healing arts. They go under many different labels, which at first sight can seem bewildering, but there lies one of the main points of interest - medical practitioners come in diverse and fascinating guises. They were trained not just in universities, medical schools, and hospitals, but through apprenticeships, whether formal or informal, and in forms of instruction set up by reputed individuals, that is, privately. It was common for them to be active as historians, antiquarians, collectors, and authors, as their entries indicate. Furthermore, there were distinctions between apothecaries, surgeons, and physicians that provide valuable clues about social status, skills, and the likely nature of their work. Even if a few individuals were able to move between these occupations, such groups tended to have their own organizations, which shaped and affirmed their identities and, crucially, celebrated their most notable members, for example, through portraits.
The idea that portraits and biographies go together is a familiar and longstanding one - think of the term pen-portrait. Each supplements the other to satisfy the kinds of curiosity that are commonly felt about persons in the past who are worthy of inclusion in the ODNB. Medical practitioners themselves exhibited such curiosity in the past; they wanted to know about notable contemporaries and forbears, to chart family connections and intellectual lineages, publications and interests, personalities and eccentricities. Both portraits and biographies, sometimes presented together, fed these urges, which are remarkably persistent and widespread in medical worlds past and present.

In the history of medicine and in public culture from the nineteenth century onwards, it used to be the case that most emphasis was placed on those who had contributed to medical knowledge. In biographies and portraits, but more generally in national culture, we find an emphasis on discovery. William Harvey, who discovered the circulation of the blood, and Alexander Fleming, who discovered penicillin, are familiar examples. One of the ODNB’s most notable contributions is demonstrating how limited that approach was by including a far wider range of medical practitioners, allowing readers to discern rich lives in which actual healing may have been only one element. Another major
contribution is the inclusion of a portrait in some of the entries. This was simply not feasible when the Dictionary of National Biography was begun in the late nineteenth century, although contributors were encouraged to mention likenesses, and portraiture was valued in both private and public life. The National Portrait Gallery in London was founded in 1856, and the one in Edinburgh in 1889, a mere four years after the first volumes of the Dictionary of National Biography appeared.

The transformation that the advent of the printing press brought about in Europe was remarkable and many scholars have examined the impact that print culture made on everyday visual experience, in addition to that brought by books, notices, short polemics, and printed ephemera. Publication was a favoured route for medical practitioners to announce and share their ideas, advice, and remedies. In general, authors became adept at using print’s potential to build their reputations, including through portrait frontispieces. Many of the portraits of medics started life in this way, a practice that continued into the photographic age. Some portraits - engravings, etchings, mezzotints, for example - can be traced back to portraits in oils. In such cases, the names of artist and printmaker are usually provided, along with the name of the sitter. When a sitter’s claim to fame is made explicit, it becomes easier to work out
the basis of their reputation, which could be a prominent role in an institution, such as the Royal Society of London. It’s vital to remember that doctors might also be ‘scientists’, although that term was not used widely until well into the nineteenth century. Not all printed portraits were derived from a prior, painted portrait, which typically cost more than a print, although the cost of these varied dramatically. For many doctors, only a likeness in print form is known.

Fresh ways of thinking about the medical past in recent decades, and the concomitant expansion of the range of medical practitioners whose lives are noted, now account for many of the portraits being added to the ODNB in November 2021. Some have been described as ‘quacks’, which generally suggests cynical and exploitative behaviour, although it can simply be channeling the disapproval of contemporaries and a lack of formal training. Some such figures were well known, hence the existence of portraits. Authors of popular medical works, those who contributed to local life or had famous patients might be notable in ways that justified both the making a likeness of them and their inclusion here. Those whose ideas did not endure or whose practices proved ineffective rightly find their place in a venture that seeks to respect values and concerns of the past, no matter how alien they may seem to us now. Medical activities are peculiarly vulnerable to being treated with humour or derision by
later generations, complacent about medical progress. Thus is it worth recuperating the public profile that practitioners had in their own times, for which portraits provide compelling evidence.

Publications, institutional positions, and distinguished links, whether through kinship, patients, or patronage contributed to medical reputations. Such factors help to explain why their lives are recorded whether in words or through an image. Just as it is vital to ask what entitles a person to have their biography recorded, it is necessary to interrogate the ways in which portraits come into being. We have noted that prints serving as frontispieces to publications was a common route, as was commemoration by an institution, such as the Royal College of Physicians, with which the practitioner was associated. Doctors left valued objects, including portraits, to organizations they felt a special bond with, and their families did likewise. Further factors to consider are informal associations between artists and medics and the existence of friendship networks within which making and exchanging likenesses occurred. Such gift exchange continued after the advent of photography. Whatever their form, portraits in print were not just about the representation of physical appearance, but derived their meanings from the pose, accoutrements, and medium. A mezzotint, as a more expensive and sensuous medium,
capable of evoking the visual effects of oil on canvas, reveals claims about the sitter and the anticipated audiences for the print that could not be more different from cheap prints, cruder in execution and generally smaller in size.

We might think of medical lives and portraits as resembling tentacles, reaching into many parts of a society over substantial periods of time, thanks to the technologies that enabled their distribution. In part this tentacular quality arises because medical practice could be extremely varied even within a single life, reaching from patients seen under the auspices of a charity to the rich and famous, noble and royal. It found people at their most vulnerable in contexts where there was some scepticism, especially about elite physicians, who were often caricatured as money grabbing and haughty. Reading the lives of the men whose portraits have just been incorporated, it is impossible not to be struck by the dramas both religious and political that shaped so many of their lives, especially during the seventeenth century. The special intimacy that medical care demands, accounts for the public profile of those doctors who were closest to key players on a national stage in a time of conflict, when births and deaths became matters of international as well as national significance. Thus while many of the points made here apply to portraits in general, and more particularly to those associated in some way with the sitter's
occupation, there have been specific forces that shaped both medical portraits and the wide interest in their sitters as people with a special kind of power over bodies, minds and souls. This was especially the case in the era before enhanced regulation of training and practice, including by the state, attempted to impose a semblance of consistency, uniformity, and professional ethics. And even then, celebrity doctors as well as ‘quacks’ have continued to emerge, to have public profiles, and to be portrayed, although few would be considered suitable for inclusion in the National Portrait Gallery. As a result of the Covid-19 pandemic, there is widespread curiosity about medical practitioners, some of whom have become celebrities, while quite a few ‘quack’ remedies have been put in circulation. The current state we are in can alert us to key features of health and medicine that become evident in studying biographies and portraits together. The celebrity doctor is just one example. The interest in who practitioners are, and what they look like, is centuries old. Portraits and biographies taken together are wonderful resources for considering British medicine in its many forms and over long periods of time.

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**November 2021: summary of newly-added content**

The forty-eight medical practitioners for whom portrait likenesses have been added in this update were mainly active in the early modern period.

Eight were born between 1550 and 1599: the astrologer and medical practitioner, Simon Forman (1552-1611); the astronomer and teacher of medicine, Duncan Liddel, (1561-1613); the apothecary and herbalist, John Parkinson (1566/7-1650); the physician, Richard Haydock (1569/70-c.1642); the physician and medical writer, Tobias Venner (1577-1660); the physician, George Scharpe (c.1583-1638); the astrologer and medical practitioner, John Evans (b.1594/5?, d. in or after 1659); and the physician, Abdiab Cole (fl.1602-1664).

Fifteen were born between 1600 and 1649: the physician, Tobias Whitaker (bap.1601?, d.1664); the physician, Sir George Ent (1604-1689); the medical practitioner and astrologer, Richard Saunders (1613-1675); the chemical physician and anatomist, Nathaniel Highmore (1613-1685); the physician, Peter Barwick (1619-1705); the surgeon, Thomas Brugis (b. in or before 1620, d. in or after 1651); the nonconformist minister and physician, Richard Gilpin (1625-1700); the historian and physician,
Robert Brady (c. 1627-1700); the apothecary and physician, Francis Bernard (bap.1628, d.1698); the physician and inventor of medicines, William Sermon (bap.1629, d.1680); the physician, William Cole (1635-1716); the surgeon, John Browne (1642-1702/3?); the physician and traveller, Edward Browne (1644-1708); the medical empiric and author, William Salmon (1644-1713); and the poet and physician, Daniel Kenrick (b. 1649/50).

Five were born between 1650 and 1699: the physician, John Allen (1660-1741); the astrologer and quack, John Case (c.1660-1700); the political and medical writer, James Drake (bap.1666, d.1707); the physician, William Cockburn (1669-1739); and the anatomist and surgeon, Nathanael St Andre (1679/80-1776).

Thirteen were born between 1700 and 1749: the poet and physician, Nathaniel Cotton (1705-1788); the physician and theological writer, Robert Poole (1707/8-1752); the physician and political writer, John Shebbeare (1709-1788); the physician and secretary of the Society of Arts, Peter Templeman (1711-1769); the physician and librarian, Matthew Maty (1718-1776); the surgeon and antiquary, William Barrett (1727-1789); the man-midwife, John Leake (1729-1792); the physician, William Perfect (1731/2-1809); the physician accoucheur, Maxwell Garthshore (1732-1812); the apothecary and forger, Robert Perreau (c.1734-1776); the physician and
revolutionary politician in America. Hugh Williamson (1735-1819); the physician and poet, Hugh Downman (1740-1809); and the physician and opponent of vaccination, Benjamin Moseley (1742-1819).

Six were born between 1750 and 1799: the astrologer and physician, Ebenezer Sibly (1751-c.1799); the surgeon and vaccinator, John Ring (bap.1752, d.1821); the farrier and veterinary writer, Francis Clater (bap.1754?, d.1823); the naval physician, Thomas Trotter (bap. 1760, d. 1832); the physician and specialist in insanity, John Haslam (bap.1764, d.1844); and the physician, John Armstrong (1784-1829). Finally, one of the subjects for whom a likeness has been added was born in the first decade of the nineteenth century, the surgeon and a founder of Queen’s College, Birmingham, William Sands Cox (1802-1875).

Two new medical lives are also added in this month’s update. The Scottish surgeon, James Hill (1703-1776), apprenticed in Edinburgh, entered practice in Dumfries and attracted patients from a wide area. His published Cases in Surgery (1772) demonstrated his reliance on his own careful observation rather than conventional wisdom. The portion of the book that has attracted most interest is the section on head injuries, in which he described eighteen cases, treated over a period of forty years. After medical study at Cambridge and St Bartholomew’s Hospital, Ian Greville Tait...
(1926-2013) entered general practice in Aldeburgh, Suffolk, where his case load was increased during the annual Aldeburgh Music Festival. Through his involvement in what became the Royal College of General Practice he played a major part in achieving a wider revolution in the structure and esteem of general practice during his professional life.