der brieven, die met geserreerde, maar effectieve voetnoten is toegelicht.

Ook wat de inhoud betreft hebben de bezorgers voortreffelijk materiaal boven tafel gebracht. Vrouwen genoten een bijzondere plek in Huygens' epistolaire netwerk. Een recent themanummer van het tijdschrift De Zeventiende Eeuw 25:2 (2009) legt hier genoegzaam getuige van af. Een van de beste artikelen in dat nummer is van Huysman, en niet verwonderlijk handelt dat juist over Béatrix en Constantijn. Ook de andere bezorger, Rasch, heeft zijn sporen ruimschoots verdiend als het gaat om de bezorging van Huygens' brieven, hetgeen duidelijk doorwerkt in de onderhavige editie, die net als zijn eerdere werk verlucht is met schilderijen, tekeningen, muziekvoorbeelden, en foto's van handschriften en boeken.

De inhoud van de brieven legt getuigenis af van de intrigerende tegenstelling tussen de twee briefschrijvers. Enerzijds een enigszins pedante, geleerde, polyglotte, keurig Frans schrijvende, calvinistische hoge ambtenaar van onbesproken gedrag en met een stabiele carrière; anderzijds een katholieke, adellijke dame die na tien dagen weduwschap een door de paus onwettig verklaard huwelijk aanging en vergeefse pogingen in het werk stelde om haar bezit, maatschappelijke status, en moederschap zeker te stellen, en die haar moedertaal volstrekt fonetisch op papier schreef. Beide correspondenten deden een beroep op de vooral informele macht van de ander ter bescherming van familiebelangen, maar er is tevens sprake van een oprechte gedeelde belangstelling voor muziek, portretten, poëzie en mooie voorwerpen. En volgens mij bezaten ze eveneens eenzelfde gevoel voor humor. Huygens had echt plezier in het schrijven, zoals bijvoorbeeld blijkt uit de uitgebreide en buitengewoon geestige beschrijving van de bruiloft van zijn dochter. De meeste brieven zijn korter van aard, waarbij vaak naar Huygens' kant van het 'gesprek op afstand' gegist moet worden: zijn brieven ontbreken vaker dan die van Béatrix. Interessant is ook dat Huygens na Béatrix' dood vergeefs probeerde zijn eigen brieven aan haar terug te krijgen:

de brieven waren duidelijk niet geschreven met het oog op uitgave. Dit verhoogt slechts het leesplezier, dankzij een editie die ronduit voorbeeldig is.

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GESCHIEDENIS

Bruijn, Iris, Ship's Surgeons of the Dutch East India Company: Commerce and the Progress of Medicine in the Eighteenth Century (Dissertatie (Oorspronkelijk) Leiden 2004; Leiden: Leiden University Press, 2009, 388 pp., ISBN 978 90 8728 051 2).

In recent years, historians have come to recognize that European colonial expansion and long-distance trade had a formative effect on the emergence of modern science and medicine.

Harold J. Cook's magisterial monograph Matters of Exchange (2007), for example, has shown how commercial values such as objectivity and accuracy contributed to the reform of medicine and natural history during the Dutch Golden Age. Iris Bruijn's study of ship's surgeons begins where Cook's study ends. Focussing on the eighteenth, rather than the seventeenth century, Bruijn charts the careers of the surgeons who joined the Dutch East India Company (voc) during that time and examines their legacy for medicine.

Ship's Surgeons began life as a PhD thesis and bears the hallmarks of that, in the best possible sense. The book is based on thorough archival research and the substantial database which the author created on the recruitment and careers of the surgeons. Parts of the database, together with helpful maps, et cetera, have been collected together in a series of appendices, which permits more freedom of expression in the six substantive chapters which precede them. These chapters are written in a lively style and are quite accessible to a reader with little knowledge of either the history of

medicine or the voc. The book begins by offering a useful background of medicine and surgery in the period running up to the eighteenth century, before going on to examine various aspects of the surgeons' careers and the expansion of the voc's medical service.

From its foundation in 1602, the voc ensured that surgeons were attached to the complement of each ship; there normally being one full surgeon and two mates on each vessel. Thus, early on, the principle was established that all those who worked for the Company would be entitled to medical care either on board ship or in one of the hospitals later established in the Company's settlements. Employees were also entitled to compensation for injury. As in the case of the English East India Company, these provisions were seen as vital if Europeans were to be enticed to join the Company and face the high risks of long journeys by sea and of life in tropical climates, sometimes during times of war.

Bruijn's principal argument is that the ship's surgeons of the voc were not the crude saw-bones often depicted in popular accounts of the period but, in many cases, fairly respectable figures who saw service with the voc as means of advancing their careers as rapidly as possible. Most did not join the Company because they were desperate but because it enabled them to qualify as a surgeon more quickly than if they had remained in civilian practice at home. Working on board ships or in the voc's overseas settlements also provided them with extensive experience, not only of surgery in the traditional sense, but of physic – of the treatment of a wide range of diseases. This experience could be drawn upon to good effect if they were lucky enough to survive and return to civilian life. Mortality among voc surgeons was high, as for most Company employees, their average life-span ranging from 2.8 to 5.2 years after their first voyage at different points in the eighteenth century. For those that did survive, promotion from surgeon's mate to full surgeon could be rapid. A lucky few also made a fortune from private trade, although it was officially forbidden.

These benefits offset the high mortality and discomforts of life at sea and in ports such as Batavia, and ensured that the voc remained attractive to young apprentice surgeons throughout the eighteenth century. Indeed, the author shows that recruitment to the medical branch of the Company did not increase markedly during periods of economic depression in the main provinces from which most surgeons were recruited (Holland and Zealand). This indicates that they did not join the voc out of economic necessity, as has often been assumed. The same appears to be true of the largest foreign component of the voc surgeons, which came from the Germanic countries. All appear to have regarded the voc as a valuable place to gain experience and qualifications. For those who were intellectually adventurous, the voc also offered tremendous scope for experimentation. Some surgeons who found themselves in unfamiliar disease environments such as the East Indies, made use of their location to make detailed observations on the diseases of those places and describe the natural history of the region more generally. Some also entered into dialogue with local practitioners of other medical traditions and learned from them, adapting their own practise accordingly. It is important not to exaggerate the extent to which this occurred but for those inclined to learn from local practices the cosmopolitan bazaars of the East Indies provided a wide range of medicaments from which to replenish fitful and damaged supplies from Europe.

Surgeons employed by the voc sometimes found themselves in one of the many hospitals established by the Company in its overseas settlements. By the end of the eighteenth century, the voc had established hospitals in Amboina, Banda, Batavia (the main base), Bengal, the Cape of Good Hope, Ceylon, Cheribon, Coromandel, Hughly (near Calcutta), Macassar, Malacca, Padang, Palembang, Persia, Surat, and Ternate. As in the case of the English East India Company, these hospitals offered fantastic opportunities

for innovation in medicine and surgery: surgeons were able to experiment with different drugs and observe their effects on patients and to conduct post-mortem examinations of those who died, free from all the restrictions that hampered those who worked in hospitals at home. Bruijn is therefore able to argue forcefully that the surgeons of the voc were at the forefront in establishing what historians and sociologists have come to refer to as 'hospital medicine': a new form of medical practice in which the individuality of the patient mattered less, and in which morbid anatomy came to play a more important part than hitherto. The nature of their practise on board ships and in the voc's hospitals was also such that it enabled the hitherto distinct disciplines of surgery and medicine to be united. In effect, voc surgeons were proto-type general practitioners.

Although it is not Bruijn's central aim, her book sheds important light on the development of the voc's medical provisions in the colonies. Her book contains useful information on the development of hospitals in Batavia, for instance, including the City Hospital, the Poor House and Orphanage, a Leper Hospital and a hospital for the Chinese community, some of whom worked for the Company. In the course of the eighteenth century, more attention was paid to conditions in some of these hospitals as the mortality rate began to increase, largely, it seems, due to an increase in malaria. This 'mortality crisis' also prompted preventive measures such as drainage, which aimed to remove the miasmas which were thought to cause epidemics of fever. At this point in time, the mortality in Batavia was a matter for comment even in the English East India Company's settlements, some of which were also tarnished with the reputation of being a graveyard for Europeans.

In the course of the seventeenth and eighteenth centuries some 10,000 surgeons joined the VOC, treating in the region of a million employees voyaging to and from the East Indies. In view of this, the VOC clearly represented an important constituency in Dutch medicine and

one, it seems, which was at the vanguard of new medical practices and forms of organization. Iris Bruijn has done a great service by providing a through analysis of the voc's surgeons and its medical services in the East Indies. There is clearly much still to be said about the nature of medical practice in the Company's settlements but a strong base has been established and Bruijn's monograph will be essential reading for anyone wishing to take this line of study further. Moreover, together with work on other European practitioners overseas, it points to a more general reappraisal of the origins of what historians and contemporaries understood as modern medicine. It would seem that we are likely to discover its origins in colonial settlements as in the infirmaries of European cities such as Paris.

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Baar-de Weerd, Claudette, **Uw sekse en de onze. Vrouwen en genootschappen in Nederland en in de ons omringende landen (1750-ca. 1810)** (Dissertatie Universiteit van Amsterdam 2009; Hilversum: Verloren, 2009, 368 blz., ISBN 978 90 8704 100 7).

Arguably within Western Europe the urban spaces of the northern Low Countries presented the richest and most vibrant forms of civil society from the late Middle Ages onward. Guilds, poetry societies, chambers of rhetoric abounded and continued to thrive into the eighteenth century. In this regard see Arjan van Dixhoorn, Lustige geesten. Rederijkers in de Noordelijke Nederlanden (1480-1650) (Amsterdam 2009). Until recently their history had been largely gendered male. But as the book under review reveals, that changed dramatically after 1700 as many more women openly socialized in those spaces. Seen comparatively and prosopographically, the women in Baar-De Weerd's book concern themselves with everything from science to useful reform, as well as poetry,