

A MEDICINAL DICTIONARY (1743-45) by
DOCTOR ROBERT JAMES (1703-1776)

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Abstract

A Medicinal Dictionary was written by Dr Robert James (1703-1776) and published by Thomas Osborne (1704?-1767) in London in three folio volumes between 1743 and 1745. The circumstances that resulted in James and his school friend, Samuel Johnson (1709-1784), writing important dictionaries within ten years of each other in London are examined. The background of James in the Midlands and his training in Oxford and possibly in Leiden are explored. Samuel Johnson's move to London has been well documented but the reasons for James's move in mid-career are less obvious. The introduction of James to Osborne was a key event leading to the invitation to compile *A Medicinal Dictionary*. This large dictionary was produced on time, albeit with a change of plan extending the publication to three volumes. I have highlighted its innovative features and considered the resources needed for writing and printing such a major work. The dictionary and James's other writings are judged as having made significant contributions to the Enlightenment and to a medical enlightenment. The dictionary and James's better known fever powders are presented as evidence of the medical marketplace in London. The legacy of the dictionary is an in-depth record of medicine at that time.

Dedication

To my very supportive wife, Sue, and my family, friends and many loyal colleagues.

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Abbreviations and Style

Dr Robert James is referred to as ‘James’, Dr Samuel Johnson (1709-1784) as ‘Johnson’ and Thomas Osborne (1704?-1767) as ‘Osborne’.

References follow MHRA style.

Spelling, punctuation and capitalisation of older quotations are modernised.

Headwords (lemmas, catchwords, main entries) taken from the dictionary are indicated within the text of the thesis as, for example, ‘Sarcoma’

Introduction

A Medicinal Dictionary was published between 1743 and 1745.¹ This thesis is the first in-depth study of the dictionary and inquires into its author and publisher, its construction and its place in the sequence of medical dictionaries and other medical publications at the time of the Enlightenment. The study will explore how the dictionary came to be written by a relatively unknown physician, Robert James (1703-1776), recently arrived in London in mid-career; what roles were played by Samuel Johnson and the publisher, Thomas Osborne; what were the innovative features of the dictionary; how it affected other medical dictionaries and how it contributed to the spread of medical knowledge. From the time of the granting of a medical patent for fever powders to James in 1747 until today, he is probably better known by scholars for the manufacture and sale of the powders. The dictionary will be used to trace the development of ideas behind this commercial venture. It will be shown that these two seemingly disparate items, the dictionary and the fever powders, can be viewed as typical products of the eighteenth century which arose from successful publishing businesses and the relative freedom of the medical marketplace in London at that time. Overall, this thesis aims to give academic recognition to James's writings in the context of the mid-eighteenth century. The background is a relatively stable domestic scene, flourishing cultural activities and a considerable prosperity from overseas trade and exploration. No reference was made by James to disturbances and conflicts such as the Jacobite uprisings and the battle of Culloden (1746), to the formation of the Bow

¹Robert James, *A Medicinal Dictionary* (London: T. Osborne, 1743-45).

Street Runners in London (1749), or to wars overseas such as the war of the Austrian Succession (1740-1748), war with Spain (1741) or the Seven Years' war (1756-63).

The study of language dictionaries is a well-established discipline and exemplified by the publications of Considine.² *Adventuring in Dictionaries* surveys many aspects of dictionaries including accounts of Cawdrey, Henry Cokeram, William Lloyd and a wide field of other European dictionaries such as the *Lexicon Frisicum*, *Dictionaire Critique*, and the making of the *Eskimo-English Dictionary*. Importantly for this thesis, Heberto Fernandez and Monique C. Cormier draw attention to the less well studied topic of the outside matter of French and English Dictionaries.³ Similarly, encyclopaedias have been studied extensively, as illustrated by the publication by Jeff Loveland, including a relevant chapter on preparing an encyclopaedia.⁴ Medical dictionaries have only recently been examined as a specialised genre with McConchie, in particular, pioneering much of the current research.⁵ No comprehensive study of James's dictionary has been published previously.

The dictionary itself will be used as primary evidence as there is a paucity of information on James as an author or medical practitioner and a paucity of information on the role of the publisher, Thomas Osborne. Volume 1 of *A Medicinal Dictionary* contains

² John Considine, *Dictionaries in Early Modern Europe* (Cambridge: Cambridge University Press, 2008); John Considine, Iamartino Giovanni, *Words and Dictionaries from the British Isles in Historical Perspective* (Newcastle upon Tyne: Cambridge Scholars, 2007); John Considine, ed., *Adventuring in Dictionaries* (Newcastle upon Tyne: Cambridge Scholars, 2010).

³ 'Outside' refers to the items before and after the list of headwords.

⁴ Jeff Loveland, *The European Encyclopedia from 1650 to the Twenty-First Century* (Cambridge: Cambridge University Press, 2019).

⁵ Roderick McConchie, *Lexicography and Physicke* (Oxford: Clarendon Press, 1997); Roderick McConchie, 'The Early Lexicographers: Elyot to Bullokar' in, *Lexicography and Physicke: the Record of Sixteenth-Century English Medical Terminology* (Oxford: Clarendon Press, 1997); Roderick McConchie, 'Converting "this Uncertain Science into an Art"; Innovation and Tradition in George Motherby's *A New Medical Dictionary, or a General Repository of Physic*, 1775' in, *Adventuring in Dictionaries* ed. by John Considine (Newcastle upon Tyne: Cambridge Scholars Publishing, 2010); Roderick McConchie, *Discovery in Haste; English Medical Dictionaries and Lexicographers, 1547-1796* (Berlin: De Gruyter, 2019).

1091 pages, consisting of: a title page (25 x 41cms), a dedication to Dr Mead (iii-iv), preface (i-xcix), headwords ‘A’ to ‘Calculus’ in two columns, explications of the tables (plates) I-XXXIV in two columns, plates 1-XXXIV on six single and fifteen fold-out pages. Volume 2 contains 590 pages, consisting of a title page and headwords ‘Caldar’ to ‘Myxoter’ in two columns. Volume 3 contains 1055 pages consisting of a title page, headwords ‘N’ to ‘Zythos’ in two columns, advertisement, explications of the tables (plates) XXXVI-LXIII in two columns, index in four columns, and plates XXXVI-LXIII on fourteen fold-out pages.

Investigations in this thesis are based on four main areas, namely, an exploration of James’s credentials and personality, an analysis of the contents of the dictionary, its construction and, finally, the impact of the dictionary within the Enlightenment. These areas will illustrate the context of the dictionary within the medical and publishing marketplaces in the Midlands and in London. This thesis will show how James’s dictionary contributed to the evolution of medical dictionaries in England in the mid-eighteenth century, how it related to the tradition of technical encyclopaedias at that time, exemplified by those of John Harris and Ephraim Chambers, and how it influenced Denis Diderot’s *Encyclopédie*.⁶

Dictionaries are made and shaped by people.⁷ What makes a lexicographer can only be answered indirectly. Several factors may have contributed to the drive and ambition needed for the production of a medical dictionary, such as a yearning to systematise and to educate, use of language skills, a business motivation and a claim to fame – all of which are relevant to James’s dictionary. The backgrounds of the publisher and the author, their

⁶ John Harris, *Lexicon Technicum* (London: D. Brown et al., 1704); Ephraim Chambers, *Cyclopaedia* (London: James and John Knapton et al., 1728).

⁷ John Considine, Giovanni Iamartino, *Words and Dictionaries*, p. xvii.

commercial interests, and how they came together and achieved so much will be explored. It remains a remarkable fact, also deserving some consideration, that two important dictionaries were produced in London within ten years of each other by two school friends from the same, small Midlands city, and that both authors had had little publishing experience. So not only is the influence of Samuel Johnson on James's dictionary relevant, but also the question of whether James's dictionary had any influence on Johnson's *A Dictionary of the English Language*. It has been argued that the making of a dictionary may be viewed as a heroic achievement.⁸ Authors of medical dictionaries have been little studied and are rarely seen as heroes or innovators.⁹ Indeed, James was a notable physician in eighteenth-century England whose reputation has now faded, and whose legacy is largely unrecognised. Though James would not be counted as one of the heroes of medicine if some of his contemporaries had their say, his biography will reflect the dictionary and his other writings, his values, and the times he lived in.¹⁰ Concerns about the value of biography will be addressed as far as possible in this thesis by taking different themes in James's life. In this way aspects of the associated social and medial contexts will be included and a hagiographical portrait avoided.¹¹ The portrait is therefore set in the context of the eighteenth-century medical world, situating medicine within the economics of the period.

⁸ John Considine, *Dictionaries in Early Modern Europe*, pp. 5-9.

⁹ Roderick McConchie, *Discovery in Haste*, p. 5.

¹⁰ Helge Kragh, 'Received wisdom in biography' in, *The History and Poetics of Scientific Biography*, ed. by Thomas Söderqvist (Aldershot: Ashgate, 2007), p. 121.

¹¹ Jacalyn Duffin, "'La Mauvaise Herbe': Unwanted Biographies both Great and Small', in, *The History and Poetics of Scientific Biography*, ed. by Thomas Söderqvist (Aldershot: Ashgate, 2007), p. 188; Beth Linker, 'Resuscitating the "Great Doctor": The Career of Biography in Modern History' in, *The History and Poetics of Scientific Biography* ed. By Thomas Söderqvist (Aldershot: Ashgate, 2007), pp. 221-239.

A fresh attempt in Chapter 2 will be made to bring together for the first time the background information on James, his career and his strengths, weaknesses and personality. Information on James has also been sought in the dictionary itself. Unexpected sources of personal information were discovered in the biography of James's grandson, the prolific author George P.R. James (1799-1860).¹² This information is likely to have been derived from James himself as in his Will he bequeathed all his manuscripts and papers to his eldest son, Robert Harcourt James whose eldest son was George P.R. James. Comments about Robert James in the diaries of Richard Wilkes and Sanderson Miller have received little attention until now.¹³ Instead of writing about James as a neglected medical hero, he will instead be considered as a 'rough diamond'.¹⁴ A 'rough diamond' was a term used by Susan Whyman to describe William Hutton (1723-1815), a successful Birmingham bookseller and author, as someone who had high intrinsic worth though doubtful good character and a lack of manners. Most rough diamonds grew up in humble backgrounds; their fathers lacked a grammar school education or equivalent, they commanded a wide range of expertise often different from their fathers; all experienced failure but the successful ones learned from their mistakes and their independent lifestyles prevented social integration. Rough diamonds are not commonly noted among physicians, but James's hard work with his investment in experimental ventures may be considered typical of such people. Another successful physician before James's time who could be described as such was John Radcliffe (1650-1714) who was notorious for expressing

¹² S.M.Ellis, *The Solitary Horseman* (Kensington: The Cayme Press, 1927).

¹³ Richard W. Unett, *Diary of Dr. Richard Wilkes vol.II, 1739-1754*. Wellcome Collection MS 5006; William Hawkes, ed., *The Diaries of Sanderson Miller of Radway, Together with His Memoir of James Menteath* (Bristol: The Dugdale Society, 2005), pp. 263-270.

¹⁴ Susan E. Whyman, *The Useful Knowledge of William Hutton* (Oxford: Oxford University Press, 2018).

himself with a candour that at times verged on rudeness.¹⁵ The publisher of James's dictionary, Thomas Osborne, could also be considered as having many features of a rough diamond, as described in more detail in Chapter 3. This description could be also made of James's contemporary, the Birmingham printer, John Baskerville (1707-1775).¹⁶ James may be closely compared with other successful, contemporary medical migrants to London such as William Hunter (1718-1783), whose career ran in parallel with James's and whose connection with Baskerville was well established with the printing of his *Anatomy of the Human Gravid Uterus Exhibited in Figures*.¹⁷ In addition to descriptions of Hunter as a surgeon, man-midwife and a gentleman, Bynum and Porter collected papers on medical apprenticeships, hospitals and career structures in eighteenth-century London and made useful comparisons with other centres in Europe. The thesis will pursue this, although personal information on James remains limited. For example, unlike Hunter's detailed bank account, no comparable financial records or letters are available.

The importance of continental Europe will be emphasised in this thesis. Information on a wide range of European centres, together with the movement of medical students and a consideration of medical education, has been provided in collection of essays.¹⁸ Individual centres included Padua, Paris, Montpellier, Leiden, Göttingen, and Edinburgh, together with comments on the use of lectures and hospital attachments in the medical education scene in London. Not only was medical education varied, but many different routes led to a

¹⁵ *Oxford Dictionary of National Biography*, accessed 19 March 2020.

¹⁶ Caroline Archer Parré, Malcolm Dick eds., *John Baskerville: Art and Industry of the Enlightenment* (Liverpool: Liverpool University Press, 2017).

¹⁷ William F. Bynum, 'Physicians, Hospital and Career Structures in Eighteenth-Century London' in, *William Hunter and the Eighteenth-Century Medical World*, ed. by William F. Bynum, Roy Porter (Cambridge: Cambridge University Press, 1985); William Hunter, *Anatomy of the Human Gravid Uterus Exhibited in Figures* (Birmingham: Baskerville, 1774).

¹⁸ Ole P. Grell, Andrew Cunningham, Jon Arrizabalaga, eds., *Centres of Medical Excellence? Medical Travel and Education in Europe, 1500-1780* (London: Routledge, 2016).

successful medical career in the eighteenth century. Medical practice was multifaceted, being described as a ‘medical marketplace’, acting more like a trade than a profession.¹⁹ Porter’s extensive and stimulating writings over many years range from consideration of the Enlightenment to the role of professionals and quacks.²⁰ These paint a wide picture of health care. In following the career of Robert James within the English Midlands and London, in investigating the production and content of *A Medicinal Dictionary*, and in the invention and sale of the fever powders, many aspects of the medical marketplace of the mid-eighteenth century, reflecting both professional and lay involvement, will be uncovered. Within the marketplace, the use of professionals, lay persons, self-help, spiritual beliefs and family relations, have been considered. This results in a broad social approach to medical practice at this time.²¹ The medical marketplace concept has been enlivened by situating patients as active participants in the centre of the debate.²² It has been proposed that the marketplace in the eighteenth century describes a much more open-ended development of consumerism and medical entrepreneurship in Britain, compared with Continental Europe.²³ On the other hand, others have argued that cultural, moral, gender and spiritual factors risk being ignored by analysis of the medical marketplace if

¹⁹ Roy Porter, *The Greatest Benefit to Mankind* (London: Fontana Press, 1999), p. 286.

²⁰ Roy Porter, ‘Was There a Medical Enlightenment in Eighteenth-Century England?’, *Journal for Eighteenth-Century Studies*, 5 (1982), 49-63; Roy Porter, ‘The Language of Quackery in England, 1660-1800’ in, *The Social History of Language* ed. by Peter Burke, Roy Porter (Cambridge: Cambridge University Press, 1987); Roy Porter, ‘The Eighteenth Century’ in, *The Western Medical Tradition, 800 BC to AD 1800* (Cambridge: Cambridge University Press, 1995); Roy Porter, *The Greatest Benefit to Mankind* (London: Fontana Press, 1999); Roy Porter, *Enlightenment: Britain and the Creation of the Modern World* (London: Allen Lane, 2000).

²¹ Michael Brown, *Performing Medicine: Medical Culture and Identity in Provincial England, c.1760-1850* (Manchester: Manchester University Press, 2011), p. 3.

²² Mary E. Fissell, ‘The Marketplace of Print’ in, *Medicine and the Market in England and Its Colonies, c.1450-c.1850*, ed. by Mark S.R. Jenner, Patrick Wallis (London: Palgrave Macmillan, 2007), pp. 108-132, p. 108.

²³ Dorothy Porter, Roy Porter, *Patient’s Progress: Doctors and Doctoring in Eighteenth-Century England* (Cambridge: Polity Press, 1989), p.132.

buyer and seller aspects of medical care are overemphasised.²⁴ That the medical marketplace was part of a wider consumerism in the eighteenth century is evidenced by a proliferation of advertisements for a great range of related industries, as outlined, for example, by McKendrick.²⁵ Commercialism was one of many social changes at this time, noted by Lawrence, along with population growth, increasing urbanisation, rising disposable income, the beginnings of industrialisation and the expansion of a 'middling class'.²⁶ The title of Paul Langford's book uses the very term 'commercial people'.²⁷ Not only was this evident in London, but also, as studied by both Shammas and Stobart, in the English provinces.²⁸

One of the distinguishing features of medicine in the eighteenth century was a relative lack of professional or statutory control, even to the extent of being described as a free market. Furthermore, restrictions on publishing were eased after 1695; guild, ecclesiastical, civic and other regulations were relatively lax; there was little, if any, control over or policing of practice by the professional bodies and the relative merits of British and Continental medical degrees were disputed. One of the stronger control mechanisms within the medical marketplace was probably the social network surrounding and facilitating medical work, which allowed sharing of expertise and knowledge, rather than the

²⁴ Mark S.R. Jenner, Patrick Wallis, eds., 'The Medical Marketplace' in, *Medicine and the Market in England and Its Colonies, c.1450-c.1850* (Basingstoke: Palgrave Macmillan, 2007), pp. 1-23.

²⁵ Neil McKendrick, John Brewer, J.H. Plumb, *The Birth of a Consumer Society* (London: Hutchinson, 1982), p. 188.

²⁶ Susan Lawrence, *Charitable Knowledge: Hospital Pupils and Practitioners in Eighteenth-Century London* (Cambridge: Cambridge University Press, 1996), p. 7; Roy Porter, *English Society in the Eighteenth Century*, rev. edn (London: Penguin Books, 1991), p. 2.

²⁷ Paul Langford, *A Polite and Commercial People: England 1727-1783* (Oxford: Clarendon Press, 1998).

²⁸ Carole Shammas, *The Pre-industrial Consumer in England and America* (Oxford: Clarendon Press, 1990); Jon Stobart, Andrew Hann, Victoria Morgan, *Spaces of Consumption: Leisure and Shopping in the English Town, c.1680-1830* (London: Routledge, 2002).

professional bodies or the law.²⁹ My attempts to uncover some of the social networks developed by James have been relatively unsuccessful, but the limited evidence is reviewed in Chapter 2.

Shortcomings of the medical marketplace concept also include a tendency to obscure the differences between practitioners and to consider practitioners as seeking money or social reputations and little else. The concept emphasises individualism and implies competition rather than co-operation and the marketplace may not be the best way to address charitable or lay physic. On the other hand, it could be argued that there has always been a form of medical marketplace within developed societies. Indeed, there is no consensus on a possible beginning or ending of the medical marketplace, as boundaries between commercial and professional medical activities are frequently blurred. These concerns have led to the suggestion that it might be best to abandon this terminology and consider the markets for medical goods and services instead.³⁰ This thesis will argue the case for retaining the title of the medical marketplace as being a useful description of medical practice in the mid- eighteenth century and Robert James in particular. Jewson's proposals that the physician of this period attempted to attract paying patients by displaying theoretical and therapeutic innovation, flourishing medical and classical erudition, and by developing fashionable and attractive rationales of diagnosis and therapy, is very much a description of James's activities within the medical marketplace.³¹ This

²⁹ Jenner and Wallis, '*The Medical Marketplace*', p. 14.

³⁰ Jenner and Wallis, '*The Medical Marketplace*', p. 7.

³¹ Nicholas D. Jewson, 'Medical Knowledge and the Patronage System in Eighteenth-Century England', *Sociology*, 8 (1974), 369-385; Jewson's proposals are discussed in detail by Malcolm Nicholson 'The Metastatic Theory of Pathogenesis and the Professional Interests of the Eighteenth-Century Physician', *Medical History*, 32 (1988), 277-300.

thesis will demonstrate that James's career showed strong independence, entrepreneurial features and a combination of clinical and business activity.

The medical marketplace in Birmingham in the 1730s will be considered in relation to the population, which was relatively small. A physician such as James may have struggled in Lichfield and Birmingham to make a living as a physician. It is uncertain whether the rewards of provincial practice kept pace with those of London practice.³² Lack of success in the Midlands is consistent with the assessment that, in terms of health care, Birmingham attracted fewer doctors than other manufacturing towns. Like Lichfield, the town was small, with an estimated population of about 23,000 in the survey of 1731.³³ This approached 40,000 in 1767 when there were twenty surgeons and three university trained physicians active in the town.³⁴ James may be compared with examples of successful eighteenth-century physicians in Lichfield and Birmingham such as Sir John Floyer (1649-1734), John Ash (1723-1798), Erasmus Darwin (1731-1802) and William Withering (1741-1799). Most of these followed James, for example William Small (1734-1775) arrived in Birmingham in 1765 and was earning £600pa by the 1770s.³⁵ In a useful account of medicine and society in the Midlands, Waterhouse describes how Ash was successful in cultivating contacts with several important families in and around Birmingham from 1750, something which James appears to have failed to do.³⁶ This is consistent with the analysis by Jewson, who pointed out that it was the client in this medical relationship who held ultimate power, and therefore the nobility and gentry held sway over the medical

³² Geoffrey Holmes, *Augustan England: Professions, State and Society, 1680-1730* (London: George Allen & Unwin, 1982), p. 22.

³³ William Westley, King's Topographical Collection, plate XLII 78 (British Library).

³⁴ Joan Lane, *A Social History of Medicine* (London: Routledge, 2001), p. 23.

³⁵ *Ibid.*, p. 18.

³⁶ Rachel Waterhouse, 'Portrait of a Marginal Man: Dr John Ash and his Career' in, *Medicine and Society in the Midlands, 1750-1950*, ed. by Jonathan Reinartz (Birmingham: Midland History, 2007), pp. 12-26.

profession, at least for physicians.³⁷ However, success was not always easily attained. Erasmus Darwin's initial practice in Nottingham did not prosper until he moved to Lichfield and gained an influential patient. William Withering struggled financially, even though he was appointed to Stafford Infirmary in 1767, earning £100pa until moving to Birmingham in 1775, where he boosted his earnings to £1,000pa.³⁸ Nearby, Mark Akenside (1721-1770) failed to establish a practice in Northampton and later moved to London. Hospital work in Birmingham was limited to the Workhouse Infirmary, established in 1733. Birmingham was slow to construct its first voluntary hospital, which opened in 1779.³⁹ This was approximately thirty years after similar institutions had appeared in Liverpool, Manchester and Newcastle.⁴⁰ Speciality-based hospitals were not started in Birmingham or other provincial towns until the nineteenth century. Similarly, the Dispensary in Birmingham was founded relatively late in 1793.

In contrast, the medical marketplace in London was well supplied with medical practitioners. The population of London in 1750 was approximately 650,000, amounting to about 10% of the total population in England and Wales. A useful description of the medical scene in London is portrayed by the story of William Hunter, a contemporary of James, who arrived in London at a similar time.⁴¹ In addition to private practice, two distinctive features of the medical marketplace in London in the eighteenth century were the establishment of additional hospitals and the founding of dispensaries. These are

³⁷ Nicholas Jewson, *Medical Knowledge and the Patronage System*, p. 369-383.

³⁸ Mark Silverman, 'William Withering and "An Account of the Foxglove"', *Clinical Cardiology*, 12 (1990), 415-418.

³⁹ John Ash was responsible for the foundation of The General Hospital, Birmingham and was one of the original physicians on the medical staff. See Figure 2:4.

⁴⁰ Jonathan Reinarz, *Health Care in Birmingham* (Woodbridge: Boydell Press, 2009), p. 11.

⁴¹ William F. Bynum, 'Physicians, Hospital and Career Structures in Eighteenth-Century London' in, *William Hunter and the Eighteenth-Century Medical World*, ed. by William F. Bynum, Roy Porter (Cambridge: Cambridge University Press, 1985), pp. 105-128.

discussed in particular by Michel Foucault.⁴² In the first half of the century there was a considerable expansion of hospitals both for general illnesses, for example Westminster (1719), Guy's (1724), St George's (1733), the London (1740) and the Middlesex (1747) and for specific problems, including the Foundling Hospital (1739), the Lock Hospital for Venereal Disease (1746), the Smallpox Inoculation Hospital (1746) and the Brownlow Street Lying-in Hospital (1749). Generally, physicians and some surgeons appointed to these hospitals gave their services freely and in return hoped to improve their reputations. In a detailed analysis Lawrence showed that between 1740 and 1760 56 physicians were attached for varying periods of time to one of the seven main hospitals in London (Guy's, St Thomas's, St Bartholomew's, the London, the Westminster, St George's and the Middlesex).⁴³ No evidence could be found to link James with any of the hospitals in London, nor did he appear to be connected with a dispensary, a separate feature of medical services developed in the second half of the century. The number of physicians in London when James was practising is not known, as the first attempt to compile a commercial medical register did not occur until 1779, after James had died.⁴⁴ Simmons identified 148 physicians, about 220 surgeons and approximately 600 apothecaries in London.⁴⁵ The estimated population of London was between 650,000 in 1750 and one million in 1800, giving an approximate ratio of one physician to every 500 people. For comparison, Lane noted twenty surgeons and three physicians in Birmingham in 1767, serving a population of approximately 40,000, a much lower ratio.

⁴² Michel Foucault, *The Birth of the Clinic: an Archaeology of Medical Perception*, trans. by A.M. Sheridan Smith (London: Tavistock Publications, 1973).

⁴³ Susan Lawrence, *Charitable Knowledge*, pp. 343-350. Appendix 1A: Physicians, surgeons and accoucheurs elected to Guy's, St Thomas's, St Bartholomew's, the London, the Westminster, St George's, and the Middlesex.

⁴⁴ Samuel Foart Simmons, *The Medical Register for the Year 1779* (London: J. Murray, 1779).

⁴⁵ William F. Bynum, *William Hunter* (1985), p. 107.

The career of James will be compared with other medical practitioners coming to London at a similar time. On a personal level, James was an exact contemporary of the obstetrician William Smellie (1697-1763), who settled in London 1739/40, residing in Soho until he moved back to Scotland in 1759.⁴⁶ Similarly, as I have already noted, the anatomist William Hunter (1718-1783) came to London from Scotland in 1741 and initially lodged with Smellie. Hunter's place in the eighteenth-century medical world is well described in a series of essays edited by Bynum and Porter.⁴⁷ Hunter, even more than James, saw medicine as an enterprise in a competitive environment. Other anatomists included John Hunter (1728-1793), another successful and self-made rough diamond, who joined his brother in 1748.⁴⁸ In a survey of emigrating Scots coming into the medical scene in London, Guerrini has suggested that earlier in the century this was mainly for religious reasons, such as the disenfranchisement of Episcopalian intellectuals as suspected Jacobites. Later in the century ambitious practitioners were attracted by money and patronage.⁴⁹ There were other notable physicians who came to London from the English provinces in that period including John Fothergill (1712-1780) physician, botanist and collector of shells and insects, William Battie (1704-1776) physician at St Luke's and a

⁴⁶ Robert W. Johnstone, *William Smellie: The Master of British Midwifery* (Edinburgh: Livingstone, 1952); John Glaister, *Dr. William Smellie and His Contemporaries* (Glasgow: J. Maclehose & Sons, 1894), pp. 105-127.

⁴⁷ William F. Bynum, R. Porter, eds., *William Hunter* (Cambridge: Cambridge University Press, 1985).

⁴⁸ John Kobler, *The Reluctant Surgeon* (London: Heinemann, 1960), p. 54; Anita Guerrini, 'Anatomists and Entrepreneurs in Early Eighteenth-Century London', *Journal of the History of Medicine and Allied Sciences*, 59 (2004), 219-239.

⁴⁹ Anita Guerrini, 'Scots in London Medicine in the Early Eighteenth Century' in, *Scots in London in the Eighteenth Century*, ed. by Stana Nenadic (Lewisburg: Bucknell University Press, 2010), pp. 165-185 (p. 165).

large private asylum, John Andr  e (d.1785) who established the London Hospital and Mark Akenside (1721-1770) physician and poet.⁵⁰

Authorship, clinical practice and the manufacture and marketing of the fever powders were the main activities that occupied James in London. Other pursuits with which he might have become associated will be considered, including links with the Royal College of Physicians.⁵¹ Was he a member of the dissident Society of Collegiate Physicians?⁵² Did he obtain a hospital or dispensary appointment? Did he become involved in the military? As Lane has pointed out the British Fleet of 247 vessels each had a surgeon and his mate, and in 1783 the army in Britain had 168 part-time surgeons, fifty-four surgeons and nineteen physicians.⁵³ Or was he involved in the increasing range of new, semi-official work, such as in a workhouse or asylum? The development of most medical societies came too late for James.⁵⁴

The marketplace concept can be extended to activities other than medicine and medical products and this thesis will show how the publishing industry and booksellers were particularly relevant to the second half of James's career. Print was a key part of the medical marketplace in large cities such as London, and could be relevant to medical careers elsewhere, with the steady publication of academic books and a great increase in popular medical books and medical advertising, the latter being something that James

⁵⁰ William Munk, *Roll of the Royal College of Physicians of London*, rev. 2nd edn, vol. II, 1701-1800 (London: Royal College of Physicians, 1878).

⁵¹ A licentiate of the Royal College of Physicians could not vote on College matters but was allowed to dabble in 'trade' or midwifery.

⁵² In 1767 a group of dissident licentiates established this society with the aim of changing the College's exclusive rules, but it was not until 1834 that Oxford and Cambridge lost their grip. Lloyd G. Stevenson, 'The Siege of Warwick Lane; together with a brief history of the Society of Collegiate Physicians (1767-1798)', *Journal of the History of Medicine and Allied Sciences*, 7 (1952), 105-121.

⁵³ Joan Lane, *A Social History of Medicine*, pp. 22 and 169-186.

⁵⁴ Lawrence, *Charitable Knowledge*, p. 259.

derived great benefits from.⁵⁵ In particular, Raven describes the publishing scene in London though does not elaborate on Thomas Osborne apart from the notorious anecdote of him being felled by a folio book thrown at him by Johnson.⁵⁶ Osborne is given a short biography in Marston's sketches, along with biographies of Samuel Johnson's father, Michael Johnson (1656-1731), Andrew Millar (1705-1768), Robert Dodsley (1703-1764), William Bowyer (1699-1777) and Edward Cave (1691-1754).⁵⁷ Two publications highlight John Newbery for his successful publishing of books for children.⁵⁸

The marketplace concept can also be extended to authorship in London. Consideration of medical authors as distinct from the growing class of professional writers in the eighteenth century is limited. Benedict has described the evolution of the book trade from a relatively haphazard, loose-knit craft into a professional, profit-seeking industry with a corresponding transformation of writers from gentlemen dilettantes into professional authors.⁵⁹ Anecdotal indications suggest that the prospect of earning money from writing was beginning to attract ambitious provincials to London, where such work might be found.⁶⁰ There is certainly evidence that publication rates rose dramatically during the

⁵⁵ Fissell, *The Marketplace of Print*, p. 109. King, Steven, *A Fylde Country Practice* (Lancaster: University of Lancaster, 2001).

⁵⁶ James Raven, *The Business of Books, Booksellers and the English Book Trade, 1450-1850* (New Haven: Yale University Press, 2007); James Raven, 'The Book as a Commodity' in, *The Cambridge History of the Book in Britain*, vol. V, 1695-1830, ed. by J. Barnard, D.J. McKitterick, J.R. Wilson (Cambridge: Cambridge University Press, 2009); James Raven, *Bookscape. Geographies of Printing and Publishing in London before 1800* (London: The British Library, 2014); Raven, James, *Publishing Business in Eighteenth-century England* (Woodbridge: Boydell Press, 2014).

⁵⁷ Edward Marston, *Sketches of Some Booksellers of the Time of Dr Samuel Johnson* (London: Marston, 1902). Reprint, (Clifton: Augustus Kelley, 1972).

⁵⁸ Arthur Le Blanc, *Newbery, Records of the House of Newbery from 1274 to 1910* (Cambridge: Cambridge University Press, 2010); Charles Welsh, *A Bookseller of the Last Century* (Clifton: Augustus M. Kelley, 1972).

⁵⁹ Barbara M. Benedict, 'Readers, Writers, Reviewers and the Professionalization of Literature' in, *The Cambridge Companion to English Literature*, ed. by Thomas Keymer, Jon Mee (Cambridge: Cambridge University Press, 2004).

⁶⁰ Dustin Griffin, *Authorship in the Long Eighteenth Century* (Newark: University of Delaware Press, 2014), p. 177.

century, from up to 1,800 items to over 6,000 per year.⁶¹ In the medical field there was a steady publication of standard texts but there was also an increase in medical publications aimed at lay readership in the eighteenth century, with just over a hundred popular medical books published in the decade 1730-1740, though none were written by James.⁶²

In Chapter 3 the various steps in the production of *A Medicinal Dictionary* and the key role of the publisher/bookseller, Thomas Osborne, will be evaluated. This will be investigated in more detail than has hitherto been attempted in order to uncover some of the difficulties encountered and overcome. Furthermore, the printing of the dictionary will be considered by analysis of the text and by using what Raven described as ‘the underused treasure trove’ of the William Strahan ledgers in the British Library. Strahan (1715-1785) came from Scotland to London in about 1738 and was a printer, publisher and politician.⁶³

The publishing marketplace in the eighteenth century included booksellers in the sale and distribution of other goods, such as newspapers and pamphlets and for the advertisement, sale and distribution of medicines.⁶⁴ Perhaps as a consequence of the relative lack of control of medicine, a high level of commercialisation of medicine developed. This is well illustrated by the distinctive patent medicine industry of the time, which has been reviewed by Mackintosh and analysed alongside, but distinct from, quackery by Porter.⁶⁵ The first patent was granted to Nehemiah Grew for the production process of Epsom salts in 1698. The fever powders were patented by James in 1747 and

⁶¹ James Raven, *The Business of Books*, p. 131.

⁶² Examples being John Wesley, *Primitive Physic* (1747), William Buchan, *Domestic Medicine* (1769) and Samuel Tissot, *Avis au Peuple sur sa Santé* (1761).

⁶³ James Raven, *Bookscape*, pp. 133-135.

⁶⁴ Elizabeth L. Furdell, *Publishing and Medicine in Early Modern England* (Rochester: University of Rochester Press, 2002), pp. 129-130.

⁶⁵ Alan Mackintosh, *The Patent Medicines Industry in Georgian England* (London: Palgrave Macmillan, 2018); Roy Porter, *Health for Sale; Quackery in England, 1660-1850* (Manchester: Manchester University Press, 1989).

the patent was challenged unsuccessfully in 1753 on the grounds of being copied from William Schwanberg, a nobleman of Mecklenberg. The success of the fever powders was due to several factors, including the patent, effective advertising and distribution, and the underlying fear of fevers. The fever powders and other medications marketed by James can be seen as a typical element of the medical marketplace. Clearly James owed his co-patentee, John Newbery (1713-1767), a great debt in the marketing of the fever powders, though how they first met is not known. Newbery had previous experience of medicines being part of a four-man group buying the right to sell Hooper's pills in 1743. His continuing interest is illustrated by five patent medicines being recorded in his Will.⁶⁶ Few patents had been granted for medicines before James's fever powders, but subsequently, in the second half of the eighteenth century, many other preparations were patented. These included James's analeptic pills in 1774, reflecting his own continuing commercial interests in medicines in the latter part of his life.⁶⁷ It will be shown that other medical practitioners marketed and patented therapies, with at least twenty-one of the patentees of medicines during James's lifetime being medically trained in physic or surgery; though none of these medicines were specifically for fevers.⁶⁸

As noted by William Osler (1849-1919), 'Humanity has but three great enemies: fever, famine and war; of these by far the most terrible, is fever.'⁶⁹ The pandemic of the coronavirus, Covid-19, and the threat of ebola are outstanding modern examples but there is no shortage of instances of fevers from the seventeenth and eighteenth century such as the plague, small pox and what is now known as typhus. Fevers have been reviewed in a

⁶⁶ Alan Mackintosh, *The Patent Medicines Industry*, p. 77.

⁶⁷ The patent for the fever powders was the sixth to be taken out.

⁶⁸ Alan Mackintosh, *The Patent Medicines Industry*, pp. 303-307.

⁶⁹ William Osler, 'The Study of the Fevers of the South', *Journal of the American Medical Association*, 26 (1896), 99-1004.

series of essays introduced by Bynum.⁷⁰ In considering fevers from classical antiquity to modern times, Hamlin, in a more recent publication, concluded that fever was still a disease in the eighteenth century and not just a symptom or sign, as it is considered today.⁷¹ The importance of fevers and febrile illnesses to patients and physicians in the seventeenth and eighteenth centuries and their treatment with antimony is examined in Chapter 2. The concept of ‘fever’ evolved from the original idea of a systemic disease.⁷² The mechanism of fever was thought to be obstructions of body fluids. Later in the eighteenth century William Cullen replaced Boerhaave’s theories on the production of heat in a fever from the friction of blood in the blood vessels with that of the nervous system.⁷³ The cause of fever was considered to be either miasmatic, that is due to poisons from putrefying material or water, or due to contagion, often starting in the impoverished bodies of the poor.⁷⁴ A typical comment by James occurs under ‘Petechialis Febris’ which is ‘more incident to poor persons who have filth and are confined in small cottages to a vapid and impure air’. Such environmental factors began to be understood in the transmission of some fevers in the eighteenth century, especially the contributions of overcrowding and insanitary conditions in prisons, in the army and in ships. This resulted in an Act of Parliament in 1774 to prevent gaol distemper following John Howard’s reports, and James Lind campaigning for minimum standards of living quarters and sanitation in ships.⁷⁵

⁷⁰ William F. Bynum, V. Nutton, ‘Introduction’, *Medical History*, Supplement 1, (1981), vii-ix.

⁷¹ Christopher Hamlin, *More Than Hot: A Short History of Fever* (Baltimore: Johns Hopkins University Press, 2014).

⁷² Gian F. Gensini, Andrea A. Conti, ‘The Evolution of the Concept of “Fever” in the History of Medicine’, *Journal of Infection*, 49 (2004), 85-87.

⁷³ William F. Bynum, ‘Cullen and the Study of Fevers in Britain 1760-1820’, *Medical History*, Supplement 1, (1981), 135-147.

⁷⁴ Roy Porter, *The Greatest Benefit to Mankind* (London: Harper Collins, 1997), p. 259. Kevin Siena, *Rotten Bodies* (New Haven: Yale University Press, 2019).

⁷⁵ Christopher H. Collins, David A. Kennedy, ‘Gaol and Ship Fevers’, *Perspectives in Public Health*, 129 (2009), 163-164; John Pringle, *Observations on the Diseases of the Army, in Camp and Garrison* (London:

A rapid pulse was the single most common criterion for diagnosing a fever.⁷⁶ Although thermometers were available, measurement of body temperature was not considered important, as clinical features did not always correlate with the patient's symptoms and signs. Thermometers were mainly used for measuring air temperatures. Fevers were rightly feared as, for example, Dobson's analysis of the causes of death in seventeenth and eighteenth centuries showed that infections and fevers were the largest categories of cause of death in a study of fatal cases in south-east England.⁷⁷ Fear of the plague remained and there were growing concerns about fevers of the Indies and the development of fashionable nervous fevers. Thus fever remained an important medical topic.

The dictionary will be used in my thesis for information on fevers and on antimony, the active ingredient of the fever powders. A comment was made by James on therapy:

A physician is, therefore, never to attempt the suppression of fever, but to try the removal of its cause; and when that cannot be commodiously done, he is to moderate the fever; which, also, tends to prepare and expel the morbid cause.

Therapies included inducing vomiting or sweating with a concoction of various roots and leaves and reducing fever, especially with Peruvian bark. One recipe using antimony was the celebrated febrifuge of Riverius and for fevers arising from over-eating James suggests the use of emetic tartar, which contained antimony. Antimony has a surprisingly long history within medicine, one of the main protagonists being Paracelsus (1493-1541). He was particularly fond of antimony compounds as medicines – 'antimony is the true bath of

A. Millar, D. Wilson, T. Payne, 1752); James Lind, *Two Papers on Fevers and Infection* (London: D. Wilson, 1763).

⁷⁶ J. Worth Estes, 'Quantitative Observations of Fever and Its Treatment before the Advent of Short Clinical Thermometers', *Medical History*, 35 (1991), 189-216.

⁷⁷ Mary J. Dobson, *Contours of Death and Disease in Early Modern England* (Cambridge: Cambridge University Press, 1997), pp. 237-239.

gold',⁷⁸ and he was probably the first to use antimony solution in wine as an emetic medicine.⁷⁹ After his death, Paracelsus's chemical medicine was championed by many doctors in Europe, especially in France, and some of these made antimony their most prized remedy. Involvement by James with antimony dates back to the end of his time as a student in Oxford to which I will refer in chapter 2.

It will be noted that the fever powders developed by James were not the only successful antimony preparation in the eighteenth century, for example, Joshua Ward (1684-1761) marketed a 'pill and drop' containing antimony.⁸⁰ Though not a qualified doctor in conventional terms, Ward was illustrated in William Hogarth's etching and engraving 'The Company of Undertakers' or 'A Consultation of Physicians' (1736/7) in the top right-hand image in Figure 1. Joshua Ward is depicted along with John Taylor (1703-1772, an oculist at the upper left, carrying his cane, upon which an eye is engraved) and Sarah Mapp (bap.1706-1737), a bone setter, or perhaps Sir Hans Sloane (1660-1753) in the centre. This image is discussed in some detail by Haslam who emphasised how it illustrates that the dividing line between orthodox and unorthodox practitioners was ill-defined.⁸¹

⁷⁸ Theophrastus Paracelsus, 'The aurora of the philosophers' (1575) in, *Paracelsus, His Aurora and Treasure of the Philosopher*, ed. by J. Hoxon (London: G. Calvert, 1659).

⁷⁹ Chung Y. Wang, *Antimony*, 2nd edn (London: C. Griffin, 1909), p. 3.

⁸⁰ Marjorie H. Nicolson, 'Ward's "Pill and Drop" and Men of Letters', *Journal of the History of Ideas*, 29 (1968), 177-196. Nicolson explains that a 'drop' was an emetic potion containing half an ounce, improperly called a drop.

⁸¹ Fiona Haslam, *From Hogarth to Rowlandson; Medicine in Art in Eighteenth Century Britain* (Liverpool: Liverpool University Press, 1996), pp. 52-66.

Figure 1: 'The Company of Undertakers' (1737) by William Hogarth (1697-1764)



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Boswell recorded Johnson's comment on Taylor and Ward: 'talking of celebrated and successful irregular practitioners in physic; he said, "Taylor was the most ignorant man I ever knew, but sprightly; Ward the dullest."' ⁸² Ward's 'nostrum' was popular but received considerable adverse publicity for its side effects and for being advertised by 'one not in the regular practice of physic'. Nicholson suggested that there is reason to believe the

⁸² Nicholson, *Ward's "Pill and Drop"*, p. 194.

recipe was changed several times and the preparation became milder. The fever powders created by James may be viewed as a direct successor to Ward's 'pill and drop'.

The Ferment of Knowledge is an appropriate title for a series of studies in the historiography of eighteenth-century science.⁸³ In this publication health, disease and medical care are discussed alongside natural philosophy, psychology, mathematics, science and technology. Bynum, in particular, emphasised the contributions of medical thought, teaching and experimentation to a medical enlightenment. The importance of the dictionary in communicating medical knowledge at this time will be demonstrated with specific subjects such as fever and antimony and will also be considered in more general terms in Chapter 4. The contribution that James's dictionary made to a medical enlightenment will be assessed by considering James's views on disease, the emphasis given to the teachings of Herman Boerhaave (1668-1738) in Leiden and by exploring for the first time the relationship of James with Boerhaave. Circumscribed accounts of superstition, alchemy and astrology will be used to judge the extent to which the dictionary was an enlightened publication. The dictionary will be assessed in terms of being up to date with contemporary medical knowledge.

Knowledge and the production of knowledge in the eighteenth century were held to be male attributes.⁸⁴ A view on style and genre in the thesis will come from a study of the main text of the dictionary. The use of personal pronouns such as 'I' and 'we' and the expressions of personal views and experience are relevant. Evidence of female practitioners will be sought in the preface, where two pages are devoted to 'ladies'

⁸³ George S. Rousseau, Roy Porter, eds., *The Ferment of Knowledge* (Cambridge: Cambridge University Press, 1980).

⁸⁴ Miriam Brody, *Manly Writing: Gender, Rhetoric, and the Rise of Composition* (Carbondale: Southern Illinois University, 1993), pp. 42-43.

contributions to medical knowledge in their writings, in midwifery, and a number of named women authors are noted. Many of these were associated with specific therapies.⁸⁵ The numerous illustrations in the dictionary will be considered as having a gender bias. The masculine nature of the dictionary will be seen to represent the hard masculinity of James's commercial life, beginning in Birmingham and developed in London. It is interesting to note that 1740 has been identified as a crisis point in distinguishing between the hard and soft features of masculinity when importance of politeness became stressed.⁸⁶ The limited evidence of James's social life does not suggest a polite gentleman.⁸⁷

It has been stated that the front matter of a dictionary is seldom read by dictionary users, but aims to establish the authority of the work and lend it prestige.⁸⁸ Arthur Sherbo (1918-2010) has been quoted as saying that he could not 'stomach' reading the entire preface of *A Medicinal Dictionary*. In this thesis the extensive preface on the history of medicine, written by James, will be seen as an unusual feature of the dictionary and I will discuss this in Chapter 4. Similarly, the end matter in the first and third volumes with numerous copper plate engravings has largely been ignored. In their introduction Bynum, Lock and Porter made the point that print made a particularly powerful impact on the spread and advance of medical knowledge through the crucial importance of standardised anatomical and physiological illustrations.⁸⁹ The source material and the production of these illustrations

⁸⁵ Preface to *A Medicinal Dictionary*, pp. 50-51.

⁸⁶ Karen Harvey, Alexandra Shepard, 'What Have Historians Done with Masculinity? Reflections on Five Centuries of British History circa 1500-1950', *Journal of British Studies*, 44 (2005), 274-280.

⁸⁷ Karen Harvey, 'The History of Masculinity, Circa 1650-1800', *Journal of British Studies*, 44 (2005), 296-311, p. 301; Philip Carter, *Men and the Emergence of Polite Society, Britain 1660-1800* (Harlow: Pearson Education, 2001), p. 23.

⁸⁸ Sidney Landau, *The Art and Craft of Lexicography*, 2nd. edn (Cambridge: Cambridge University Press, 2001), p. 148.

⁸⁹ William F. Bynum, Stephen Lock, Roy Porter, eds., *Medical Journals and Medical Knowledge, Historical Essays* (London: Routledge, 1992).

will be considered in Chapter 3 and their contribution to a medical enlightenment will be evaluated in Chapter 4.

In summary, the appearance of a large, expensive medical dictionary in three folio volumes soon after the publication of the *Proposals* in 1742 was a major publishing event. The antecedents, contents and consequences of this publication require a more detailed examination than has hitherto been done. The significance of James's background is of key importance in understanding how a substantial publication came to be written by a relative outsider. The background behind the move of James from Birmingham to London in mid-career has been poorly researched but may highlight some of the difficulties of medical practice in the provinces. In contrast, how James became established relatively easily in London needs to be explored against the prevailing medical and publishing marketplace. The relationship of Samuel Johnson and James in Birmingham and in London requires a re-evaluation to decide how significant it was for James's career. A vital question to be answered is the extent to which the publisher, Thomas Osborne, was essential, not just for the initiation of the project, but also for the production of the dictionary, including the resources needed and for facing the problems arising during the production of the dictionary. The value and importance of the dictionary warrant a new assessment in terms of its content, its contribution to the Enlightenment and its influence on later medical dictionaries. The thesis will consider the dictionary as an innovative successor to earlier medical dictionaries, an inspiration to subsequent publications and worthy of study today for the wealth of information about eighteenth-century medicine.

In Chapter 1 I have situated James's dictionary in the context of other medical dictionaries and encyclopaedias of the eighteenth century and outlined how medical

dictionaries evolved from glossaries and from herbals. Work published in this area has demonstrated the development of a perceived need to classify knowledge and the development of a taxonomic mind, both being features of the Enlightenment. In Britain, as well as in France and Germany, writers strove to impose an ordered structure on humankind's knowledge of the natural and social world, but medical dictionaries have been less explored than general encyclopaedias or language dictionaries. This chapter therefore assesses medical dictionaries in particular, extending our understanding of the taxonomic mind in relation to medical knowledge. Moreover, it places James's dictionary in this context, comparing and contrasting his content and style to other works. In so doing, this chapter demonstrates that James's work was certainly influenced by both general trends in dictionaries and the narrower genre of the medical dictionary, but also represented a step-change in portraying medical knowledge. This suggests revisions to our understanding of the chronology of the dictionary genre and the place of medical knowledge in the wider Enlightenment.

In Chapter 2 I have reviewed the making of James. The limitations and benefits of biography in explaining how *A Medicinal Dictionary* came to be written and published are explored. The effect that James's dictionary had on the future careers of those primarily involved, namely James, Thomas Osborne and Samuel Johnson, is considered. This is examined as a series of interconnecting networks operating before and after James went to London. Firstly, James's rural background and his Lichfield networks focus on a possible link between Sir John Floyer and James and an explanation for James's choice of a career in medicine rather than in farming. Secondly, networks in Oxford and their influence on James's medical training and interests in medical history and chemistry are considered,

together with his linguistic skills. Thirdly, the medical networks in the Midlands are examined. The question of why James's time in Birmingham (1730-40) was apparently unsuccessful, as indeed was Johnson's, in comparison with the successful surgeon Edmund Hector (1708-1794), another pupil of the same school in Lichfield, are contrasted with other medical practitioners in the city. The evidence that James experimented with chemistry when in the Midlands is examined. The possible reasons for James moving to London in mid-career are considered and comparisons made with other medical migrants to London. The publishing networks involving Samuel Johnson, Thomas Osborne, Edward Cave and the Newberys are explored in relation to James's achievements. The background of James's social networks, his marriages and residencies in London and other properties are used to illustrate James's successful career.

In Chapter 3 I have considered the making of the dictionary and its timetable. Apart from the *Proposals*, little has been recorded on the plans made by James and the publisher, Thomas Osborne. The choice and compiling of headwords, the value of the definitions, the sources used and their provision are considered. I have examined two special features of the dictionary, the preface and the illustrations, in order to highlight innovative aspects of the dictionary. Evidence for a change in plan during the writing of the dictionary is noted and the hitherto unrecognised contributions of the printers explored.

In Chapter 4 I have evaluated the dictionary as making a significant contribution to the Enlightenment and to a medical enlightenment in the eighteenth century. The importance of the dictionary in the spread of medical knowledge is stressed and the dictionary is situated in the explosion of encyclopaedias and other multi-volume works which were a feature of the Enlightenment. The concept of a medical enlightenment is explored and the

strong influence of Herman Boerhaave assessed with reference to James. It will be noted that in its time the dictionary appears to have been well received and clearly had an influence in continental Europe, being translated into French and Italian, and was one of the critical forerunners to one of the most important publications of the Enlightenment, the *Encyclopédie*. The problem of the relative neglect of the dictionary in later times is addressed by comparison with previous evaluations and assessments. The limitations of these previous assessments, the personal style used by James, whether the dictionary was up to date, the problems encountered by the encyclopaedic entries and the comprehensiveness of the dictionary are explored. How James's dictionary related to other eighteenth-century medical dictionaries, to Johnson's dictionary and to other publications by James is considered. Finally, the influence of the enlightenment on the dictionary is examined through a study of beliefs in alchemy, astrology, magic and superstitions as recorded in the dictionary.

The Conclusions show the importance of James's farming background, the influence of Lichfield Grammar School, his early medical contacts and Oxford University. It also shows the previously unrecognised contact with Herman Boerhaave and stresses the importance of the lifelong friendship with Samuel Johnson. The early background of James is compared with other authors of medical dictionaries published in England in the eighteenth century, where single authorship was normal. In considering James's characteristics, indications of an independent mind, linguistic skills and entrepreneurship is shown. Although James may have been late in developing social skills and a medical practice, his first writings and first experiments with antimony date to this period in the Midlands. The beginning of James's career in London remains uncertain but the

importance of Samuel Johnson, Thomas Osborne, John Newbery and, perhaps, Edward Cave, will be stressed as important contacts. His publishing activities and the subsequent production of his fever powders are shown to be key elements of his successful career in London. The purpose of the dictionary is considered as an inclusive dictionary and reference book, in contrast to previous medical dictionaries by Blankaart (an alternative to Latin/Greek Dictionaries), and Quincy (promoting Newtonian ideas), and a subsequent medical dictionary by Motherby (a short cut to old and new ideas and for use in a medical emergency). The special features of James's dictionary that I identified include its overall size, the detailed preface and the inclusion of biographies, a considerable increased number of headwords, the generous illustrations and the extensive encyclopaedic entries. None of these, apart from the biographies, have previously been studied in depth. As a result of this study, the dictionary is shown to be a typical and important publication of the Enlightenment, incorporating some aspects of significant predecessors such as Harris's *Lexicon* and Chambers's *Cyclopaedia* and Blankaard's and Quincy's medical dictionaries. Today it may be considered to have a cultural heritage in the recording of a selection of ancient terms and theories together with an extensive summary of medical knowledge of the eighteenth century. The legacy of the dictionary is displayed by its influence on Diderot's *Encyclopédie*, on James's subsequent publications and on succeeding medical dictionaries.

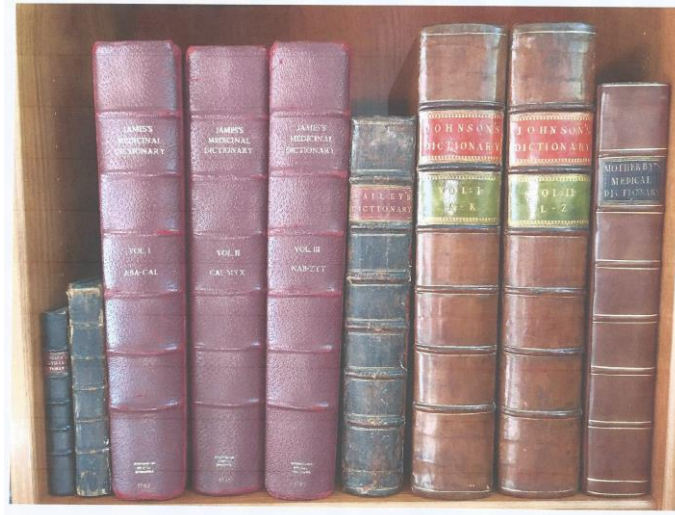
Chapter 1. *A Medicinal Dictionary* in Context

The medical dictionary compiled by Robert James is an illustrated encyclopaedic dictionary with an extensive coverage of medical terms, medical practice, a history of medicine and many biographies. It was the third medical dictionary to be published in English, and the second to be compiled in England. It has been considered the ‘largest, most exhaustive and most valued medical dictionary written in English prior to the early nineteenth century’.¹ Though James’s dictionary was large in its time, the number of headwords is small in comparison with modern medical dictionaries. In this chapter I will consider the history of medical dictionaries, their evolution from glossaries of ‘hard words’ and their relationship with herbals and technical dictionaries. The early use of the vernacular in medical dictionaries in England compared with the rest of Europe will be noted. I will examine what makes James’s dictionary so comprehensive and distinctive and, in particular, consider the purpose of the numerous encyclopaedic entries. Furthermore, any common characteristics of the authors and publishers of medical dictionaries will be sought.

Medical Dictionaries

¹ Garrison, Fielding H., Leslie T. Morton, *Morton’s Medical Biography* (Garrison and Morton), 5th edn, ed. by Jeremy M. Norton (Farnham: Scholar Press/Ashgate, 1991). *A Medical Bibliography*, Garrison and Morton, 6799.

Figure 1.1: Some Eighteenth-Century Dictionaries



a b c d e f

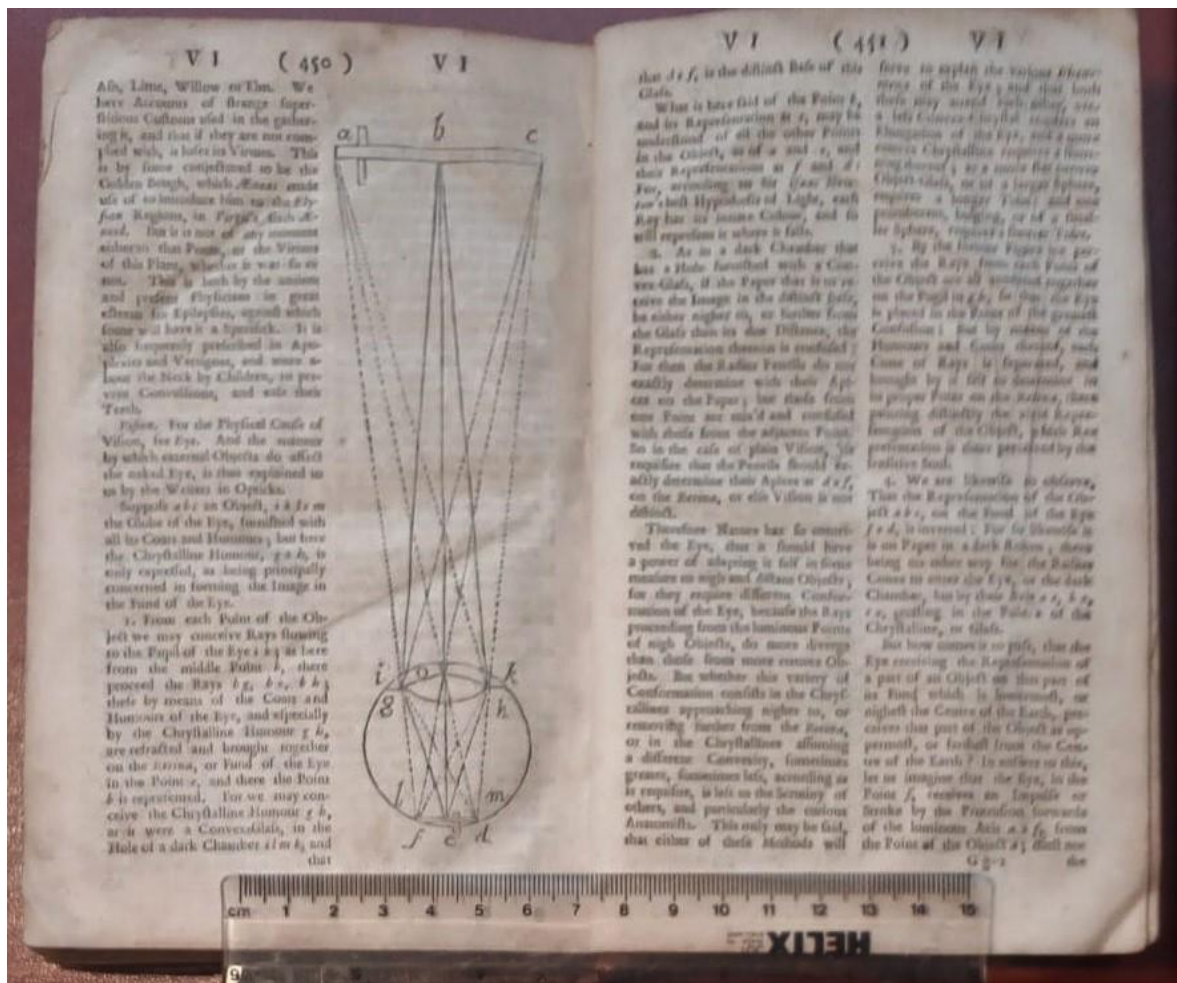
- a. Stephen Blankaart, *The Physical Dictionary* (London: J. Gellibrand, 1684).
- b. John Quincy, *Lexicon Physico-Medicum*, 2nd edn (London: E. Bell, W. Taylor, J. Osborn, 1722).
- c. Robert James, *A Medicinal Dictionary* (London: T. Osborne, 1743-45).
- d. Nathan Bailey, *Dictionarium Britannicum*, 2nd edn (London: T. Cox, 1736).
- e. Samuel Johnson, *A Dictionary of the English Language*, 4th edn (London: E. Strahan et al., 1773).
- f. George Motherby, *A New Medical Dictionary*, 2nd edn (London: J. Johnson, G. & J. Robinson, A. Hamilton, J. Murray, 1785).

The distinctive feature of James's dictionary is its size with the three folio volumes (page size 25 x 41cms) physically towering over the two earlier English medical dictionaries by Blankaart and Quincy. The single octavo volume of Blankaart (1684) (page size 11 x 17 cms) contained 2,675 headwords, rising to 6,200 headwords in the 7th edition (1726); Quincy started with 3,014 headwords in 1719 (page size 12 x 19.5 cms) with a small increase to 3,270 in the 5th edition (1736); James's dictionary contained 14,330 headwords and John Barrow, whose *Dictionarium Medicum Universale* (London: T. Longman, A. Millar, 1749) (not shown) was derived from James's, had a small increase to 15,500. The

single folio of George Motherby (page size 23 x 37 cms in the second edition shown) contained 13,800 headwords in its first edition (1775). In figure 1.2 are shown comparable pages from Blankaart (1684) and Quincy (1719) and a single page of *A Medicinal Dictionary*. The page from James's dictionary illustrates a typically clear lay-out and different fonts with a botanical entry (kidney vetch or lady's finger), Greek etymology and cross-referencing in addition to various items of *materia medica*.

Blankaart (1684) pages 118-119 showing 'Ephidrosis' to 'Epiglottis'





A page from *A Medicinal Dictionary* from 'Anthracites' to 'Antilobium'

This graphic illustration of the changes in medical dictionaries in the eighteenth century fails to show the long antecedent history of previous attempts to explain words used in medicine. In this chapter, I will explore the early genre of medical dictionaries evolving out of glossaries, almanacs and herbals, I will consider the problem of ‘hard words’, and then move on to consider the use of the vernacular and the separation of medical from technical dictionaries. The problem of encyclopaedic entries within dictionaries, and the potentially conflicting method of organising knowledge, will be explored both in this chapter and in Chapter 4. Attention will be drawn to the distinctive inclusion of biographies within James’s dictionary. I will clarify why it was written in English and, in broader terms, where the dictionary sits within the field of medical publishing and its contribution to the dissemination of medical knowledge. In this way, James’s dictionary will be placed within the evolutionary process of medical dictionaries.

English Language and Medical Dictionaries

English language dictionaries have a longer history, dating back to the sixteenth century, so the absence of any medical dictionary published in Britain before 1684 needs to be considered. The first dictionaries specialising in medical terminology developed in continental Europe before Britain, one of the earliest being written by Symphorien Champier, a Lyonnese doctor, in 1508.² Other examples of early medical dictionaries are Henri Estienne, *Dictionarium Medicum* (1564) in Switzerland, Jean de Gorris (Joannes Gorraeus) *Definitioinum Medicarum* (1564) in France, Bartolomaeus Castellus, *Lexicon*

² András László Magyar, *Section Language and Discourse LDMDI*, www.diacronia.ro/indexing/details/V478/pdf 2009, pp. 179-189; The first printed medical dictionary has sometimes been given as Simone Cordo’s *Synonyma Medicinae* (1473), a book that merely lists herbs and other drugs under their Greek, Arabic and Latin names.

Medicum Graeco-Latinum (1598) in Italy, and Stephen Blankaart, *Lexicon Medicum Graeco-Latinum* (1679) in Holland. The absence of medical dictionaries published in Britain may have been the result of the common use of Latin in Europe and to the presence of more advanced centres of medical education in continental Europe, such as Padua and Bologna in the 1500s, Paris, Leiden and Montpellier in the 1600s and Göttingen in the 1700s.³ Twenty-four different European medical centres, Leiden and Padua being the most popular, were noted for Danish-Norwegian students of medicine 1536-1660. None of these centres were in England or Scotland.⁴ The Edinburgh medical school was founded in 1726 but no medical dictionary was produced at that time in Scotland. So it was not until writing in the vernacular became widespread that English medical dictionaries were required. However, it can be argued that other publications in the seventeenth and early eighteenth centuries may be considered as precursors to medical dictionaries, including books with lexicographical features and alphabetisation and glossaries.⁵

In this chapter several distinctive features will be considered individually as contributing to the character of a medical dictionary and which may have influenced James. These include hard words, terms from classical literature, herbal traditions, and

³ Andrew Cunningham, 'The Bartholins, the Platters and Laurentius Gryllus: the Peregrinatio Medica in the Sixteenth and Seventeenth Centuries' in, *Centres of Medical Excellence?*, ed. by Ole Peter Grell, Andrew Cunningham, John Arrizabalaga (Farnham: Ashgate, 2016), pp. 3-16.

⁴ Ole Peter Grell, '“Like the Bees, who Neither Suck nor Generate their Honey from One Flower”; the Significance of the *Peregrinatio Academica* for Danish Medical students in the Late Sixteenth and Early Seventeenth Centuries' in, *Centres of Medical Excellence?* ed. by Ole Peter Grell, Andrew Cunningham, John Arrizabalaga (Farnham: Ashgate, 2016), pp. 171-189.

⁵ Roderick McConchie, *Discovery in Haste; English Medical Dictionaries and Lexicographers, 1547-1796* (Berlin: De Gruyter, 2019), pp. 20-21 and 48-67. Examples of books: John Sadler, *Enchiridion Medicum* (1657), Lazare Rivière, *The Practice of Physick* (1655), Thèophile Bonet, *A Guide to the Practical Physician* (1684), and James Douglas, *A Catalogue of Simple Medicines that are Fit to be Used in the Practice of Physick and Surgery* (1724). Examples of glossaries: John Tanner, *The Hidden Treasure of the Art of Physick* (1659), Gervase Markham, *Cheape and Good Husbandry* (1614), John Woodall, *The Surgeon's Mate* (1617), Robert Johnson, *Enchiridion Medicum* (1684), Randle Holme, *The Academy of Armoury* (1688), Daniel Turner, *The Art of Surgery* (1722), Anon., *Prosodion Chirurgica* (1729), John Sparrow, *Observations in Surgery* (1739).

encyclopaedic entries and, like all dictionaries, a variable reliance on previous publications.

Hard Words

English medical dictionaries in particular were based on hard words and herbal traditions. The term ‘hard words’ would appear to have been used for the first time in John Day’s glossary, being a translation of a French work referring to ‘*mots difficiles*’.⁶ The earliest linguistic dictionaries in England, dating back to the end of the sixth century, were in fact glossaries of difficult words.⁷ These glossaries included medical terms used by ancient writers such as Hippocrates and Galen, and later the physicians of Arabia. Bilingual Latin-English and English-Latin dictionaries developed in the fifteenth century, and English dictionaries in the seventeenth century, when there was a rapid expansion of the English vocabulary with many terms imported from both ancient and modern languages. An early example of the use of hard words was a Latin-English *Bibliotheca* compiled by Thomas Elyot, in which he incorporated ‘proper terms belonging to physike and surgerie’.⁸ Likewise, Charles Estienne produced *Dictionarium Latino-Gallicum* in Paris between 1550 and 1560. The first monolingual English dictionary, Robert Cawdrey’s *A Table Alphabeticall* (1604), offered help with the understanding of hard unusual English words, borrowed from the Hebrew, Greek, Latin or French. This dictionary was based on Thomas Thomas’s Latin-English dictionary *Dictionarium Linguae Latinae et Anglicanae* (c.1588) and Edmund Coote’s *The English School-Master* (1596), and continued with John Bullokar’s *English Expositor* (1616), Henry Cockeram’s *English Dictionary* (1623) and

⁶ John Day, *A Gatherying of Certayne Harde Words in the Newe Testament, with Their Exposition* (1551).

⁷ Ronald A. Wells, ‘Origins of English Lexicography’ in, *Dictionaries and the Authoritarian Tradition* (The Hague: Mouton & Co., 1973), pp. 13-18.

⁸ Thomas Elyot, *English Bibliotheca* (London: Thomae Bertheleti, 1542).

Blount's *Glossographia* (1656).⁹ Hence these early English dictionaries established the hard words principle which had a long-lasting influence on English dictionaries continuing into the eighteenth century, including John Wesley's dictionary of 1764.¹⁰ The evolution from a hard words dictionary into a more general linguistic dictionary was begun by Edward Phillips's *New World of English Words* (1658) and Elisha Coles's *An English Dictionary* (1676), and developed, for example, by 'J.K.' in *A New English Dictionary* (1702). The hard words tradition was possibly more important to the evolution of these general dictionaries than specialised medical dictionaries, where terms remained rooted in Latin and Greek.¹¹ However, it is of interest that, in emphasising 'difficult terms', Quincy in his medical dictionary was continuing this hard words tradition.¹²

Botany and Herbals

Another important influence on James which I investigate is botany which is one of the main subjects in James's dictionary, as noted on the title page (Figure 1.2).

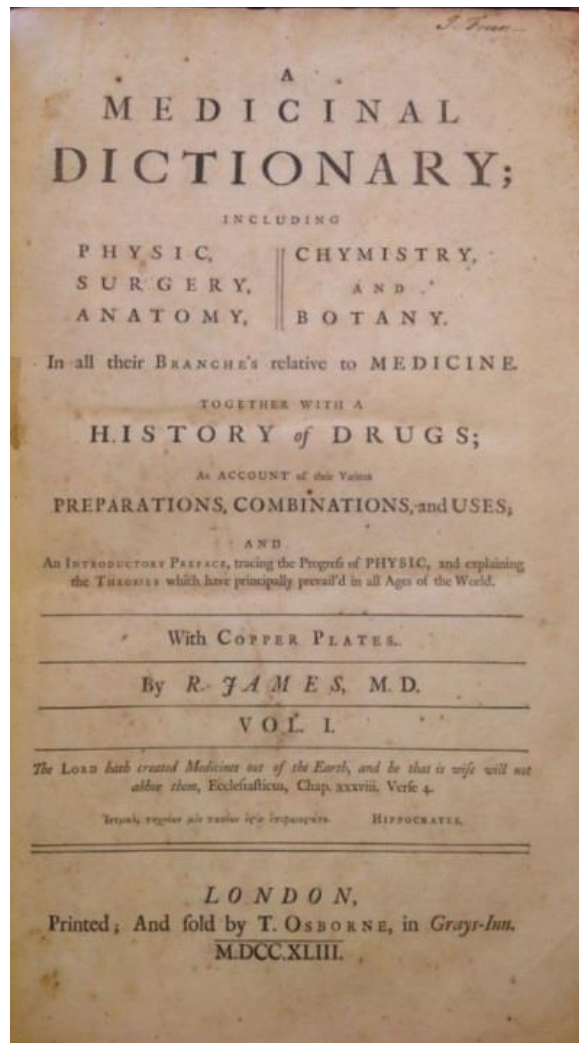
⁹ Richard Yeo, *Encyclopaedic Visions* (Cambridge: Cambridge University Press, 2001), p. 19.

¹⁰ John Wesley, *The Complete English Dictionary Explaining Most of the Hard Words which are Found in the Best English Authors* (London: William Pine, 1764).

¹¹ Rod McConchie, *Lexicography and Physicke* (Oxford: Clarendon Press, 1997), p. 115.

¹² John Quincy, *Lexicon Physico-Medicum* (London: E. Bell, W. Taylor, J. Osborn, 1719).

Figure 1.3: Title Page of *A Medicinal Dictionary*



Botany is a major topic within the dictionary, amounting to 21% of the headwords. The 28-page entry on 'Botany' itself is one of the longest in the dictionary. I have also noted the importance of the resources for this subject in Chapter 3. Several observers, such as Roger, have commented on the most conspicuous achievement of natural history in the eighteenth century was the work done in the field of classification and taxonomy.¹³ The botanical

¹³ Jacques Roger, 'The Living World' in, *The Ferment of Knowledge: Studies in the Historiography of Eighteenth-Century Science*, ed. by G.S. Rousseau, Roy Porter (Cambridge: Cambridge University Press, 1980), pp. 255-283.

nomenclature in James's dictionary is based on Joseph Pitton de Tournefort (1656-1708) rather than on *Systema Naturae* (1735) by Carl Linnaeus (1707-1778). At the time of the writing of the dictionary the binomial Linnean classification was being introduced and it is of interest that James refers to Linnaeus under 'Botany':

a competent judge of these matters, affirms he has found the *Genera Plantarum* in the most generous manner; since he was the first of all the botanists who called in to his assistance all the parts of the plants which concur to fructification, and gave so accurate and minute description of them, as to render the arts of sculpture and colouring almost entirely useless.

This strong emphasis on botany may be explained to some extent by personal selection, but also by the influence of herbals and herbal medicines. Herbals were a collection of descriptions of medicinal plants, sometimes with animal and mineral substances as occurs in a pharmacopoeia. They developed alongside and probably influenced medical lexicography.¹⁴ Herbals had a longer tradition than medical dictionaries, the earliest written records dating from after 1800 BCE, with the Ebers, Hearst, Kahun and Edwin Smith papyri.¹⁵ The *Materia Medica* of the ancient Greeks date from the fourth to first centuries BCE.¹⁶ Herbals were compiled by ancient Greek, Latin and Arabic authors, the oldest surviving manuscript being the Juliana Anicia of c. AD 512, which contains the herbal of Pedanius Dioscorides (c. AD 40-90) with entries in alphabetical order.¹⁷ This occurred despite Dioscorides himself complaining that some earlier writers had done a disservice to physicians by classifying medicines alphabetically, thereby separating those that had

¹⁴ Rod McConchie, 'The Early Lexicographers: Elyot to Bullokar' in, *Lexicography and Physicke: the Record of Sixteenth-Century English Medical Terminology* (Oxford: Clarendon Press, 1997), p. 100.

¹⁵ Ernest W. Budge, *The Divine Origin of the Craft of the Herbalists* (London: Society of Herbalists, 1928), pp. 26-28.

¹⁶ Charles Ambrose, 'A Short History of Medical Dictionaries', *The Pharos of Alpha Omega Alpha-Honor Medical Society*, 6 (2005), 24-27.

¹⁷ Frank J. Anderson, *An Illustrated History of the Herbals* (New York: Columbia University Press, 1977), pp. 7-15. The alphabetical classification used by Dioscorides is discussed by Sophia Rhizopoulou, Alexandra Katsaeou, 'The Plant Material of Medicine', *Advances in Natural and Applied Sciences*, 2 (2008), 94-98.

common effects. The first herbal to be printed was *De Viribus Herbarum* by Macer Floridis (alleged pseudonym of Odo de Meung, 11th century physician) in 1477, being based on *Naturalis Historia* by Pliny (AD 77-79), though the term ‘herbal’ did not come into use until the beginning of the sixteenth century.¹⁸ Development of herbals occurred in Germany, the Low Countries, Italy, Spain, Portugal, Switzerland, France and England.¹⁹ Some of the last alphabetical arrangements can be found in *Herbario Nuovo* (1585), compiled by Castore Durante (1529-1590) in Italy.²⁰ Most versions of Dioscorides in Europe were non-alphabetical, and Hieronymous Bock (*Kreüter Buch*, 1539) also broke from the prevalent alphabetical system, using arrangements based on appearances and qualities of plants. Similarly, Matthias L’Obel (1538-1616), a Flemish physician in *Plantarum seu Stirpiu Icones* (1581) classified plants according to leaf structures,²¹ and Leonhard Thurneysser (1531-1595/6) in *Historia* (1578) in the astrological school of medical botany, according to strength and activity of plants.²² *A New Herball* (1551) by William Turner (1509/10-1568) has been considered to mark the start of English botany.²³ Turner was a staunch Nonconformist physician who was concerned that English should be used in the text, though plants were arranged alphabetically according to their Latin names.²⁴ Even earlier examples of the use of the vernacular were in *Herbarius Latinus* (1484) and *Der Gart* (1485), both written in German. One of the later great English herbals

¹⁸ Frank J. Anderson, *An Illustrated History*, p. 2.

¹⁹ Agnes Arber, *Herbals: their Origin and Evolution*, 3rd edn (Cambridge: Cambridge University Press, 1986).

²⁰ Anderson, *ibid* pp. 187-192.

²¹ Anderson, *ibid* p. 177.

²² Anderson, *ibid* pp. 181-186. Turneysser became wealthy from the sale of his own medicine.

²³ McConchie, *Lexicography and Physicke*, pp. 29-30.

²⁴ William Turner, *A New Herball*, ed. by George Chapman, Marilyn Tweedle (Ashington: Mid-Northumberland Arts Group and Carcanet Press, 1989), pp. 14-17.

published in 1640 was compiled by John Parkinson (1567-1650), who described more than 3,800 plants in English.²⁵

The importance of herbals declined but did not disappear in the seventeenth century as studies of systematic botany increased.²⁶ Later in the eighteenth century, chemistry became the more dominant scientific subject. Frequent references were made by James to Dioscorides, Gerard²⁷ and Parkinson, but not to Culpepper (1616-1654). The absence of Culpepper may have been because of his emphasis on astrological botany.²⁸ Diseases were thought to be best treated by herbs of the planet opposite to the planet that caused them - for example diseases of Jupiter were treated by herbs of Mercury. Perhaps because of the continuing interest in astrology, modified versions of Culpepper's *Complete Herbal* (1653) continue in print today. Another controversial contribution made by Culpepper was a translation into English of the Royal College of Physicians' *Pharmacopoeia*. This upset the College because it also gave information on how the medical preparations should be used.²⁹ A more general consideration of astrology within James's dictionary is included in Chapter 4. Thus the strong emphasis on botany in the dictionary reflects the contemporary importance of herbals and herbal medicines.

Table 1.1 Headwords in different subject categories in *A Medicinal Dicitonary*

²⁵ John Parkinson, *Theatrum Botanicum* (London: Thomas Cote, 1640).

²⁶ Arber, *Herbals*, p. 138. Nevertheless, publications on medical botany continued, as for example John Stephenson, James M. Churchill, *Medical Botany*, new edn (London: John Churchill, 1834-36) which described the plants of the London, Edinburgh and Dublin Pharmacopoeias, and continue today, for example Andrew Chevallier, *The Encyclopedia of Medicinal Plants* (London: Dorling Kindersley, 1996).

²⁷ John Gerard, *The Herball, or General History of Plants* (London: Adam Islip, Ioice Norton, Richard Whitakers, 1633).

²⁸ Arber, *Herbals*, p. 261.

²⁹ Benjamin Woolley, *The Herbalist: Nicholas Culpepper and the Fight for Medical Freedom* (London: Harper Collins, 2004), pp. 289-295; Clare J. Fowler, *Pharmacopoeia Londinensis 1618 and Its Descendants* (London: Royal College of Physicians, 2018), pp. 87-116.

Category	Number	%
medical (anatomy, physiology, pathology; excluding therapeutic)	3,876	27.1
botany and botany-related	3,063	21.1
cross-referenced to another headword	1,836	12.8
miscellaneous (weights and measures, instruments, etc.)	1,463	10.2
therapeutic	1,318	9.2
chemistry, chemistry-related, and geology	1,124	7.9
animal and animal-related	898	6.3
food and drink	443	3.1
weather, atmosphere and superstition	173	1.2
named people and sects	71	0.5
alchemy	50	0.4
unknown (James did not know the meaning of the headword)	24	0.2
Total	14,330	100

Categories having some connection with medicine or lifestyle are botany, zoology, food and drink, and chemistry. This broad inclusive definition of what might be constituted as a medical term, as used by James, illustrates the dilemma in defining the words ‘medicine’

or 'medicinal'.³⁰ Alchemy and superstitions are rarely noted. The importance of cross-referencing is considered in the section on encyclopaedic entries - see below.

Language

Turning now to the important choice of language, the use of the vernacular was a feature of medical books published in England in the eighteenth century and James's dictionary is no exception. The title page of James's dictionary is clearly written in English except for a quotation from Hippocrates in Greek. At the time of the introduction of printing, Latin was the *lingua franca* of Europe, and Latin was the learned language of the undivided church. This perpetuated the exclusivity of the well-educated class, mainly men, but also allowed wide dissemination of medical knowledge in Europe. Discarding of Latin and publishing in the vernacular was associated with the rise of Protestantism in Northern Europe, especially in Holland. But even in Holland the compulsory use of Latin in universities was not abolished until 1876.³¹ In Europe, Paracelsus (1493-1541) was exceptionally early with his insistence on writing and lecturing in German. The exclusivity of the Royal College of Physicians, who had published *Pharmacopoeia Londinensis* (1618) in Latin without indicating the use of the medicines, was broken by Culpepper's *A Physicall Directory*.³² Culpepper hoped 'it would make every man his own physician, as the translation of the Bible made every man his own theologian'.³³ The Royal College of Physicians fined John Radcliffe (1650-1714) forty shillings for not writing up his cases in

³⁰ Roger Cooter, Claudia Stein, *Writing History in the Age of Biomedicine* (New Haven: Yale University Press, 2013), p. 73.

³¹ Anne Dykstra, 'Joost Halbertsma, Latin and the *Lexicon Frisicum*' in, *Adventuring in Dictionaries*, ed. by John Considine (Newcastle upon Tyne: Cambridge Scholars, 2010), pp. 239-241.

³² Nicholas Culpeper, *A Physicall Directory* (London: Peter Cole, 1649).

³³ Christopher Hill, *The World Turned Upside Down: Radical Ideas During the English Revolution* (London: Penguin, 1975); Elizabeth L. Furdell, *Publishing and Medicine in Early Modern England* (Rochester: University of Rochester Press, 2002), p. 6.

Latin as he believed that prescriptions should be in English to be intelligible.³⁴ Some of the pressure to write in Latin, however, may have been commercial, as, for example, Dr Caius (1510-1573) was concerned that books in English would not be bought by foreign buyers.³⁵ Similarly, the relatively recent changeover to the vernacular was well illustrated by Thomas Sydenham (1624-1689), known as the English Hippocrates. Sydenham wrote his major works in English and they were translated into Latin for publication;³⁶ only for the whole process to be reversed in 1696.³⁷ Somewhat earlier, articles in the *Philosophical Transactions of the Royal Society* from 1665 were mostly published in English, apart from some early ones in Latin. Though the change from Latin to the vernacular took place over a long period of time it became a distinctive feature during the eighteenth century and by the latter part of the century the majority of British medical books were published in English.³⁸

It is therefore not surprising that medical dictionaries began to be published in the vernacular in the latter part of the seventeenth century. As already noted, specialised medical dictionaries developed in continental Europe before they did in Britain. Medical dictionaries written in the vernacular were actually a later feature in countries other than Britain, for example, in Germany Albrecht van Haller's *Medicinisches Lexicon* (1756), and in France Pierre-Hubert Nysten's *Dictionnaire de Médecine* (1810). One of the first medical dictionaries written in English was added to the end of a translation of Jean de

³⁴ Furdell, *ibid.*, p. 27.

³⁵ Furdell, *Publishing and Medicine*, p. 37.

³⁶ Thomas Sydenham, *Observationes Medicae* (London: Andrew Clarke, 1676); Thomas Sydenham, *Opera Universa* (London: Walteri Kettilby, 1685, 1688).

³⁷ *The Whole Works of that most Excellent Practical Physician, Dr Thomas Sydenham*, trans. by John Pechy (London: Richard Wellington, Edward Castle, 1696); John Wiltshire, *Samuel Johnson in the Medical World* (Cambridge: Cambridge University Press, 1991), p. 92.

³⁸ This totalled 207 out of 238 books published in England between 1640 and 1660. Furdell, p. 38.

Renou's *A Medicinal Dispensatory* (1657).³⁹ Other glossaries were produced at about the same time.⁴⁰ Another claim to be the first medical dictionary in English was a publication by Lazarus Riverius from Montpellier in 1655.⁴¹ Some nine years after the anonymous *A Physical Dictionary*, the first successful medical dictionary written in English, and published in England, Stephen Blankaart's dictionary, had a similar title, *The Physical Dictionary* (1684). This was a translation of Blankaart's *Lexicon Medicum Graeco-Latinum* (1679).⁴² Blankaart (1650-1704) was a Dutch apothecary/physician who practised medicine in Amsterdam. His dictionary had a long active life of more than a century and a half, and at least twenty editions. The second successful medical dictionary published in English and the first medical dictionary to be compiled in England, was *Lexicon Physico-Medicum* (1719) by John Quincy (d. 1722). This was in print for nearly a century, being continued to the 11th edition in 1811, revised by Robert Hooper. Quincy was an apothecary friend of Richard Mead (to whom James's dictionary was dedicated) and based his dictionary on Bartholomaeus Castellus's *Lexicon Medicum Graeco-Latinum*, probably using a revised edition.⁴³

The vernacular was not necessarily used for medical terminology. Several reasons probably contributed to medical, botanical and legal terminology remaining rooted in Latin

³⁹ Jukka Tyrkkö, 'A *Physical Dictionary* (1675): the First English Medical Dictionary' in, *Selected Proceedings of the 2008 Symposium on New Approaches in English Historical Lexis (HEL-LEX2)*, ed. by R. W. McConchie, Alpo Honkapohja, and Jukka Tyrkkö (Sommerville, MA: Cascadilla Proceedings Project, 2009), p. 171-187; Jean de Renou, *Medicinal Dispensatory* (London: J. Streater, J. Cotrell, 1657).

⁴⁰ Tyrkkö, *A Physical Dictionary*, p. 182.

⁴¹ Lazarus Riverius, *The Compleat Practise of Physic, in Eighteen Several Books . . . the Eighteenth Book is a Physical Dictionary* (London: Peter Cole, 1655).

⁴² Stephen Blankaart, *Lexicon Medicum Graeco-Latinum* (Amsterdam: Johannis ten Hoorn, 1679).

⁴³ Bartholomaeus Castellus, *Lexicon Medicum Graeco-Latinum*, rev. by Jacob Pancraz Bruno (Lipsiae: Thomam Fritsch, 1713).

and Greek.⁴⁴ English was thought to be inadequate in the sixteenth and seventeenth centuries though it has been argued that Early English vocabulary was more than adequate for medical texts and for herbals. Botanical terminology was based on Pliny the Elder.⁴⁵ Carl Linnaeus (1707-1778), the Swedish physician and botanist, created what was virtually a new international Latin botanical language, and devised the binary nomenclature of plants based on Latin terms.⁴⁶ Linnaeus was an almost exact contemporary of James and, interestingly, part of his training was also in Leiden with Herman Boerhaave. It is considered that Latin and Latinate terms gave greater precision, in part arising from the stability of a dead language.⁴⁷ Latin terms also carried the accumulated prestige of classical learning and authority. Additionally, a debate arose during the sixteenth century on the use of Latin and Greek as opposed to Arabic anatomical terms. Yet some Arabic nomenclature survived in modified forms - for example 'nucha', 'basilica', 'cephalic', 'retina' and 'sesamoid' (the latter being the 'open sesame' of the story of Aladdin).⁴⁸ Hence the development of glossaries of Latin, Latinate, Greek and Arabic words to explain meanings, and the contribution to the evolution of the 'hard words' tradition as described above. The problem was addressed by James by the inclusion of an index at the end of volume III. A representative page is shown in figure 1.4 which includes both equivalent words (eg for the face) and also lists sub-categories (eg for fevers and fish).

Figure 1.4 A page from the index in *A Medicinal Dictionary*

⁴⁴ Anne McDermott, 'Early Dictionaries of English and Historical Corpora: in Search of Hard Words' in, *A Changing World of Words, Studies in English Historical Lexicography, Lexicology and Semantics*, ed. by Javier E. Diaz Vera (Amsterdam: Rodopi, 2002), pp. 197-226.

⁴⁵ William F. Stearn, *Botanical Latin*, 4th edn (Newton Abbot: David and Charles, 1992), p. 14.

⁴⁶ Alan G. Morton, *History of Botanical Science* (London: Academic Press, 1981).

⁴⁷ Roderick McConchie, *The Early Lexicographers*, pp. 14-61.

⁴⁸ Charles Singer, *The Evolution of Anatomy* (London: Kegan Paul, Trench, Trubner, 1925), pp. 78-81.

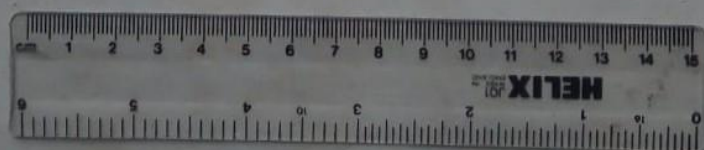
I N D E X.

Elephantis	See Preface, p. 51.	Fatmisi	See Obefitas
Elevation	Elevatio	Fawn	Dama
Elevator	Elevatorium	Febrifuges	Fibriluga
Eliviation	Elisivatio	Feet (Bath for the)	Pediluvium
Elk	Alce	(many)	Scolopendra
Elm (common)	Ulmus	(Sea many)	Scolopendra marina
Elutriation	Elutriatio	Fennel	Forniculum
Embucation	Embregma	Flower, and its Kinds	Nigella
Emerald	Smaragdus	Giant	Fenila
Emery	Smyris	(Hogs)	Peucedanum
Emetics	Emetica and Vomitoria	(Sweet)	Feniculum
Emmenagogues	Emmenagoga	(Water)	Myriophyllum
Emollients	Alterantia	(Wild)	Hippomarathrum
Empedocles	Preface, p. 7.	Fenugreek	Tænum Græcum
Empiric Sect	Ibid. p. 40; to 44.	Ferment	Fermentum
Emulsion	Emulsio	Fermentation	Alcohol and Fermentatio
Emunctory	Emunctorium	Fern (common Male)	Felix
Endemial	Endemius	(Female)	Felix Fæmina and Thelypteria
Endive	Cichorium	(leifer-branched)	Blechnon
Entaglia	Entalium	Ferret	Viverra
Enucleation	Enucleatio	Fever	Confuse Febris, Continua
Epidemical	Epidemius		Febris, Continua Febris,
Epilepsy	Echampsia and Epilepsia		Crymodes, Diurnus, Elo-
Epispasms	Epispastica		des, Epacnasticos, Epma-
Epithem	Epithema		didontes Puri, Epialos,
Ergulotic Medicines	Ergulotica		Phricodes, and Tritao-
Erasistratus	Pref. p. 35 to 38		phytes
Erd Shrew	Mus Araneus	Fevers, and their Kinds	Pyretos
Errhines	Errhina	(ardent)	Ibid.
Eruption (febrile)	Pyretos	(burning)	Causus
Eruption	Eruptio and Exanthemata	(continual)	Synochos and Pyretos
Eryngo, and its Kinds	Eryngium	(depuratory)	Depuratoria Febris
Esfalots	Cepa Ascalonica	(diary)	Diaria Febris and Ephemeræ
Efence	Efentia	(erratic)	Planetes Pyretos
Effential	Effentialis	(erysipelatous)	Erysipelas
Effleriph Effachali	Preface, p. 78.	(hectic)	Heûca
Etrabarani	Ibid.	(intercurrent)	Intercurrens Febris
Evacuation	Cenosis	(intermittent)	Pyretos, Quinquina & Proteus
Evaporation	Evaporatio	(miliary)	Miliaris Febris
Everlasting Flower	Amaranthoides	(petechial)	Petechialis Febris
Evil (Joint)	Pedarthrocace	(purple)	Purpura
(King's)	Scrophula	(quartan)	Quartana Febris
(Lousy)	Phthiriasis	(quotidian)	Quotidiana Febris
Euphorbus	Preface, p. 63.	(Salubrity of)	Pyretos
Evulsion	Evulsio	(Scarlet)	Scarlatina Febris
Exaltation	Exaltatio	(femittentian)	S-mittentiana
Exasperation	Exasperatio	(Stationary)	Stationaria Febris
Excipient	Excipiens	(tertian)	Tertiana Febris
Excrecence	Excrecentia		Matricaria
Excretion	Excretio	Feverfew, and its Kinds	Partheniastrum
Excussion	Excussio	(Balfard)	Fibra
Exercise	Exercitatio	Fibres	Ficus
Exhalation	Mephitis	Figs	Ibid.
Expectoration	Expectorantia	Fig-tree (Indian)	Caprificus
Expiration	Expiratio	(wild)	Scrophularia
Exploration	Exploratio	Figwort	Avellana
Explosion	Explosio	Filberts	Rhypos and Strigmentum
Expression	Expressio	Filth	Filtratio
Extenuation	Extenuatio	Filtration	Feniculum
Extracts	Extractum	Finkle	Digitus and Pterygion
Extraction	Extractio	Fingers	Erysipelas
Extravasated	Extravasatus	Fire (St. Anthony's)	Ignis
Extraversion	Extraversio	(chymical) and its Kinds	Passinaca marina
Extremities	Extremitates	Flaw	Pyrites
Eye	Albugo, Ancyloblepharon,	Stone	Abies
	Confusio, Crystallina,	Firr	Terpedo
	Disortio, Echinophthalmia,	Fish (Camp)	Merula
	Echlopsis, Ectropium,	(Cook)	Sepia
	Enaxorema, Encanthis,	(Cuttle)	Galcus
	Encauma, Epiploon,	(Hound)	Milvus
	Hypopyron, Hypophthalmus,	(Kite)	Squatina
	Iris, Ophthalmia, Ptilosis,	(Monk)	Passinaca marina
	Retina, Scirrhosis,	(Poison)	Purpura
	Sclerophthalmia, Scrophula,	(Rain-bow)	Lulus
	Strabismus, Tanaxis,	(Rock)	Gobius
	Trachoma, and Trichiasis.	(Scorpion)	Scorpius marinus
Eye, its Parts and Disorders	Oculus	(Shell)	Conchylia
Eye-bright	Euphrasia	(Socking)	Remora
Ezarahagni	Preface, p. 78.	(Tobacco-Pipe)	Acus
		Fissure	Fissura
		(Contra)	Contrafissura
		Five-fingers	Quinquifolium
		Flag (Corn)	Gladiolus
		(sweet)	Acorus
		Flatulencies	Flatus
		Flax	Linum
		(purging)	Linum Catharticum

F

F Ace
Fainting
Falcon
Fat

Facies
Deliquium
Falco
Adeps and Pinguedo.



Even a modern medical dictionary includes a forty-two page Latin-English glossary of anatomical terms,⁴⁹ and this is likely to remain necessary as medicine, in addition to botany and the law, continues to use specialised Latin terminology.

Technical dictionaries

The distinct genre of the medical dictionary is also illustrated by the separation of medical from other technical dictionaries. This occurred in the first half of the eighteenth century in England. John Harris's pioneering technical dictionary, for example, covered a wide range of topics including medicine (anatomy, chemistry and botany), but many of which (such as arithmetic, conicks, dialling, geography, heraldry mechanics, navigation optiks and painting) were not covered in subsequent medical dictionaries. The clear differences between a technical (Harris) and a medical dictionary (James) in the eighteenth century are illustrated in my Table 1.2.

⁴⁹ Stedman's *Medical Dictionary*, 5th edn (Philadelphia: Lippincott, Williams and Wilkins, 2005).

Table 1.2: Number of headwords by topic in a technical compared with a medical dictionary

Number of headwords by topic	Harris 1705 ⁵⁰	James 1743-45 ⁵¹
Anatomy	1072	1217
Agriculture/hortulane	7	rare
Arithmetick/algebra	195	–
Astronomy/doctrine of sphere	232	rare
Botany/natural history/meteorology	243	3209
Chymistry	286	941
Chyurgery/pharmacy/disease names	279	4910
Conicks (geometry)	79	–
Dialling (measuring with a dial)	72	–
Fortification/gunnery/military art	474	rare
Geography/chronology	119	rare

The total number of headwords in Harris was 5,240 but the number of anatomical entries was similar in the two dictionaries. Harris was the first to use the term ‘technical’ words and generally gave concise definitions without any etymologies.⁵² He was also innovative including four whole plates, two fold-out plates and many diagrams and tables. These illustrations provided a model for Chambers’s *Cyclopaedia* and probably for James’s dictionary.

⁵⁰ Harris’s *Lexicon Technicum*. Table taken from Jukka Tyrkkö, ‘A Physical Dictionary (1657)’ in, *Selected Proceedings of the 2008 Symposium on New Approaches in English Historical Lexis (HEL-LEX 2)*, ed. by R.W. McConchie et al. (Somerville, MA: 2009), pp. 171-187.

⁵¹ Robert James, *A Medicinal Dictionary* (London: T. Osborne, 1743-45).

⁵² Terence M. Russell, *The Encyclopaedic Dictionary in the Eighteenth Century*, vol. I, *John Harris, Lexicon Technicum* (Farnham: Ashgate Publishing, 1997). James gave etymologies for words derived from Greek.

Encyclopaedias and medical education

Another distinction to be considered is the difference between a dictionary and an encyclopaedia. The physical size of *A Medicinal Dictionary* has been noted. Several features make James's dictionary large in comparison with other medical dictionaries, including its ninety-nine page preface (discussed in Chapter 4), the number of headwords (14,330 compared with 3,270 in Quincy's 5th edition in 1736) and the number and length of the encyclopaedic entries. A specific example of an encyclopaedic entry, 'Auris', will also be examined in Chapter 4. The encyclopaedic nature of dictionaries has a long history, and the distinction between a dictionary/lexicon for word definition and an encyclopaedia for organising knowledge in a series of articles was unclear in the eighteenth century. This distinction continues to be debated, as noted by the comment 'the form is impure but the blend is remarkably happy'.⁵³ Although it has been suggested that dictionaries are encyclopaedias in disguise, today's encyclopaedias and dictionaries are considered to be two different genres.⁵⁴

Harris has been credited as being the first to distinguish between a word-book (dictionary) and a subject-book (encyclopaedia) but, interestingly, Chambers's *Cyclopaedia* was subtitled *An Universal Dictionary of Arts and Sciences*. Indeed, hard words benefit from explanations and illustrations, in addition to a simple definition or mere translation. In practice, most general and specialised dictionaries in the eighteenth century

⁵³ John Butt, *The Age of Johnson, 1740-1789*, ed. by Geoffrey Carnall (Oxford: Clarendon Press, 1979), p. 22.

⁵⁴ Henry Hitchings, *The World in Thirty-Eight Chapters or Dr Johnson's Guide to Life* (London: Macmillan, 2018), p. 133. Carey McIntosh, 'Eighteenth-Century English Dictionaries and the Enlightenment' in, *The Yearbook of English Studies* vol. XXVIII, *Eighteenth-Century Lexis and Lexicography* (1998), pp. 3-18.

included encyclopaedic entries. Johnson's, for example, was encyclopaedic.⁵⁵ He was determined that his dictionary would be read with profit and with pleasure, as well as being consulted.⁵⁶

Categories of dictionary and encyclopaedia styles therefore appear to have been mixed regularly. Scholarly dictionaries, such as those in medicine, have always tended to be more encyclopaedic. Indeed, with the growth of 'scientific' subjects, and after the first volume of the *Encyclopédie* (1751), the encyclopaedic function of dictionaries may have increased. However, the suggestion that dictionaries could even be considered as impoverished encyclopaedias⁵⁷ is not really borne out in practice, with many simple and concise versions of dictionaries merely consisting of word lists. Leibniz expressed this clearly:

One cannot explain words without making incursions into the sciences themselves, as is evident from dictionaries; and conversely, one cannot present a science without at the same time defining its terms'.⁵⁸

The two methods used to organise knowledge are potentially conflicting. A dictionary is an alphabetical list of terms with precise definitions and an encyclopaedia has knowledge organised in an alphabetical list of themes. Early glossaries, such as Latin-Old English, dating from the eighth century, used either alphabetical or topical ordering of words.⁵⁹ Early herbals were initially in alphabetical order but subsequently themed. Antoine Furetière had established alphabetical order, rather than systemic or thematic arrangement of knowledge, in his *Dictionnaire Universel*, which was published posthumously in 1690.⁶⁰

⁵⁵ Jack Lynch, 'Johnson's Encyclopedia' in, *Anniversary Essays on Johnson's Dictionary*, ed. by Jack Lynch, Anne McDermott (Cambridge: Cambridge University Press, 2005), pp. 129-146.

⁵⁶ Butt, *The Age of Johnson*, p. 20.

⁵⁷ Yeo, *Encyclopaedic Visions*, pp. 18-20.

⁵⁸ Yeo, *ibid.*, p. 20.

⁵⁹ Gabriele Stein, 'The Emergence of Lexicology in Renaissance English Dictionaries' in, *Words and Dictionaries from the British Isles in Historical Perspective*, ed. by John Considine and Giovanni Iamartino (Newcastle upon Tyne: Cambridge Scholars, 2007), pp. 25-38.

⁶⁰ Yeo, *ibid.*, p. 18.

An advantage of alphabetical order is that classification of themes is avoided, and diagrams showing how various subjects are related, as used in Chambers's *Cyclopaedia* and in the *Encyclopédie*, do not have to be drawn.⁶¹ The disadvantage of alphabetical order of knowledge in an encyclopaedia is that some prior acquaintance with major subject categories is required. A good encyclopaedia therefore should at least include adequate cross-referencing. This was not used by Harris, but Chambers cross-referenced about half his articles, as well as providing a map of knowledge.⁶² In my research, I noted a typical example of the extensive cross-referencing used by Chambers under 'Brain' which had twenty-eight references.

James referred to the problem in the *Proposals for A Medicinal Dictionary* when he states:

That the alphabetical order, by which these articles will be dispersed in different parts of the work, may produce no perplexity of confusion of ideas; under the article of surgery, will be given a catalogue of the subordinate article relating to surgery, that the reader may, by consulting it, have a distinct view of the whole science.

Although encyclopaedic entries continued to be used in medical dictionaries, their lengths were shortened when compared with those used by James. This is illustrated in Motherby's dictionary, which was produced in a single folio volume. There was a slight reduction in the number of headwords (13,800) compared with James (14,330) but a great reduction in the length of the entries, as illustrated in a random selection of twenty similar medical words across the alphabet in both dictionaries. Only in one of these twenty examples was the entry longer in Motherby (Table 1.3).

⁶¹ Yeo, *ibid.*, p. 27.

⁶² Yeo. *Ibid.*, p. 132.

Table 1.3: Comparison of length of selected encyclopaedic entries

Headword	Number of pages in <i>A Medicinal Dictionary</i>	Number of pages in Motherby's <i>A New Medical Dictionary</i> 2 nd edn (1785)
Cataract	12.5	1.5
Colica	7	2
Dysenteria	9	2.5
Dysuria	A few lines only	1
Erysipelas	9	2.5
Fibra	23	1.5
Fistula	6	2
Hectica*	4.5	1
Iliac passion	4.5	1
Inflammatio	23	6
Mania	8	1
Oleum*	12	1.5
Paralysis	6.5	2
Phthis*	11.5	3.5
Scirrhus	10	1
Scorbutus	9	2
Scrofula	8.5	1.5
Ulcus	5	3
Variola	26	3
Vermes*	2	1.5

* 'Hectica' - a type of fever; 'Oleum' - oil; 'Phthis' - consumptions; 'Vermes' - worms.

The purpose of the extensive encyclopaedic entries in James's dictionary can only be surmised, but may have specifically helped James to become established in the medical marketplace of London. Little was written in the *Proposals* for the dictionary about these encyclopaedic entries which stated the design was 'a body of physic and surgery, both the

terms and the science, but it is not pretended that this book will make every reader a complete physician'.⁶³

In broader terms, medical literature can be considered part of the commercialisation of medicine, and a particular feature of the consumerism of the eighteenth century.⁶⁴ Dictionaries evolved in parallel with an increasing quantity of medical information, so presumably the entries had general educational aims.⁶⁵ Indeed, it has been argued that London medical education emerged during the eighteenth century as a competitive and potentially lucrative private enterprise, authorship being one example.⁶⁶ Most studies of medical education in Britain and continental Europe, however, have concentrated on the initial training of medical practitioners and James's own experience of classical and medical studies at Oxford and possible clinical studies in Leiden were typical of an aspiring physician. It is unlikely that an expensive medical dictionary costing approximately £5 would have been a source of information to students at this time.⁶⁷ A rare record of student reading advice was a catalogue of the best authors that could be borrowed from the personal library of Dr Robert Watt, a physician and teacher in Glasgow.⁶⁸ The catalogue, published in 1812, contained James's translation of *Modern Practice of Physic* by Boerhaave and Hoffman (1746) and his publication *On the Pressages of Life and Death in Diseases* (1746), but not his dictionary.

⁶³ Robert James, *Proposals for Printing a Medicinal Dictionary* (London: Society of Booksellers for Promoting Learning, 1741).

⁶⁴ Louise Curth, 'The Commercialisation of Medicine in the Popular Press: English Almanacs, 1640-1700', *The Seventeenth Century*, 17 (2002), 48-69.

⁶⁵ Roderick McConchie, *Discovery in Haste*, p. 1.

⁶⁶ Susan C. Lawrence, 'Educating the Senses; Students, Teachers and Medical Rhetoric in Eighteenth-Century London' in, *Medicine and the Five Senses*, ed. by William F. Bynum, Roy Porter (Cambridge: Cambridge University Press, 1993), p. 157.

⁶⁷ £5 in 1750 may be considered to be equivalent to 50 days wages of a skilled tradesman or the cost of one cow.

⁶⁸ Francesco Cordasco, *A Bibliography of Robert Watt, MD.*, (New York: W.F.Kelleher, 1950), pp. 14-16.

An important question is whether the encyclopaedic elements of the dictionary could have played a part in keeping practitioners updated in the mid-eighteenth century without having to acquire a large library of books. Whereas basic medical education has been well researched there have been fewer studies on continuing medical education. A limited number of such educational opportunities became available but not all were developed until the second half of the century. An informal method was what might be learned in coffeehouses or clubs. James's dictionary sat within the use of private study of books, journals and magazines, private exchange of information with other established practitioners, and, in larger cities, attendance at public lectures and society meetings.

In the seventeenth century there were no exclusively medical journals and in the early eighteenth century only a few short-lived journals such as *Medical Essays and Observations Revised and Published by a Society in Edinburgh* (1733-1744), being continued in a second series as *Medical and Philosophical Commentaries* by a Society in Edinburgh (1773-1795).⁶⁹ Later in the century, in 1787, the *Memoirs of the Medical Society of London* was first issued. More long-lived journals were the more serious *Philosophical Transactions of the Royal Society* from 1665, the *Journal des Sçavans* from 1665 in France, the *Acta Eruditorum* from 1684 in Leipzig and publications such as *The Gentleman's Magazine* (founded by Edward Cave, 1691-1754) from 1731 for broad readership. The latter, for example, contained medical articles, case histories, book reviews, bills of mortality, records of outbreaks of infections, obituaries, debates on sickness and on the environment, and pieces on variolation, medical charity work, private

⁶⁹ David A. Kronick, 'Medical "Publishing Societies" in Eighteenth-Century Britain', *Bulletin of the Medical Library Association*, 82 (1994), 277-282.

lunatic asylums and voluntary hospitals.⁷⁰ From this study of *The Gentleman's Magazine*, Porter concluded that involvement in medicine was part of the public role of the responsible layman, without any insuperable boundaries between lay and professional people in the eighteenth century. *The Gentleman's Magazine* could therefore be considered to have played an important part of continuing medical education before the establishment of specific medical journals. In the second half of the eighteenth century other medical periodicals appeared, some being associated with societies such as the unofficial *Medical Observations and Inquiries by a Society of Physicians* (1757-1784) which prompted the official Royal College of Physicians' *Medical Transactions* (1768-1826). The *London Medical Journal* was not published until 1781-1790. Medical societies did not effectively start in London until the founding of the Medical Society in 1773.

Other ways of keeping updated to be considered are case reports and lectures. Sharing medical information between medical practitioners may have been inhibited by the constraints of private practice.⁷¹ Later, the collection of case records based on hospital experience became available.⁷² Public and private lecturing in anatomy, midwifery and chemistry are therefore potentially important.⁷³ Lectures were organised by professional bodies in London and also by private entrepreneurs such as William and John Hunter, and William Smellie, and this extended into the provinces, including Birmingham. Mostly, these were vocational and largely directed towards students, as illustrated by James

⁷⁰ Roy Porter, 'Lay Medical Knowledge and Medication in the Eighteenth Century: The Evidence of *The Gentleman's Magazine*', *Medical History*, 29 (1985), 138-168.

⁷¹ Sophie Vasset, *Medicine and Narration in the Eighteenth Century* (Oxford: Voltaire Foundation, 2012).

⁷² Nicholas D. Jewson, 'Medical Knowledge and the Patronage System in 18th Century England', *Sociology*, 8 (1974), 369-385.

⁷³ Jonathan Reinarz, 'The Transformation of Medical Education in Eighteenth-Century England: International Developments and the West Midlands', *History of Education*, 47 (2008), 549-566. Roy Porter, 'Medical Lecturing in Georgian London', *The British Journal for the History of Science*, 28 (1995), 91-99.

Douglas (1675-1742), William Cheselden (1688-1752) and Frank Nicholls (1699-1778).⁷⁴

Anatomy, with some extension into physiology, was the main subject of these lectures.

Later in the century, lecturing was extended to chemistry and physic within London

hospitals.⁷⁵ So whereas some provision was made for continuing surgical training in the

early and mid-eighteenth century, a physician's continuing medical education would have

been largely dependent on books. The encyclopaedic entries in *A Medicinal Dictionary*

would therefore have provided a useful compendium of medical knowledge derived from a

wide selection of authors.

Authors and publishers of medical dictionaries

In this final section, I will examine some of the main authors and publishers of medical

dictionaries in the eighteenth century in order to ascertain any common features. As with

language dictionaries, single authorship of medical dictionaries was normal in the early

part of the eighteenth century. Subsequent encyclopaedic projects usually involved many

expert contributors, each being an author, and were compiled by an editor or editors, such

as Bell and Macfarquhar's *Encyclopedia Britannica* (1768 onwards), Diderot's

Encyclopédie (1751-1772) in France and the *Encyclopaedia Britannica* (1769) in Scotland.

Dictionary-making today is no longer an individual enterprise, and dictionaries are now

often named after their publisher, rather than after their author(s). The New Sydenham

Society's lexicon (1881-1899) was one of the first medical dictionaries to be named in this

way. English medical dictionaries until the end of the nineteenth century show an irregular

production of a new dictionary approximately every twenty years (Table 1.4).

⁷⁴ Anita Guerrini, 'Anatomists and Entrepreneurs in Early Eighteenth Century London', *Journal of the History of Medicine and Allied Sciences*, 59 (2004), 219-239.

⁷⁵ Roy Porter (1995), p. 98. Public lectures in chemistry had been pioneered by Peter Shaw (1694-1763) in London in 1731. Graham Oldham, 'Peter Shaw', *Journal of Chemical Education*, 37 (1960), 417-419.

Table 1.4: Authors of medical dictionaries published in England before 1900

Author	Background of author	Publication
Lazarus Riverius	physician	<i>The Compleat Practise of Physic</i> (1655)
Stephen Blankaart	physician	<i>The Physical Dictionary</i> (1684)
John Quincy	apothecary/physician	<i>Lexicon Physico-Medicum</i> (1719)
Robert James	physician	<i>A Medicinal Dictionary</i> (1743-45)
John Barrow	mathematics/naval historian	<i>Dictionarium Medicum Universale</i> (1749)
George Motherby	physician	<i>A New Medical Dictionary</i> (1775)
Robert Hooper	physician	<i>A Compendious Medical Dictionary</i> (1798)
Bartholomew Parr	physician	<i>The London Medical Dictionary</i> (1809)
Robert Mayne	surgeon	<i>An Expository Lexicon</i> (1853-54)
James Copland	physician	<i>Dictionary of Practical Medicine</i> (1858)
Henry Power/ Leonard Sedgwick	ophthalmologist/ family physician	<i>The New Sydenham Society's Lexicon</i> (1881-1899)*

*completed by George Parker in five volumes

It can be seen that until the end of the nineteenth century medical dictionaries were compiled by single authors and the majority of the authors were medically trained. An exception was John Barrow, who copied much from James. John Barrow (fl.1735-1774) is a shadowy figure who taught mathematics and is best known for a practical handbook of navigation and an anonymous geographical dictionary. The title page of his medical dictionary stated he was a 'chymist'. He was not a medical person and it is not known where he lived and worked, or if he had any contact with James. Barrow's dictionary could be considered as a shortened version of James's but no acknowledgement was given and a different publisher used. Such a significant reduction in length by a different author could have given grounds for accusations of plagiarism, and questions as to whether the

publication was a separate book under the Copyright Act of 1710.⁷⁶ George Motherby, M.D. (bap.1731-1793), on the other hand, qualified from King's College, Aberdeen and practised in Königsberg. Motherby also addressed his work to non-professionals and, like James, appended an English-Latin index to the work.⁷⁷ Single authorship has the advantage of allowing the lexicographer to become part of the story being told, there being plenty of evidence of James's personal views expressed in *A Medicinal Dictionary*. This did not change until the nineteenth century. *The New Sydenham Society's Lexicon* was based on Mayne's lexicon and required four authors and eighteen years for completion.

'Based on' may be a better way of describing plagiarism and the ways in which dictionaries evolved. I have analysed the source of James's list of headwords in Chapter 3. The authors of early dictionaries, encyclopaedias and herbals drew heavily on their predecessors, so that the lexicographical work of one generation was inherited from the one before it.⁷⁸ Dictionaries and encyclopaedias have even been considered as showing 'plagiarism in alphabetical order'.⁷⁹ As scholars have noted, the best lexicographer was the best plagiarist, and that dictionaries never were and never will be new,⁸⁰ and 'The best lexicographer was often the most discriminating plagiarist.'⁸¹ For example, Thomas Thomas's *Dictionarium Linguae Latinae et Anglicanae* (1587) was based on Cooper's *Thesaurus Linguae* (1565) and was used by Robert Cawdrey for *A Table Alphabeticall*

⁷⁶ Yeo, *ibid.*, p. 207.

⁷⁷ Rod McConchie, 'Converting "This Uncertain Science into an Art"; Innovation and Tradition in George Motherby's *A New Medical Dictionary, or a General Repository of Physic, 1775*' in, *Adventuring in Dictionaries* ed. by John Considine (Newcastle upon Tyne: Cambridge Scholars Publishing, 2010), pp. 126-148.

⁷⁸ John Considine, *Dictionaries in Early Modern Europe* (Cambridge: Cambridge University Press, 2008), p. 8.

⁷⁹ Jeff Loveland, *The European Encyclopedia* (Cambridge: Cambridge University Press, 2019), p. 146.

⁸⁰ Sidney Landau, *Dictionaries: the Art and Craft of Lexicography*, 2nd edn (Cambridge: Cambridge University Press, 2001), p. 43.

⁸¹ De Witt T. Starnes, Gertrude E. Noyes, *The English Dictionary from Cawdrey to Johnson, 1604-1755*, new edn with introduction and selected bibliography by Gabriele Stein (Amsterdam: Benjamin, 1991), p. 183.

(1604), considered to be the first, but clearly not the original, English dictionary.⁸² On the other hand, Sidney Landau, an experienced lexicographer, has commented that it is perhaps fortunate that very few dictionaries are new, as, in building upon the strengths of previous publications, some mistakes are avoided. However, this may pose legal and ethical issues in lexicography.⁸³ Authors of seventeenth- and eighteenth- century dictionaries rarely acknowledged their sources, the first to do so being Thomas Blount in his *Glossographia* (1656).⁸⁴ A notable exception was Samuel Johnson who cited Bailey, Philips and Ainsworth in particular.⁸⁵ Bailey himself did not acknowledge his sources, but noted help given in mathematics, botany and etymology.⁸⁶ Plagiarism in lexicography was therefore tolerated, and was not treated in the same way as plagiarism in literature, so copying was rarely brought to court. A particular example was a suit brought in 1617 against Francis Holyoke, the reviser of John Rider's English-Latin dictionary,⁸⁷ and Ann Fisher's original spelling dictionary, which was suppressed in 1771, apparently as a commercial manoeuvre which managed to remove a good competitor to John Entick's *The New Spelling Dictionary* (1765).⁸⁸ 'Borrowing' or 'influencing' are also terms that describe the dependence of authors on previous dictionaries.⁸⁹ Thus the history and

⁸² Landau, *Dictionaries*, p. 48.

⁸³ Landau, *ibid.*, pp. 402-424.

⁸⁴ De Witt T. Starnes, Gertrude E. Noyes, *The English Dictionary*, p. 47.

⁸⁵ Landau, *ibid.*, p. 62.

⁸⁶ Nathan Bailey, *Dictionary Britannicum* (London: T. Cox, 1736).

⁸⁷ Rod McConchie, *Discovery in Haste*, p. 102.

⁸⁸ Alicia Rodríguez-Álvarez, María Esther Rodríguez-Gil, 'John Entick's and Ann Fisher's Dictionaries: an Eighteenth-Century Case of (Cons)Piracy?' in, *Ashgate Critical Essays on Early English Lexicographers*, vol. V, *the Eighteenth Century* (Aldershot: Ashgate, 2012), pp. 193-225.

⁸⁹ Fredric Dolezal, 'Writing the History of English Lexicography; Is There a History of English Lexicography after Starnes and Noyes?' in, *Words and Dictionaries from the British Isles in Historical Perspective*, ed. by John Considine and Giovanni Iamartino (Newcastle upon Tyne: Cambridge Scholars, 2007), pp. 1-13, (p. 5).

evolution of dictionaries may not include ‘brilliant innovations or bursts of creativity, but rather a succession of slow and uneven advances in vocabulary and methodology’.⁹⁰

Turning now to the important role of the publishers, the initial incentive to produce a medical dictionary may have been commercial or academic from the point of view of both the author and the publisher, as both stood to gain or lose prestige and money. As medical dictionaries developed, the publisher, or more often a group of publishers, had an increasingly important role, especially for the more expensive projects. This involved not only commissioning and funding the author, but also overseeing the writing, printing and selling. In the first part of the eighteenth century, no one publisher specialised in medical dictionaries (Table 1.5).

Table 1.5: London publishers of English medical dictionaries 1684-1800

Author (date of publication)	Title	Publisher
Stephen Blankaart (1684)	<i>The Physical Dictionary</i>	printed by J.D., and sold by Samuel Crouch and John Gellibrand
John Quincy (1719)	<i>Lexicon Physico-Medicum</i>	A. Bell, W. Taylor, J. Osborn
John Quincy (6 th edn 1743)	<i>Lexicon Physico-Medicum</i>	T. Longman
John Quincy (11 th edn 1794)	<i>Lexicon Physico-Medicum</i>	T. Longman
Robert James (1743-45)	<i>A Medicinal Dictionary</i>	Thomas Osborne
John Barrow (1749)	<i>Dictionarium Medicum Universale</i>	T. Longman, C. Hitch, A. Millar
George Motherby (1 st edn 1775)	<i>A New Medical Dictionary</i>	J. Johnson
Motherby (2 nd edn 1785)	<i>A New Medical Dictionary</i>	J. Johnson, G.G.J. Robinson, A. Hamilton, J. Murray
Robert Hooper (1798)	<i>A Compendious Medical Dictionary</i>	J. Murray, S. Highley

⁹⁰ Sidney Landau, *Dictionaries*, p. 38.

The link between the author and the publisher is considered in Chapter 3. The publisher, Thomas Osborne junior (bap.1704-1767), could be considered a novice in this field, but he was an astute businessman and a wealthy bookseller. Osborne was listed as one of the twenty-one publishers of Chambers's *Cyclopaedia*,⁹¹ but this is likely to have been his father, Thomas Osborne senior (d.1744). Harris's *Lexicon Technicum* involved ten publishers. Longmans, a well-established publisher from 1724,⁹² emerged as the dominant publisher of medical dictionaries from 1743 onwards (Table 1.5) and continued to contribute to medical dictionaries in the nineteenth century, such as *The London Medical Dictionary* (1809) and *The Dictionary of Practical Medicine* (1858).

Conclusions

In conclusion, medical dictionaries were written in Switzerland, France, Italy and Holland from the sixteenth century. This may reflect the existence of more advanced centres of medical education in these nations at the time. The first medical dictionary published in English was not produced until 1684 and was in fact a translation of Blankaart's successful publication, *The Physical Dictionary*. The second was Quincy's *Lexicon Physico-Medicum* in 1719. These were early examples of medical dictionaries published in the vernacular before similar publications in continental Europe in the second half of the eighteenth century. James's *A Medicinal Dictionary* (1743-45) continued this trend and shows evidence of earlier traditions of hard words and of herbals. The use of medical terms from classical writers remains evident and the extensive botanical entries

⁹¹ James and John Knapton, John Darby, Daniel Midwinter, Arthur Bettesworth, John Senex, Robert Gosling, John Pemberton, William and John Innys, John Osborne, Thomas Longman, Charles Rivington, John Hooke, Ranew Robinson, Francis Clay, Aaron Ward, Edward Symon, Daniel Browne, Andre Johnson and Thomas Osborne.

⁹² Harold Cox, John E. Chandler, *The House of Longman with a Record of Their Bicentenary Celebrations* (London: Longmans, 1925).

can be considered to be related to the herbals. Blankaart's dictionary was of terms relating to either 'Anatomy, Chirurgery, Pharmacy, or Chymistry', but Quincy was less precise, and more in the tradition of hard words:

. . . explaining the difficult terms used in the several branches of the profession, and in such parts of philosophy as are introductory thereunto. To which is added some account of the things signified by such terms collected from the most eminent authors; and particularly those who have wrote upon mechanical principles.

The clear title page of James's dictionary indicates that all subjects relating to medicine were to be covered, and this is indeed the case. Medical dictionaries provided users with an explanation of the specialised vocabulary of medical and allied subjects but also had an encyclopaedic function, contributing to medical education. The notable size of James's dictionary is to some extent due to an increase in the number of headwords but also to the greater size of these encyclopaedic entries.

The laborious task of compiling a medical dictionary must depend to a great extent on the background of the author, and most authors of medical dictionaries were medically trained. James brought language skills, a breadth of medical knowledge and a sense of history to the writing of his dictionary. Whereas single authorship was the norm until the nineteenth century, publishers, on the other hand, were often associated in groups, Thomas Osborne being an apparent exception. From both an author's and publisher's point of view, *A Medicinal Dictionary* is an innovating colossus situated in the mid-eighteenth century, rooted in the evolving and relatively new tradition of dedicated medical dictionaries, novel in extent and depth and influencing the future of medical dictionaries.

Chapter 2. The Making of Dr Robert James

This chapter explores how an unexceptional physician from the provinces was fruitful in London, by the writing of a substantial medical dictionary and other works, and by the marketing of a fever powder. This new emphasis on James considers Samuel Johnson's enabling role more clearly and provides an enhanced context for the medical dictionary. It assesses the significance of James's life and his work as a 'middling sort' of person. This will reflect medicine as a business within the wider marketplace, and will contribute to the debate on how medical knowledge was shaped in the eighteenth century.¹ The information gleaned from the early and the later years will be used to describe James in this cultural context.

The early years (1703-1740) places James in the social and medical contexts of Lichfield, Oxford and Birmingham, considers the possibility of early career advice, his clinical training in Leiden, and explores the beginnings of his authorship and his credentials for writing a medical dictionary. In assessing James's education, this chapter considers in particular his skills in languages and in chemistry, the two basic elements of his successful later years. I will review the reasons for moving from Birmingham to London in mid-career.

The later years (1740-1776) will aim to situate James in the publishing, medical and social context of London. I will contrast the apparent failure in Lichfield and Birmingham with eventual success in London. Also I will compare him with other physicians in the

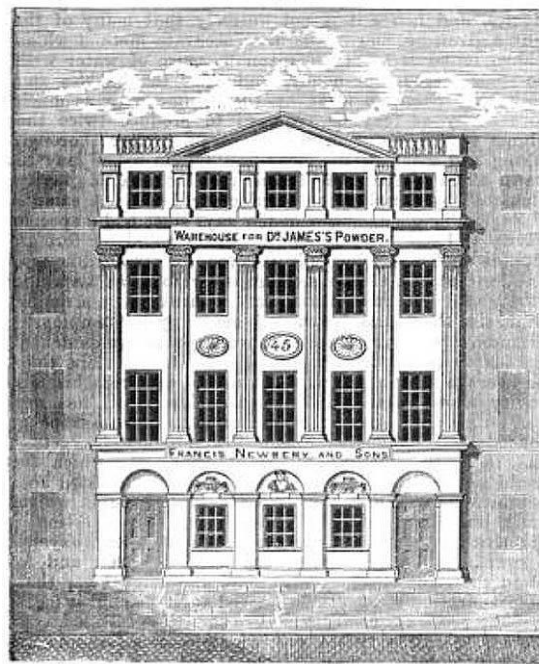
¹ Ludmilla Jordanova, 'The Social Construction of Medical Knowledge' in, *Localising Medical History*, ed. by Frank Huisman, John Harley Warne (Baltimore: Johns Hopkins University Press, 2004), pp. 338-363 (p. 349). Margaret Hunt, *The Middling Sort: Commerce, Gender and the Family in England, 1680-1780* (Berkeley: University of California Press, 1996).

provinces, such as John Floyer (1649-1734) and John Ash (1723-1798), and with other medical migrants in London in terms of background, medical training, sponsorship, institutions, Royal appointments, medical and non-medical authorship, commercial activities and an interest in chemistry. In this chapter I will explore James's important relationships with key publishers and consider whether he was an unusual or orthodox physician in promoting a medicine. Lastly, I will attempt to bring together the limited records of his personality and character.

In *The History of Little Goody Two-Shoes* (1766) Robert James's powders were mentioned. 'Care and discontent shortened the days of little Margery's father. He was forced from his family, and seized with a violent fever in a place where Dr James's powder was not to be had, and where he died miserably.'²

² Anon., *The History of Little Goody Two-Shoes*, 3rd edn (London: J. Newbery, 1766), p. 13. The first edition of 1765 is rare, with copies held by the British Library only. As noted by the commentator, Charles Welsh, books for children of this time are 'as scarce as blackberries in midwinter'. *Goody Two-Shoes, a Facsimile Reproduction of the Edition of 1766*, with introduction by Charles Welsh (London: Griffith and Farran, 1881), p. xiii. Ironically, the death of Oliver Goldsmith in 1774, considered as a possible contributing author of *Goody Two-Shoes*, may have been hastened by James's powder.

Figure 2.1: Francis Newbery and Son's warehouse, 1779³



FRANCIS NEWBERY AND SON'S WAREHOUSE, 1779.

From *Records of the House of Newbery* by Arthur Le Blanc Newbery, p.46

In this chapter, I will describe how Robert James came to be mentioned in this famous book for children and show how his name came to be emblazoned on a warehouse in London after his writing a major medical dictionary. James may be less well known today, compared with Samuel Johnson or David Garrick, but all three had common roots in Lichfield Grammar School, all three went to London at a similar time, all had eventful but different careers, all were authors and two of them wrote major dictionaries. The lifelong friendship of Johnson and James has been well documented.⁴ Johnson acknowledged his debt to James for his knowledge of physic.⁵ Less well known is James's friendship with the

³ Francis Newbery (1743-1818) was the son of the publisher, John Newbery (1713-1767). Francis moved to Number 45 at the east end of St Paul's Churchyard after quarrelling and dissolving his partnership with Thomas Carnan, who continued publishing at Number 65 (Bible and Sun) where John Newbery had originally set up his business in 1745. The success of the medicines business was also reflected by the fact that Francis was reputed to be almost a millionaire when he died on his Sussex estate, Heathfield Park.

⁴ John Wiltshire, *Samuel Johnson in the Medical World* (Cambridge: Cambridge University Press, 1991), pp. 7-74.

⁵ *Ibid.*, p. 73.

Garrick family who respected him, as indicated in a letter from David written to his father concerning his mother, dated 23 December 1743. ‘We were forced to call in Doctor James who has been very diligent and careful to recover her, so I beg if you can procure any of the Peruvian bark he mentions in his letter, you will let him have it.’⁶

What were James’s credentials for compiling a medical dictionary? The minimum requirements might be a good knowledge of medicine, an adequate word list, an understanding of etymology and word history, an ability to give clear definitions and explanations and to make decisions about inclusion and exclusion.⁷ Authors of medical dictionaries written in English in the eighteenth century were trained in medicine. Quincy was an apothecary and worked as a physician, and Motherby and Hooper were physicians. The only exception was Barrow, a mathematics teacher and ‘chymist’ whom I have noted in Chapters 1 and 4. Key questions which I will address include a consideration of who may have encouraged James to take up medicine, and did he have appropriate medical knowledge and linguistic skills? Furthermore, why did he move from the Midlands to London in mid-career, how did he get involved in publishing and when did he invent a patented medicine? In exploring these questions, I will contrast James’s early career in the provinces with his later experiences in London, and with other contemporary medical migrants to the capital. I will also compare James with other medical practitioners, medical authors and promoters of proprietary medicines. This will set James, his dictionary, and his fever powders in the social and medical contexts of the times, enabling an assessment to be made of the conventional as well as the unusual features of his career. Information about

⁶ David Little, George Kahrl, *The Letters of David Garrick*, vol. I, Letters 1-334 (London: Oxford University Press, 1963), p. 12. James’s letter of 11 December 1734 to Captain Garrick is also noted (p.13). The Garricks’ elder son, Peter (b.1710) may have been a school friend of James.

⁷ Modern aspects of lexicography are well described in Philip Durkin, ed., *The Oxford Handbook of Lexicography* (Oxford: Oxford University Press, 2016).

James as a person is limited with rare personal comments, no substantial letters and partial family records. Some detail has been gleaned from observations made by contemporaries, a grandson and by later commentators.

James's early life

A few personal details of James's early life (1703-1740) are known. His family came from a farming background (discussed later) in Kinvaston near Penkridge (see Figure 2.2), which would have given him a broad knowledge of nature. He was born in Shenstone, a village three miles south of Lichfield, being the first surviving child of Major Edward James and Frances Clarke.⁸ Edward James could not be found in the records of the Staffordshire Regiment though the majority of paperwork collected by Lillingtons Regiment was lost during the Peninsular War. However, a transcription of an Officer's Army Pay List was found by the regimental archivist to contain a Major Edward James as part of James Tyrrell's Foot Regiment (James Tyrrell, c.1674-1742). Interestingly, Peter Garrick, Peter and David Garrick's father, was lieutenant to Colonel James Tyrrell, Regiment of Dragoons, suggesting a possible army connection between the James and Garrick families. I have been unable to discover how long the James family lived in Shenstone nor when he first attended the Grammar School in Lichfield.

Eventually, James was disinherited, having resolutely refused to follow his father and other relatives into the army.⁹ This could have arisen from influences at school or perhaps because of his short stature. The date of this disinheritance is unknown but may have

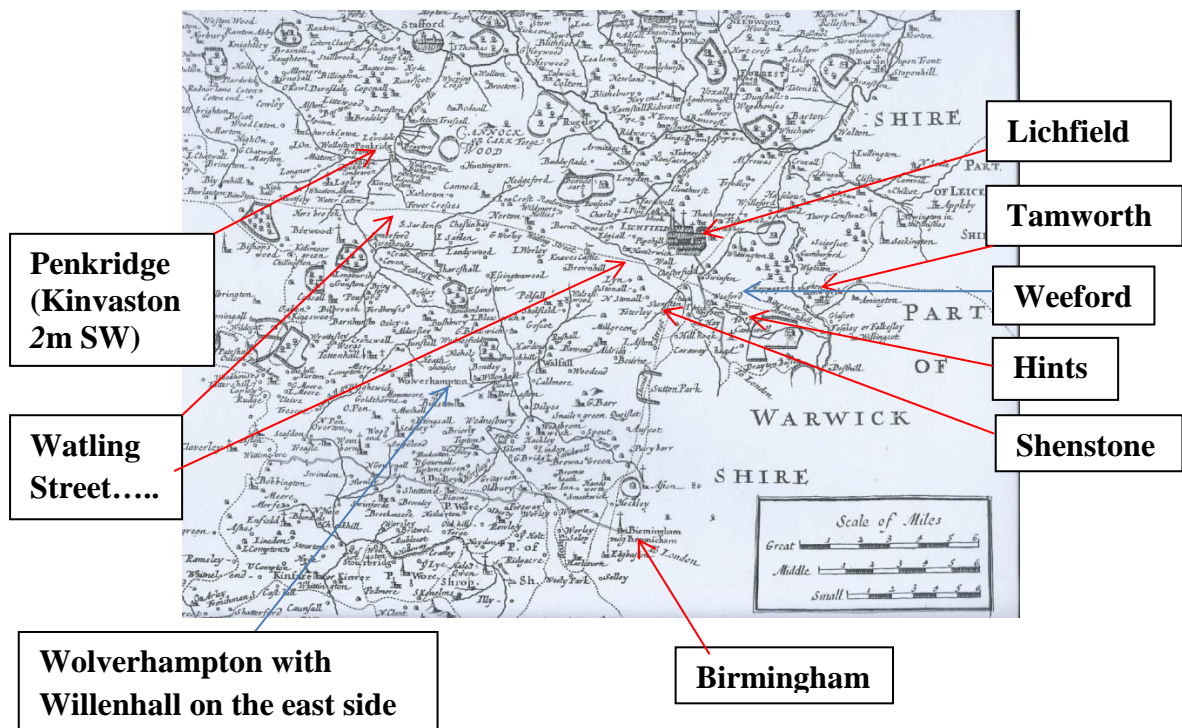
⁸ Henry Sanders, *The History and Antiquities of Shenstone* (London: J. Nichols, 1794), p.108.

⁹ Stewart M. Ellis, *The Solitary Horseman or the Life and Adventures of G.P.R. James* (Kensington: Cayme Press, 1927), p. 17. In the seventeenth century it was considered unlucky to disinherit an eldest son. Keith Thomas, *Religion and the Decline in Magic; Studies in Popular Beliefs in Sixteenth- and Seventeenth-Century England* (Oxford: Oxford University Press, 1977), p. 624.

initially contributed to his struggle for money, and given him reasons for being enterprising. The fact that James did not choose to pursue a career in the army or in farming indicates an early independence. James made his own way in the world with the aid of a small property at Hampton Wick, which could not be alienated from him. This and other property in the adjacent Teddington area was developed by him when living in London.¹⁰

¹⁰ *Summary of a survey of Dr James's estate at Hampton Wick 1793*. London Metropolitan Archives, James Family AAC/0976/020. Hampton Wick is part of Teddington. The 'perpetual curate' of the parish of Teddington was Stephen Hales (1677-1761) who conducted physiological studies in plants and animals with important publications *Vegetable Statics* (1727) and *Haemastatics* (1733). A genus of trees, *Halesia*, is named after him and The American Society of Plant Biologists awards the Stephen Hales prize annually to a scientist for work in plant physiology. He was a friend of Alexander Pope who had a house nearby at Twickenham. I have been unable to find any reference to Hales in *A Medicinal Dictionary* and no evidence of a link between James and Pope.

Figure 2.2: Part of Robert Morden's map of Staffordshire, 1695¹¹



Without family or school influences, James's choice of a medical career may have come from local practitioners. I could find no-one with a medical background in James's family home village of Kinvastan or Penkrige apart from an apothecary, Mr Hoggits, who attended the James family.¹² The most respected doctor in Lichfield at that time was Sir John Floyer (1649-1734). He was author of several books, notably on asthma, the pulse, cold water bathing and geriatrics. Shortly before his son's death in 1720, Floyer wrote a manuscript on the subject of medical education. This would have coincided with the time that James was considering a medical career. In the manuscript, Sir John stressed the importance of a classical education, speaking Latin, the study of natural history (Le Clerc),

¹¹ Robert Morden; The County Maps from William Camden's *Britannia*, 1695, facsimile (Newton Abbot: David and Charles, 1972). Approximate distances from Lichfield are: Shenstone 3.4 miles, Hints 5 miles, Penkrige 15 miles, Birmingham 18 miles. The number of households in 1666: Lichfield 296, Penkrige 308 (Kinvaston 1680 4 or 5 houses), and Shenstone 122 (population estimate 800-900).

¹² Rose Wheat, *Penkrige in the late Seventeenth Century* (Penkrige Civic Society, 2009), p. 145.

chemistry (Lemery), botany and anatomy (Dr Drake). Floyer suggested that at the age of nineteen a prospective medical person ‘should go to Holland to see the practice of physic and chirurgery for two to three years in their hospitals and to learn French’. ‘Any town of great trade is the fittest place to settle in. But no great estate can be got by country practice; ‘tis very slavish and meanly rewarded.’ In ‘country practice he cannot soon get into much business unless he practise surgery as well as physic and have knowledge in midwifery’.¹³

To a very large extent all this prudent advice reflected James’s subsequent career. Under ‘Balnea’ James quotes the case of a farmer’s wife ill with a fever told to him by the late Sir John Floyer. Four more references are made to Sir John’s writings in the dictionary (on bathing, asthma and the pulse watch). A link with the Floyer family was also noted in James’s first work, a letter to Sir Hans Sloane in 1735 on an experimental treatment for rabies, stemming from an incident in February 1732. This was published in the *Philosophical Transactions* and as a short report in 1741. James wrote ‘In February 1732, I happened to visit a gentleman who is very fond of fox-hunting . . . I advised the gentleman to try what effect Turpeth Mineral would have upon them [two mad hounds]’. James then went on to say ‘Soon after this happened I waited on Mr Floyer, the gentleman who first tried the experiment . . .’¹⁴ James recorded having received a letter from Mr J. Floyer of Hints (see Figure 2.2) concerning the doses of Turpeth Mineral which had been used. These incidents were repeated in a fuller account of rabies published later.¹⁵ The

¹³ Denis Gibbs, Philip K. Wilson, eds. *Sir John Foyer (1649-1734) of Lichfield in Staffordshire, Advice to a Young Physician* (York: William Sessions, 2007), pp. 26-40.

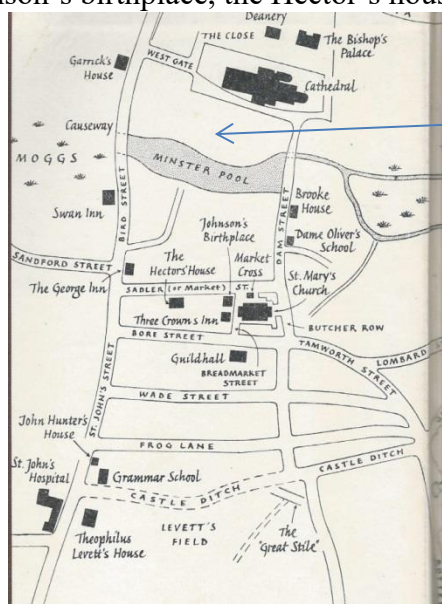
¹⁴ Robert James, *A New Method of Preventing and Curing the Madness Caused by the Bite of a Mad Dog* (London: Society of Booksellers for Promoting of Learning sold by Osborne and Smith, 1741). Turpeth Mineral was the name of a number of mercuric compounds.

¹⁵ Robert James, *A Treatise on Canine Madness* (London: J. Newbery, 1760), p. 15, pp. 110-111, pp. 117-118.

compound was then used by James in the treatment of people nearby in Tamworth and Burton upon Trent.

Other medical practitioners in Lichfield may have influenced James during these early years. Firstly, George Hector (1675-1763), a surgeon and man-midwife living near the Johnsons, who delivered Samuel Johnson in 1709. His house is noted in the plan of the city (Figure 2.3). He moved to Lilleshall (Salop) after 1719.

Figure 2.3: Lichfield at the time of Samuel Johnson, showing the grammar school, Johnson's birthplace, the Hector's house, the Garrick's house and the Bishop's Palace.



Sir John Floyer's second home from about 1706 was in The Close with a garden down to Minster Pool. His first home was in St John's Street.

From James L. Clifford, *Young Samuel Johnson* (London: William Heinemann, 1955).

Secondly, Dr Samuel Swinfen (1679-1736) who graduated in medicine from Pembroke College, Oxford in 1712, and came to live with the Johnson family on arrival in Lichfield, until his marriage.¹⁶ It is not certain where Swinfen practised initially, but he moved to Birmingham in 1727,¹⁷ and was the first occupant of Number 3, The Square.¹⁸

¹⁶ It is recorded that Samuel Johnson 'while he was yet at Lichfield he used to be frequently at the house of Dr Swinfen, a gentleman of a very ancient family in Staffordshire, from which, after the death of his elder brother, he inherited a good estate. He was, besides, a physician of very extensive practice; but for want of due attention to the management of his domestick concerns, left a very large family in indigence.' George B. Hill, L.F. Powell, eds. *Boswell's Life of Johnson*, vol. 1 (Oxford: Oxford University Press, 1934), p. 83.

Medical training

After a basic grounding in classics at the Grammar School (noted in Figure 2.3), James went to St John's College, Oxford in 1722, presumably financed by his father. This was six years before Johnson came up to Oxford. The College records show that James was a commoner with a room in Canterbury Court, indicating that his family was wealthy so perhaps his disinheritance was not relevant at this time.¹⁹ It is said James distinguished himself as a classical scholar and linguist before proceeding to medical studies, and he was one of the few chosen to participate in an experimental programme in modern languages.²⁰ James graduated with a Bachelor of Arts degree on 5 July 1726 and then completed two years of medical studies. He became an extra-licentiate of the Royal College of Physicians on 12 January 1728 and was awarded an MD by Royal Mandate by King George II in Cambridge on 28 April 1728.²¹ Much later James became a licentiate of the Royal College of Physicians on 25 June 1745.

Although James distinguished himself in Oxford,²² Johnson subsequently made a comment comparing Gilbert Walmesley (1680-1751, Registrar of the Ecclesiastical Court

Swinfen was godfather to Samuel Johnson, along with Richard Wakefield, town clerk and coroner. The name 'Samuel' may have been chosen by the Johnsons because of Samuel Swinfen, but more likely in recognition of Sarah Ford's brother, Samuel Ford. James Clifford, *Young Samuel Johnson* (London: Heinemann, 1955), p. 6.

¹⁷ James Clifford, *Young Samuel Johnson*, p. 92.

¹⁸ Joseph Hill, Robert K. Dent, *Memorials of The Old Square* (Birmingham: Achilles Taylor, 1897), p. 18.

¹⁹ Rod McConchie, personal communication.

²⁰ James Gray, Thomas J. Murray, 'Dr Johnson and Dr James', *The Age of Johnson: A Scholarly Annual*, 7 (1996), pp. 213-245, p. 213.

²¹ An archivist in the University of Cambridge confirmed that there was a long list of persons graduating at the Congregation attended by George II on 28 April 1728 and one Robert James was among the Doctors of Physick (classmark: UA Grace Book Iota, p. 203). No sponsor was recorded. Personal communication from Roderick McConchie. A detailed account of medical training in Oxford, Cambridge and Scotland is given by Rosemary O'Day, *The Professions in Early Modern England, 1450-1800; Servants of the Commonwealth* (Harlow: Pearson Education, 2000).

²² James Gray and Thomas J. Murray, 'Dr Johnson and Dr James', p. 214. Gray and Murray also suggested that Johnson may have benefited from James's skill in French.

of Lichfield for thirty years from about 1713) and James and their abilities in Greek.²³

“‘Sir,’ said Johnson, ‘Dr James did not know enough of Greek to be sensible of his ignorance of the language, Walmsley did.’” Walmsley purchased books through Michael Johnson, and his library was available to both Johnson and David Garrick. Interestingly, Walmsley’s books were sold in 1756 by Thomas Osborne, who was James’s first publisher in London. Johnson also recorded a recollection of Walmsley who had given him a warm welcome into his residence in the Bishop’s Palace.

At this man’s table I enjoyed many cheerful and instructive hours, and with companions, such as not often found-with one who has lengthened and one who has gladdened life; with Dr James, whose skill in physic will be long remembered; with David Garrick whom I hoped to have gratified with this character of our common friend.²⁴

Experiences in Oxford not only influenced James in languages, but my research suggests also in chemistry and in the history of medicine. Chemistry in Oxford was linked to Elias Ashmole (1617-1692), another successful Lichfield Grammar School boy.²⁵ The Ashmoles lived in Breadmarket Street, shown in Figure 2.3. The University of Oxford founded the Ashmolean Museum through the bequest of the Tradescant family and Ashmole’s own collections. This was completed in 1683 with a chemistry laboratory in the basement.²⁶ Ashmole had intended to endow a professorship in chemistry and natural

²³ Hill and Powell, *Boswell’s Life of Johnson*, vol. IV, p. 33.

²⁴ Samuel Johnson, *Lives of the English Poets, 1781*, vol. II, ed. by Peter Cunningham (London: P.J. Murray, 1854), pp. 57-58. In this account of the life of Edmund Smith, Johnson included a very warm description of Walmsley ‘such was the amplitude of his learning, and such his copiousness of communication, that it may be doubted whether a day now passes in which I have not some advantage from his friendship’.

²⁵ Elias was born in a house in Breadmarket Street, two doors down from the birthplace of Samuel Johnson. It was expected that he would be named ‘Simon’ after his father but at his baptism his godfather, Thomas Ottey (sacrist of the cathedral) received an instantaneous revelation. ‘Elias’ he declared, and no one demurred. Tobias Churton, *Magus: the Invisible Life of Elias Ashmole* (Lichfield: Signal, 2004), pp. 2-3.

²⁶ Michael Hunter, *Elias Ashmole* (Oxford: Ashmolean Museum, 1983), pp. 25-27.

history but was prevented by ecclesiastical influence.²⁷ However, a readership in chemistry was established in Oxford in 1704, the first occupant being Dr John Freind (1675-1728) author of *Chymical Lectures* (1712) and *The History of Physick* (1725).²⁸ The latter was much admired and became a well-established text, conceived during his imprisonment in the Tower of London as a suspected Jacobite. In the distinctive preface to his dictionary, James, with reference to Freind, noted the abuses of anatomy by the dissectors of the empiric sect, for constructing ‘absurd and destructive’ hypotheses and modes of practice ‘. . . not less extravagant than any contained in the absurd and destructive, than any we meet with accounts of, even amongst the most barbarous nations.’²⁹ James also inserts shorter quotations from Freind under individual biographies within the dictionary, for example ‘Albucasis’, ‘Aegineta (Paulus)’, and ‘Oribasius’. Not only did James make extensive entries on chemistry in *A Medicinal Dictionary* but his *Pharmacopoeia Universalis* (1747) may be considered as a chemistry text (discussed in the section ‘Later Years’ below).³⁰

Another possible influence in chemistry, unrelated to Oxford, was the entrepreneur, Peter Shaw (1694-1763). Shaw was born and baptised in Lichfield and his father was Robert Shaw (d.1704), the master at Lichfield Grammar School. It is not known whether the Shaw family remained in Lichfield after his father’s death. Nothing is recorded about Peter Shaw’s basic education but it is possible he attended the Grammar School along with James. Similarly, no facts about his medical training have survived. Shaw was a self-styled

²⁷ Conrad H. Josten, ‘Elias Ashmole, FRS (1617-1692)’, *Notes and Records of the Royal Society of London*, 15 (1960), 221- 230, p. 228.

²⁸ John Freind, *Chymical Lectures* (London: P. Gwillim, 1712); *The History of Physick* (London: J. Walthoe, 1725, 1727).

²⁹ *Preface*, p. 44.

³⁰ Robert James, *Pharmacopoeia Universalis* (London: J. Hodges, J. Wood, 1747). Book 1 of the *Pharmacopoeia* has twenty-seven sections on all aspects of chemical processes, before consideration of the different classes of drugs in Books 2 and 3.

MD initially, but he became a licentiate of the Royal College of Physicians in 1740. Like James, Shaw was awarded an MD by Cambridge University in 1751. On obtaining his MD, he was described as a 'physician of one of the foreign universities'. Shaw was eight years older than James, but could have been a contact used by James on arrival in London in 1740. Shaw translated Herman Boerhaave's and Georg Ernst Stahl's chemistry textbooks and published his own chemistry books.³¹ James clearly trusted him, as in one reference to the late Dr Shaw, he admitted that he had given him the secret of the ingredients of the fever powder 'when I some years ago met him at a noble Earl's, then in Bruton Street'.³² Shaw taught chemistry and its applications in London in 1731 and 1732 and offered for sale a mobile furnace suitable for recreational use by leisured gentlemen or for small-scale businesses.³³ I have found no actual evidence that James used this furnace for preparation of the fever powders. Shaw wrote more than sixteen books, and William Cullen described him as having excited the study of chemistry more perhaps than any other man. He was not known for any original discoveries in chemistry, his reputation being based on his lectures and writings.³⁴ I was unable to find any firm evidence to suggest that

³¹ Herman Boerhaave, *A New Method of Chemistry*, trans. by Peter Shaw and Ephraim Chambers (London: J. Osborne, T. Longman, 1727).

³² Robert James, *A Dissertation on Fevers, and Inflammatory Distempers*, 8th edn (London: Francis Newbery, junior, 1778), pp. 88-89. Jan V. Golinski, 'Peter Shaw: Chemistry and Communication in Augustan England', *Ambix*, 30 (1983), 19-27 (p. 20).

³³ Jan Golinski, *Science as Public Culture: Chemistry and Enlightenment in Britain, 1760-1820* (Cambridge: Cambridge University Press, 1992), p. 60. Peter Shaw, *Chemical Lectures, Publicly Read at London in the Years 1731 and 1732, and since at Scarborough in 1733* (London: J. Schuckburgh and T. Osborne, 1734). It is of interest to note that Thomas Osborne was one of the publishers, providing another possible link between Shaw and James.

³⁴ Shaw's works on chemistry included a translation of Boerhaave's *Elementa Chemicæ* (Leiden: Lugduni Batavorum, 1732). This was first translated by Timothy Dallowe in 1735, but Shaw's versions in 1741 and 1753 were more popular. In 1733, Shaw moved to Scarborough where he promoted spa waters, but returned to London in 1738 under the patronage of Sir Edward Hulse (1682-1759). Hulse was one of the leading physicians in London with a Royal appointment to George II, though he was attacked in several pamphlets for his treatment of Robert Walpole, who died of renal calculi under his care. Shaw became physician to George II and George III, being called by Partington 'a well-educated quack physician'. Gerrit A. Lindeboom, *Boerhaave and Great Britain* (Leiden: E.J. Brill, 1974), p. 57.

James was influenced by such public lectures. The Royal Society pioneered presentations of scientific lectures and demonstrations in London and, later in the eighteenth century, in the provinces. The importance of lectures in medicine, in contrast to those in anatomy and obstetrics, has been stressed as an important component of medical education in Georgian England.³⁵ Medicine lectures did not start until later in the provinces, for example in Birmingham in 1760 and in Lichfield in 1762.³⁶ Similarly, major developments in chemistry occurred in the second half of the eighteenth century, particularly with the studies of Joseph Priestley (1733-1804) and Antoine Lavoisier (1743-1794).³⁷

It was in the Oxford area that James first experimented with the effects of antimony, which was the essential ingredient of his fever powders. His interest in this element dates back to when he lived in the house of Mr Bruch, an apothecary in Wallingford in 1726-27. Such residence was recommended as a part of medical training.

I must likewise advise our student to take lodgings there at an able apothecary's house, to contract the knowledge of drugs, and of preparing them in compositions, and then by means of his own qualifications, may boldly pretend to inform, correct, and improve those apothecaries which the chance of his practice shall conduct him to.' ³⁸

An epidemic fever occurred in the area at that time with a high mortality ('scarce one in seven recovered'). James had noted in the works of Sydenham that antimonial vomits gave better results than the fashionable ipecacuanha. 'Depuratoria febris' in James's dictionary was a prevalent fever in the years 1661-1664 when Sydenham is quoted as using

³⁵ Roy Porter, 'Medical Lecturing in Georgian London', *British Journal for the History of Science*, 28 (1995), 91-99. One such series on therapeutics was published by Edward Strother, *Lectures on the Rationale of Medicines* (London: C. Rivington, 1732).

³⁶ Jonathan Reinartz, 'The Transformation of Medical Education in Eighteenth-Century England: International Developments and the West Midlands', *History of Education*, 37 (2008), 549-566.

³⁷ Maurice Crosland, 'Chemistry and the Chemical Revolution' in, *The Ferment of Knowledge: Studies in the Historiography of Eighteenth-Century Science*, ed. by G.S. Rousseau, Roy Porter (Cambridge: Cambridge University Press, 1980), pp. 389-416.

³⁸ Anon., *Medicina Flagellata* (London: J. Bateman, J. Nicks, 1721). Wallingford is 13 miles south of Oxford.

an infusion of Crocus Metallorum containing antimony as one of the emetics.³⁹ Otherwise, Sydenham rarely mentions antimony in his discussion of the treatments for fevers, noting the use of herbal remedies, opium, bleeding, purging, unspecified diaphoretics and sudorifics.⁴⁰ James suspected that, in addition to vomiting, antimony preparations were capable of extinguishing continual fevers, ‘as readily as the bark cures intermittents’. James’s landlord was a person of good understanding, and was persuaded to try antimonicals, with and without mercury, resulting in a low mortality in this epidemic fever.

Further evidence of James’s enterprising nature is shown during his student days, when living in one room, he purchased a corpse from a resurrection man, dissecting it by day and keeping the body under his bed at night until at last, the atmosphere in the room caused his friends to intervene.⁴¹ Under the subsection on bronchial arteries in ‘Arteria’ in *A Medicinal Dictionary*, James notes that between 1719 and 1721 he found some unusual arterio-venous anastomoses on dissection in the chest.

After leaving Oxford, further medical training was undertaken in Leiden under Herman Boerhaave (1668-1738). Leiden was particularly popular with English-speaking students. A direct link between James and Boerhaave was recorded by Gibbs, who noted that James studied medicine in Leiden at the time when Johnson went up to Oxford (1728-29).⁴² Gibbs also made the point that James helped to make Boerhaave’s works more widely known in Britain. Similarly, Boerhaave’s lifelong interest in chemistry must have

³⁹ The medical use of the term ‘depauperated’ is discussed by Kevin Siena, *Rotten Bodies* (New Haven: Yale University Press, 2019), pp. 35-41.

⁴⁰ Diaphoretic and sudorific are terms for inducing sweating.

⁴¹ Ellis, *The Solitary Horseman*, p. 17.

⁴² Frederick W. Gibbs, *The Life and Work of Herman Boerhaave with Particular Reference to his Influence in Chemistry*, PhD Thesis, University of London, 1949, p. 184. Gibbs did not cite a reference, and James is not listed in Innes Smith’s English-speaking students of medicine at the University of Leiden. Gerrit A. Lindeboom, *Herman Boerhaave: the Man and his Work* (London: Methuen, 1968), p. 223.

influenced James, as it influenced William Cullen (1710-1790), professor of chemistry in Edinburgh in 1755 and his successor, Joseph Black (1728-1799), later in the century.⁴³

Work in the Midlands and the fever powders

Throughout this long period of training James would have required financial support. On completing his training, James practised in the Midlands from about 1726 until 1740, although his precise base is unknown. Some of this time may have been spent in Sheffield as noted by Gibbs in discussing the period 1730-1740 when Dr Thomas Short, the resident physician, author and chemist ‘held the field resolutely against all comers’, including Robert James.⁴⁴ No record was left in Lichfield by James as recorded by Charles Burney (1726-1814), who, with his family, was a devotee of James’s fever powder. On a visit to Lichfield in 1797, Charles Burney tried to find the abode of Dr James ‘but the ungrateful Lichfieldites knew nothing about him! I could find only one old man who remembered or knew even that he was a native of the town! “The man who has lengthened life” to be forgotten at his natal place! And already.’⁴⁵ Unlike Johnson and David Garrick, James did not appear to return to Lichfield when established in London but it should be remembered that Kinvaston and not Lichfield was his family home. There is evidence of a conveyance in Birmingham from a Henry Perkins of Lichfield, clerk, to Robert James, doctor on 27 September 1738.⁴⁶ Case reports in his rabies publication, and in the dictionary, refer to patients in Hints near Lichfield, Catton near Lichfield, Tamworth, Burton, and Solihull, but

⁴³ John C. Powers, ‘Chemistry without Principles: Herman Boerhaave on Instruments and Elements’ in, *New Narratives in Eighteenth-Century Chemistry*, ed. by Lawrence M. Principe (Springer: Dordrecht, 2007), pp. 45-61; Rina Knoeff, ‘Practising Chemistry after the Hippocratical Manner’ in, *New Narratives in Eighteenth-Century Chemistry* (Springer: Dordrecht, The Netherlands, 2007), pp. 63-76.

⁴⁴ Frederick W. Gibbs, ‘Robert Dossie (1717-1777) and The Society of Arts’, *Annals of Science*, 7, (1951), 149-172.

⁴⁵ Percy A. Scholes, *The Great Dr Burney*, vol. II (Oxford: Oxford University Press, 1948), p. 163.

⁴⁶ The Library of Birmingham, MS 3211/1/61.

not in Lichfield or Birmingham itself. Few references to contemporary medical colleagues were made by James apart from a brief mention of a surgeon, Mr John Aintree (1701-1751): ‘a person I had some intimacy with when he practised as a surgeon, man-midwife and apothecary, at Wolverhampton’.⁴⁷ Aintree moved to London between 1747 and 1749, living in Norfolk Street, off The Strand.

James may have struggled in the Lichfield area to make a living as a physician and may have supplemented his income from minor surgery, orthopaedics or obstetrics. Indeed, the distinction between physicians, surgeons and apothecaries outside London were often artificial.⁴⁸ Erasmus Darwin (1731-1802) was successful as a physician in Lichfield initially as a result of letters of introduction to Lady Gresley in Drakelow, near Burton, and to the Revd. Thomas Seward in The Close, and also by the cure of William Inge.⁴⁹ He also travelled extensively on his medical rounds in the surrounding area by carriage and on horseback, amounting to an estimated 10,000 miles a year.⁵⁰

It is probably relevant that major demographic and communication changes were occurring in England at this time. London was the largest city in Europe, with a population

⁴⁷ James, *A Dissertation on Fevers*, 8th edn, p. 96.

⁴⁸ Rosemary O’Day, *The Professions in Early Modern England, 1450-1800: Servants of the Commonwealth* (London: Longman, 2000), p. 183 and 249. Irvine Loudon, ‘The Nature of Provincial Medical Practice in Eighteenth-Century England’, *Medical History*, 29 (1985), 1-32, (p. 8). Anne Digby, *Making a Medical Living: Doctors and Patients in the English Market for Medicine, 1720-1911* (Cambridge: Cambridge University Press, 1994), pp. 28-30. The boundaries between physicians and surgeons were also less fixed in Scotland. Anita Guerrini, ‘Scots in London Medicine in the Early Eighteenth Century’ in, *Scots in London in the Eighteenth Century*, ed. by Stana Nenadic (Lewisburg: Bucknell University Press, 2010), p. 166.

⁴⁹ Inge was noted by Anna Seward as being a ‘young gentleman of family, fortune and consequence’. Desmond King-Hele, *Erasmus Darwin* (London: Giles de la Mare, 1999), p. 26. Anna Seward (1742-1809) was a poet, daughter of Thomas Seward, Canon-Residentiary of Lichfield Cathedral, and living in the Bishop’s palace from 1754.

⁵⁰ Desmond King-Hele, *Erasmus Darwin*, p. 82. The death of the physician Heathcot Gilbert in 1719 when his coach overturned whilst travelling from Hampstead to London is a reminder of the dangers of travel at the time. [*Munk’s Roll*, Vol. II (London: Royal College of Physicians)]. James’s experiences may have been similar to those of Messenger Monsey (bap. 1694-1788) of a country practice in Bury St Edmunds, who never earned more than £300 per year, and was in ‘constant fatigue, long journeys, and short fees - in a rusty wig, dirty boots and leather breeches...’ *Munk’s Roll*, vol. II.

rising spasmodically from 630,000 in 1715 to 740,000 in 1760, and to 900,000 by 1801. London contained a high proportion of England's population (11% in 1750).⁵¹ Unlike neighbouring Birmingham, the population of Lichfield was relatively small and stable (Table 2.2).

Table 2.1: Estimated populations⁵²

	Lichfield (including The Close)	Birmingham
1700	3,038	8,000-15,000
1731		23,000
1770	3,771	31,000-40,000
1801	4,842	72,000

During James's lifetime there was considerable investment in communications in England with turnpike roads, navigable waterways and canals allowing a greater movement of people, goods, newspapers and postal services within Britain.⁵³ Porter gave the example that in 1740 there was only one stage coach from Birmingham to London, rising to thirty by 1763. These developments will have assisted in the advertising and distribution of James's fever powders.

Indications of James's experimentation with antimony whilst working in the Midlands is sparse, although James, in defending his claim of discovering the fever powders against

⁵¹ Miles Ogborn, *Spaces of Modernity: London's Geographies, 1680-1780* (London: The Guildford Press, 1998), p. 33.

⁵² Taken from estimates given by Susan E. Whyman, *The Useful Knowledge of William Hutton* (Oxford: Oxford University Press, 2018), p. 5. Joan Lane, *A Social History of Medicine* (London: Routledge, 2001), p. 23, notes there were three physicians in Birmingham in 1767. Jonathan Reinartz, 'Putting Medicine in its Place' in, *Locating Health*, ed. by Erika Dyck and Christopher Fletcher (London: Routledge, 2011), p. 32. William Hutton, *An History of Birmingham*, 3rd edn (London: T. Pearson, 1795), p. 69.

⁵³ As Porter noted, the pace of life quickened. Roy Porter, *Enlightenment: Britain and the Creation of the Modern World* (London: Allen Lane, 2000), p. 41.

that of ‘Baron’ Schwanberg, clearly mentioned the year 1737 when, supposedly, sales were being considered.⁵⁴

Accordingly for about ten years, he employed a great deal of his time in making experiments upon all the known preparations of antimony, and combining that mineral with various other substances, in different manners, in order to bridle the too exorbitant operation of some of its preparation on the one hand, and on the other to avoid reducing it to an inactive calx, as is the case in some preparations. When the doctor had arrived at a due knowledge of the proper medium, in or about the year 1737, and four years before he had ever heard of Schwanberg’s name, he actually articulated with a person in the country, or at least a draft of article was drawn up, for the public sale of the very medicine in question. And the late Mr Ford perused the said draught which he well remembered, and spoke of it not a fortnight before his death, and the attorney who drew it is ready to make an affidavit of the fact.

James’s dissertation on fevers contained case histories responding to the use of the powders in London in December 1741, October 1742 and March and July 1743, showing the powders had either been prepared before James came to London or were prepared shortly afterwards.

Confirmation of James’s interest in antimony comes from *A Medicinal Dictionary* itself, where there are 22 entries for antimony, with antimony being the sixth most common element listed. 2% of the headwords were elements (Table 2.1).

Table 2.2: Number of individual headwords for chemical elements in *A Medicinal Dictionary*

Mercury	62	Gold	17
Copper	32	Arsenic	16
Lead	29	Silver	10
Sulphur	26	Cobalt	3
Iron	23	Bismuth	1
Antimony	22	‘Mixed’	25*

*meaning of mixed is uncertain

⁵⁴ Anon., *An Answer to a Late Scurrilous Pamphlet, Published by one Baker and His Accomplices Respecting Dr James’s Powder and . . .*, p. 8.

Interestingly and revealingly, the detailed entry ‘Antimonium’ in the dictionary runs to thirty-six pages and is the third longest in the dictionary. Other very lengthy articles are ‘Anatomy’ at forty-three pages, ‘Pyretos’ thirty-nine pages and ‘Botany’ twenty-eight pages. In justifying this emphasis on antimony, James cites two references:

A great many excellent medicines are furnished by this mineral, to the regular practice of physic; and most of the empirical Nostrums which have made any considerable figure, have been found to be preparations thereof. Hence it has become a very important subject, insomuch that many volumes have been written concerning it. Amongst these are *Basil Valentine’s Currus Triumphalis of Antimony*, which, by the way, is not always to be depended on;⁵⁵ and *Lemery’s Traite de l’Antimonie*. *Angelus Sala* has also written well upon it.

A detailed description of the ores of antimony and where they are found is followed by various chemical processes. A list of authors who described the medical use of antimony includes, for example, Dioscorides, Galen, Basil Valentinus and Paracelsus. Paracelsus was particularly fond of antimony compounds as medicines and he was probably the first to use antimony solution in wine as an emetic medicine.⁵⁶ After his death, Paracelsus’s chemical medicine was championed by many doctors in Europe, especially in France, and some of these made antimony their most prized remedy. James summarises both the internal and external uses of antimony salts. Antimony ‘dissolves viscidities in the fluids, opens obstructions, and is commended by some as a safe remedy in cutaneous diseases, in consumptions and epilepsies. It is likewise of great use in fattening brutes. The external use is likewise recommended for drying ulcers, in curing the itch, and other diseases of the skin, when mixed in ointments; in plaster for resolving tumors; and in collyria for inflammations, and other affections of the eyes.’ Twenty-eight processes are given for

⁵⁵ Basilius Valentinus, *The Triumphal Chariot of Antimony*, trans. by J. Harding (London: printed for W S, sold by S. Thomson, 1661).

⁵⁶ Chung Y. Wang, *Antimony*, 2nd edn (London: C. Griffin, 1909), p. 3.

making preparations of antimony, each one being followed by ‘remarks’ which are notes by James. The prescient notes for the sixth recipe are particularly important.

For my own part, when I reflect upon the time and pains I have employed in examining into the nature of this regulus, I cannot forebear being surprised at my own patience, and can scarcely help being ashamed to think, that so great a part of my life should have been spent in this inquiry.

Perhaps the most telling comments are in the conclusion of the article on antimony, where James discusses the ethics of patented medicines.

With respect to patents for medicines in general, it is to be observed, that it is not very easy to come at a knowledge of the real efficacy of such remedies; for, in the first place, it is not always certain, that the cases that are published by the proprietors, are literally true in every circumstance; or, tho’ they are, we should only hear of those cases which were attended with success, whereas a thousand cases, where the remedy had no good effect, would be suppressed. There are, however, people enough in the world of more faith than understanding, to make it worth the while of designing men, to vend for secrets the most common preparations of the shops, to their own benefit at least, because the prices of these secrets are usually very exorbitant.

Birmingham

The limited information on the first fourteen years of James’s career is consistent with him being relatively unsuccessful. His comment to Sir Hans Sloane in 1736 begged him not to recommend any more physicians to come to Birmingham, as ‘more would overstock us, so much as to make business not worth attending’.⁵⁷ In this brief letter, written after Swinfen’s death, James commented ‘that I am remov’d from Lichfield to this place, upon the death of my dear friend Dr. Swinfen’, suggesting a warm friendship, and work in the Lichfield area initially. Dr Samuel Swinfen (1679-1736) lived in Number 3, Old Square in Birmingham.⁵⁸ James moved into Number 10, Old Square in October 1737, perhaps

⁵⁷ Letter to Sir Hans Sloane, 10 May 1736, British Library, Sloane MS 4045 f.235.

⁵⁸ Joseph Hill, Robert K. Dent, *Memorials of The Old Square* (Birmingham: Achilles Taylor, 1897), p. 18

hoping to inherit some of Swinfen's medical practice.⁵⁹ I also found evidence of a lease for a year in James's name of premises in Bull Street, Birmingham on 28 April 1738.⁶⁰ In the diary of Dr Richard Wilkes (1690-1 -1760) a successful, contemporary Wolverhampton/Willenhall physician, it is recorded that: 'Upon their death many gentlemen of the faculty flocked thither as being a large place and famous for its trade. In a short time, however, they were reduced to three, Dr Larkin, James and Turton.'⁶¹ It is uncertain when the surgeon, Edmund Hector, another pupil of Lichfield Grammar School, moved to Birmingham but it may have been by 1729, where he lodged with Thomas Warren (1700-1767), the bookseller and printer of the first Birmingham newspaper (*The Birmingham Journal*, from 1732). Thomas Warren, whose house and business stood in High Street,⁶² was an important figure in Johnson's career, inviting him to contribute to the newspaper, and subsequently encouraging him to translate into English a French version of *Journey to Abyssinia* by Jeronimo Lobo. Hector remained a lifelong friend of Johnson, was much respected, and continued to work and contribute to life in Birmingham until his death in 1794. Hector was one of the first subscribers to The General Hospital (started 1776-1779), the prime movers being William Small (1734-1775) and John Ash from 1769. Hector was on the committee of The General Hospital, urging that William Withering should take the place of William Small. Withering spoke warmly of Hector.⁶³ My research

⁵⁹ Ibid., p.77.

⁶⁰ Library of Birmingham, MS 3069/1/167. Bull Street was close to the Old Square.

⁶¹ Richard Wilkes, *The Diary of Dr. Richard Wilkes*, vol. II, 1739-1754. Wellcome Collection, MS5006, pp. 55-56 (copied from the original by Richard Wilkes Unett held by Staffordshire Record Office, D 5320). Dr Turton, Mr Jennings, Dr Davis, Dr Swinfen, Dr Antrobus, Dr Larkin, Dr James, Mr Higgs, Mr Nutall, Mr Brich, Mr Hector, Dr John Christine and Mr Hollier are named by Wilkes.

⁶² 'He chose the prosperous manufacturing town as the scene of his professional career in preference to the dull and lifeless cathedral city' Joseph Hill, Robert K. Dent, p. 25.

⁶³ Hector provided Boswell information about Johnson's early days in Lichfield. Withering later bought Number 15, The Square and, after he purchased Edgbaston Hall in 1786, he continued to use his house in The Square as his town house.

has revealed further evidence that all was not well between the medical personnel in Birmingham, as noted by Wilkes who recorded a disagreement about prescriptions: ‘By these means a paper war was commenced among the physicians and surgeons of Birmingham.’⁶⁴

Whether the rewards of provincial practice kept pace with those of London practice is uncertain, but subsequent eighteenth-century physicians who were successful in Birmingham include John Ash (1723-1798), William Small (1734-1775) and William Withering (1741-1799). Ash arrived in Birmingham in 1750, Small in 1765 and Withering in 1775. Ash provides a distinct contrast to James as he was successful in cultivating contacts with several important families in and around Birmingham, something which James appeared to fail in. Ash’s affability, social status, prosperity, and self-assurance helped him to establish his reputation and enabled him to be successful in founding The General Hospital, Birmingham, depicted behind the trees on the left side of his portrait (Figure 2.4).⁶⁵

⁶⁴ Wilkes, *The Diary of Dr. Richard Wilkes*, pp. 55-56.

⁶⁵ Rachel Waterhouse, ‘Portrait of a Marginal Man; Dr John Ash and his Career’ in, *Medicine and Society in the Midlands, 1750-1950*, ed. by Jonathan Reinarz (Birmingham: Midland History, 2007), pp. 12-26. Porter and Porter, p. 119, noted that payment was a problem and fashionable clients could be up to eighteen months in arrears with their bills.

Figure 2.4: John Ash by Joshua Reynolds, 1788



The portrait is now in the Birmingham Museum and Art Gallery.

The same year that John Ash arrived in Birmingham, an ambitious, self-taught, ‘rough diamond’, William Hutton (bookseller and author, 1723-1815) came from Derby and was not deterred on finding the town already had three booksellers. Ash provided medical care for the Hutton family.⁶⁶ Another successful rough diamond, and close friend of Hutton, was John Baskerville (1707-1775). He came to Birmingham in about 1726, started his

⁶⁶ Susan E. Whyman, *The Useful Knowledge of William Hutton; Culture and Industry in Eighteenth-Century Birmingham* (Oxford: Oxford University Press, 2018). p. 44.

successful business of japanning (varnishing with a resin base) in 1738 and the printing press from 1748. Although printing had started in Birmingham in 1717, it was not until Baskerville became printer for the Cambridge University Press in 1758 that printing and publishing in Birmingham became more than of purely local significance.⁶⁷ Whyman notes that Birmingham at that time did not have a resident leisured class and no well-established middle class.⁶⁸ In fact, Birmingham was somewhat tardy in keeping up with the cultural and recreational aspects of the urban renaissance, as noted by John Hinks.⁶⁹ Developments in Birmingham in James's lifetime were therefore largely in manufacturing rather than in literature and the arts, and he left many years before the founding of the Lunar Society in 1765. A comment made by Welsh confirmed that James had financial problems.

'He was a profound scholar, an excellent chemist, and an admirable physician . . . for at his outset, and for several years afterwards, he was in embarrassed circumstances, and gained a livelihood principally by writing for booksellers'.⁷⁰ Although Ash was successful in Birmingham, other aspiring physicians, like James, struggled in provincial towns. Erasmus Darwin's initial practice in Nottingham did not prosper until he moved to Lichfield; William Withering struggled financially, even though he was appointed to Stafford Infirmary in 1767, earning £100 per annum until moving to Birmingham in 1775, where he

⁶⁷ Joseph Hill, *The Book Makers of Old Birmingham* (Birmingham: Shakespeare Press, 1907).

⁶⁸ The Lunar Society came later, with meetings from c.1765-c.1813, and Joseph Priestley did not move to Birmingham until 1780.

⁶⁹ John Hinks, 'Baskerville's Birmingham: Printing and the English Urban Renaissance' in, *John Baskerville: Art and Industry of the Enlightenment*, ed. by Caroline Archer-Parré, Malcolm Dick (Liverpool: Liverpool University Press, 2017), p. 29.

⁷⁰ Charles Welsh, *A Bookseller of the Last Century* (London: Griffin et al., 1885; reprinted Clifton: A. Kelley, 1972), p. 25.

boosted his earnings to £1,000 per annum.⁷¹ Nearby, Mark Akenside (1721-1770) failed to establish a practice in Northampton.

A critical moment in the lives of Johnson, David Garrick, and perhaps James, came on 25 November 1734 when Samuel Johnson wrote from Birmingham to Edward Cave (1691-1754) in London, offering to write for *The Gentleman's Magazine*.⁷² The original letter to Cave may have been prompted by Johnson's reading of the magazine or through Thomas Warren, but I discovered another possible connection between James and Cave facilitating Johnson's original letter. This could have occurred through the fact that Cave's family in Newton, Warwickshire, were living close to James's grandfather, Mr Robert Clark of Welton Place. James recorded that he knew Welton Place 'better than I do Bruton Street, where I now live'.⁷³ The relationships of James with the bookseller, Thomas Warren, and with the publisher, Edward Cave, were likely to have been his first with the publishing business. Subsequently, Cave sent Johnson's poem '*London*' to Robert Dodsley which provided another important link within the world of publishing in London.

Moving to London and *The Rational Farmer*

Johnson and Garrick travelled to London in 1737 by the 'rode and tied' system using one horse. The only assets Johnson brought with him were the published translation of *A Voyage to Abyssinia* (1734) and the manuscript of his tragedy *Irene*, little more than James, who had published a letter in *Philosophical Transactions* and had written part of a book, *The Rational Farmer* (discussed below). The motives behind James's move to London in

⁷¹ Mark Silverman, 'William Withering and "An Account of the Foxglove"', *Clinical Cardiology*, 12 (1990), 415-418.

⁷² Edward Marston, *Sketches of Some Booksellers of the Time of Dr Samuel Johnson* (London: Marston, 1902). Reprint (Clifton: Augustus Kelley, 1972), p.119. Johnson's contributions to the magazine continued from 1738 and, in February 1740, Cave committed the writing of reports on parliamentary debates to Johnson.

⁷³ Robert James, *A Treatise on Canine Madness*, p. 249.

1740 can only be surmised, but may have included the influence and example of Johnson and Garrick, combined with professional and business difficulties in Birmingham. The business problems started in June 1738 when a patent was obtained for a roller-spinning machine by Lewis Paul (d.1759).⁷⁴ This machine was developed with the inventor, John Wyatt (1700-1766).⁷⁵ A cotton mill was set up in Birmingham in 1741 with the additional financial backing of Thomas Warren, the bookseller, for £1,000, and Mrs Desmoulins (Dr Swinfen's daughter), Edward Cave and James for smaller sums.⁷⁶ The total was 'more than £5,000 which he has consumed so as to be in danger of breaking, to coming to poverty' as recorded by Wilkes.⁷⁷ After looking at the machine, James wrote a positive note: 'I am certain that if Paul could begin with ten thousand pounds, he must, or at least might, get more money in twenty years than the city of London is worth.'⁷⁸ The invention was important for the future cotton industry, but the mill was not a commercial success and only operated for about two years. Warren became bankrupt in 1743, and James's financial difficulties may have been aggravated by the loss of his investment.⁷⁹ Johnson acted as intermediary for Lewis Paul and his financial backers, for example writing in a letter of 31 January 1741 'Dr James presses me with great warmth to remind you of your promise that you would exert your interest with Mr Warren to bring their affairs to a speedy conclusion'

⁷⁴ In 1732, Paul invented a pinking machine for making the edges of shrouds out of which he gained some profit, and he worked on the spinning machine from about 1735.

⁷⁵ Wyatt was another former schoolboy of Lichfield Grammar School, and a senior member of a remarkable dynasty of architects who came from a similar farming background as James but from a different village, Weeford, just south of Lichfield (see Figure 2.2). The Wyatt and Johnson families were connected through Samuel Johnson's mother, Sarah Ford, whose nephew married Benjamin Wyatt II. Woodrow Wyatt, *The Journals of Woodrow Wyatt*, vol.II, ed. by Sarah Curtis (London: Macmillan, 1999), p. 676.

⁷⁶ Bruce Redford, ed., *The Letters of Samuel Johnson*, vol. I, 1731-1772, Hyde edn (New Jersey: Princeton University Press, 1992), pp. 24-26. Wilkes, pp. 55-56, records that the total sum was more than £5,000.

⁷⁷ Wilkes, *The Diary of Dr. Richard Wilkes*, pp. 139-140.

⁷⁸ John Wyatt, *Master Carpenter and Inventor* (London: Hamilton, Adams, 1885), p. 17.

⁷⁹ Many details of this joint undertaking were lost when most of the Paul papers were burned in 1879.

and later refers to this ‘vexatious affair’.⁸⁰ The dispute with Paul continued for several years, and James may have failed to pay what he owed, as indicated in Johnson’s letter in 1756.⁸¹ Associated with a letter sent to Lewis Paul on 31 March 1741, Redford adds an interesting footnote:

According to the sale catalogue of the Paul papers, 19 July 1867, Dr James and Warren appear to have contracted for James to supply pills and vulnerary balsam, and Warren to publish in numbers *The Rational Farmer*, with an herbal; also the *American Traveller*, of which book Dr James would seem to have been the author.⁸²

This provides evidence of further commercial activity and for the start of work on his first substantial publication, *The Rational Farmer*, before going to London in September 1740, though it was not actually published in Birmingham. The first edition gave no author.⁸³ The second edition (1747) stated the book was by the author of the new *A Medicinal Dictionary*. Anonymous publications were common and indeed the ethics of attaching names to publications was much debated, some deploring the practice as betraying vanity. Anonymity prevented any challenge to the author or editor by readers. This could be important if the subject was religious, political, satirical or obscene. Erasmus Darwin advised that it was prudent not to get too much of a reputation as a scholar or a scientist because a young physician would be in danger of being thought singular and eccentric.

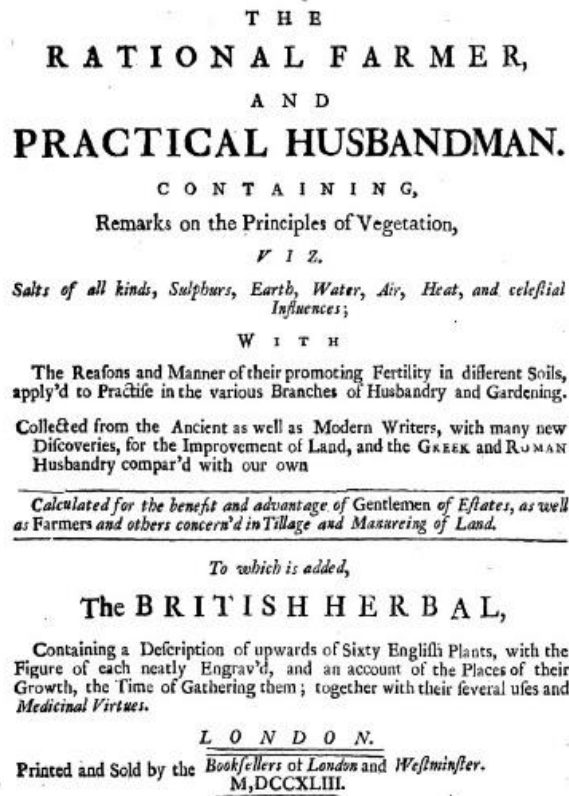
⁸⁰ Bruce Redford, *The Letters of Samuel Johnson*, p. 24-26.

⁸¹ ‘I am now thinking about Hitch. I am yet inclined to believe that he will rather lend money upon spindles, a security which he has found valid, than upon a property to be wrung by the law from Dr James, who will not pay. . . Hitch has a dislike of James’. *The Letters*, vol. I, pp. 128-129. Charles Hitch (1733-1764) was a bookseller in Paternoster Row and co-publisher of Johnson’s dictionary.

⁸² Redford, p. 27. The comment on supplying pills and vulnerary balsam as quoted above indicates an early pharmaceutical interest. I found no confirmation that James was the author of the *American Traveller* as the two possible publications with this title refer to America and the West Indies, one being anonymous *The American Traveller* (London: J. Fuller, 1741) and the other by Alexander Cluny, *The American Traveller* (London: E. & C. Dilly et al., 1769).

⁸³ *The Rational Farmer*, 1st edn (London: Printed and sold by the booksellers of London and Westminster, 1743). Matthew Peters in the Isle of Wight published a book with a similar title in 1770 but with no reference to James. Matthew Peters, *The Rational Farmer* (Newport: W. Flexney, 1770).

Figure 2.5: Title Page of *The Rational Farmer*



This publication has hitherto received little attention from scholars but gives some insight on James and his early ambitions. The rural background in Staffordshire explains James's interest in and knowledge of natural history, his fondness of animals and his love of horse riding. For example, under 'Venatio' (hunting) in the dictionary, James extols the value of horse riding;

And I believe there are few people not utterly abandoned to idleness and debauchery, of some kind or another, who do not perceive a spontaneous flow of spirits, when they ride on horseback at or about the rising of the sun, when they respire the purest air, when variety of perpetually changing scenes present themselves and when the mind is agreeably agitated concerning the event of the chase.

Indeed, Sir Edward Turner considered him as good a farmer as he was a physician.⁸⁴ In a letter of 25 May 1756, Turner noted that ‘Doctor James is not only a good physician but a good manurer of ground by means of alkaline salts. Two cows from Alderney and choice of hen coups adorn his suburban farm on the other side of Westminster Bridge.’⁸⁵ Two comments were made by James in Johnson’s edition of the plays of Shakespeare, one on the meaning of ‘several’ in *Love’s Labours Lost* (which he claimed should be spelled ‘severell’) and the meaning behind the comment ‘The nine men’s Morris is filled up with mud’ in *A Midsummer Night’s Dream*.⁸⁶ His farming experience also led him to experiment and first publish on rabies.⁸⁷ In *The Rational Farmer*, basic chemistry and biology are explained to the farmer in three chapters (Chemistry, Structure of Plants and Vegetables, and the Growth of Plants) with a British Herbal as a second part.⁸⁸ In the introduction to what is entitled Book 1, Chapter 1, the proposed contents of the publication are outlined and these subjects are covered. The proposed contents are then expanded to cover soils, tillage/dressing of land, cereal crops, pulses, root crops, flaxes, grasses, forest and fruit trees, hops etc., the kitchen and flower garden, horses, cows, sheep, swine, rabbits, pigeons, poultry, aquatic fowls, bees and the weather. These sections were not written, so the work is incomplete and the title misleading. The text in *The Rational*

⁸⁴ William Hawkes, ed., *The Diaries of Sanderson Miller of Radway, Together with His Memoir of James Menteath* (Bristol: The Dugdale Society, 2005), p. 118. James was unusual, but not unique, in combining a physician’s career with authorship and farming, other examples being Alexander Hunter in York and William Cullen in Edinburgh. Michael Brown, *Performing Medicine* (Manchester: Manchester University Press, 2011), pp. 52-54.

⁸⁵ Lilian Dickens, Mary Stanton, *An Eighteenth-Century Correspondence* (London: John Murray, 1910), pp. 335-336.

⁸⁶ Samuel Johnson, George Stevens, eds., *The Plays of William Shakespeare* (London: C. Bathurst et al., 1773), vol. IX, Appendix II, p. 29; vol. III, Appendix II, p. 370.

⁸⁷ Robert James, ‘A letter from Dr Robert James, of Lichfield, to Sir Hans Sloane, Bart. Pr.R.S. containing some experiments made upon mad dogs with mercury’, *Philosophical Transactions*, 39 (1735), 244-250.

⁸⁸ It is of interest that William Cullen who promoted chemistry was also involved in agriculture and in the management of a farm. Jan Golinski, *Science as Public Culture: Chemistry and Enlightenment in Britain, 1760-1820* (Cambridge: Cambridge University Press, 1992), p. 31.

Farmer is different from the equivalent articles in *A Medicinal Dictionary*. In *The Rational Farmer* there are descriptions of light measured in grains, and of static electricity, neither of which have significant entries in *A Medicinal Dictionary*.

The letter in the *Proceedings of the Royal Society* on rabies together with the incomplete, unpublished script of *The Rational Farmer* in James's pocket were all that Thomas Osborne could use to judge James's literary skills when they first met in London. Professional and financial reasons may have been the main motives for moving to London. There was no evidence of criminal wrong-doing or mental health problems as reasons for changing medical practice.⁸⁹ However, there may have been additional social concerns.

Marriages

Little has been recorded about James's romances, despite a reputation for being an 'assiduous womanizer'.⁹⁰ Double standards were applied to prostitution, which was not illegal.⁹¹ A reference dating back to Edmund Hector, who told Boswell that he had heard from Peter Garrick (1710-1795), David's older brother, that Johnson, James and a man called Benjamin Victory were the three 'gallants' of the 'dissolute' wife of Lewis Paul. Apparently, James was fond of her before she married, but then grew tired of her and to get rid of her he palmed her off to Dr Larkin by giving her a guinea.⁹² Another early reference was recorded by David Garrick in a letter to Captain Peter Garrick dated 10 April 1735 from Lichfield, 'Sir Wolsley's Runcy Colt is Miss Legard. Sir William formerly made love

⁸⁹ Alannah Tomkins, *Medical Misadventure in an Age of Professionalisation* (Manchester: Manchester University Press, 2017).

⁹⁰ 'In his Birmingham days he had also been known as an assiduous womanizer, and he persisted in his lechery to an advanced age.' Thomas A.B. Corley, 'Robert James' in, *Oxford Dictionary of National Biography* [accessed 8 December 2018]. No reference is cited for these allegations. Similarly, Clifford noted James was 'a notorious rake.' James L. Clifford, *Dictionary Johnson* (New York: McGraw-Hill, 1979), p. 45.

⁹¹ Robert B. Shoemaker, *Gender in English Society, 1650-1850* (London: Longman, 1998), pp. 76-77.

⁹² Marshall Waingrow, ed., *The Correspondence and other Papers of James Boswell Relating to the Making of The Life of Johnson*, 2nd edn (Edinburgh: Edinburgh University Press, 2001), p. 71. I could find no further reference to Dr Larkin.

to her. She has been constant by Dr James which is mentioned in the satire'. The satire referred to was written by David Garrick as a horse race, and gentlemen and ladies were called by horses' and mares' names.⁹³ Much later in London, an event involving a mistress was recorded by Boswell.

Murphy and Thrale both concurred in having heard Mr. Johnson tell that Dr. James came one day in his chariot (or coach) and took him up. There was a lady in it, whom Mr. Johnson treated with great respect. She proved to be Dr. James's kept mistress. Mr. Johnson was very angry, and told him, "Sir, at my time of life and your time of life, it is indecent to be driving about the streets with a whore". Said James: "I am very sensible it is very indecent of both of us. But such is my infirmity, that if I go six weeks without a woman, my ballocks swell so that I cannot keep them in my breeches". "Was not this a gross fellow?" said Mr. Johnson.'⁹⁴

These stories provide some evidence of James's womanising. I have also uncovered that James had two apparently stable marriages. According to Ellis, 'His early years in the medical profession were strenuous and straitened, and he was not unacquainted, owing to debt, with the Fleet Prison (where his first marriage, with the daughter of a baronet, took place)'.⁹⁵ I could find little corroborative evidence to confirm whether it took place in London or in Birmingham, or the identity of the daughter of a baronet. The marriage is stated to have taken place in Birmingham in 1737 in a footnote to the particulars of Johnson's life given by Edmond Hector to James Boswell.⁹⁶ This marriage would appear to have been childless. At his death, James left behind a family of five children: three sons,

⁹³ David Little, George Kahrl, p. 17.

⁹⁴ Charles Ryskamp, Frederick A. Pottle, eds., *Boswell: the Ominous Years, 1774-1776* (London: William Heinemann, 1963), pp. 113-14.

⁹⁵ Ellis, *The Solitary Horseman*, p. 17. Fleet, or irregular marriages, were common in London in the Fleet Prison area. In the 1740s as many as 6,000 Fleet marriages took place annually or almost half the marriages in London. The marriages were normally celebrated in inns and taverns and cost about 7s/6d before drink. The practice was ended by Lord Hardwicke's Marriage Act of 1753. I found two Fleet marriages mentioning a Robert James; on 10 February 1734 to Jane Couchett of St Botolph, Aldersgate and in 1737 to Elizabeth Sanders. These cases show no evidence that they referred to Dr Robert James.

⁹⁶ Waingrow, *The Correspondence and other Papers*, p. 74.

Robert Harcourt James (baptised 23 January 1757⁹⁷) who went to St John's College Oxford in 1774), George James, Pinkstan James (baptised 3 December 1763⁹⁸), and two daughters (Frances Ann and Elizabeth Orme). He thus provided a good lineage, which was the pre-occupation of middling sort of men.⁹⁹ As his children were underage, James's friends, John Newbery and the surgeon, Mr Pinkstan, were appointed executors and guardians.¹⁰⁰ The young age of the children at James's death at the age of seventy-three years is consistent with the idea that James was married a second time. This second marriage was to Mrs Ann Clare, *née* Stephens, daughter of Sir James Clarke and would have taken place sometime after 1750 when James was between the ages of forty-seven and fifty-three years. Ann is mentioned in James's Will (dated 7 July 1774) with a gift of £200, an annuity of £200pa. and all his estates at Hampton Wick for life with the remainder to his son Robert Harcourt James. His daughters were given 'my best diamond ring' (Francis) and 'my best repeating watch' (Elizabeth).¹⁰¹

In summary, these early years show a stable country background with sufficient wealth in the family to contemplate a good basic education and a long period of medical training. Good language skills and an interest in chemistry were developed. They also demonstrate James's independent and entrepreneurial character. Subsequent financial difficulties and the apparent failure to create a medical practice in Birmingham led to the move to London.

⁹⁷ St George's, Hanover Square, London.

⁹⁸ St George's, Hanover Square, London.

⁹⁹ Karen Harvey, *The Little Republic: Masculinity and Domestic Authority in Eighteenth-Century Britain* (Oxford: Oxford University Press, 2012, p. 178.

¹⁰⁰ Welsh, p. 138; Pinkstan James (1763-1830) was probably named after Fleming Pinkstan, who practised in Hanover Square, London and was Master of the Company of Surgeons in 1779 and was presumably a friend of James though not referred to by him. Pinkstan James was the father of George Payne Rainsford James (1799-1860). G.P.R. James became famous as the prolific and popular author of *Richelieu* and other historical romances. Another grandson, R.G.G.G. James, marketed his own version of the fever powders.

¹⁰¹ Ellis, *The Solitary Horseman*, p. 23.

London

The move to London by September 1740 was noted in a letter dated 4 September 1740 from David Garrick to his elder brother, Peter. ‘Dr James is come to town for good and all, I (hope) he’ll do very well . . .’¹⁰² His lodgings and house moves reflect increasing affluence, starting in Dartmouth Street, Westminster, then moving to Craven Street, Charing Cross and Southampton Street, Covent Garden, and later to Bruton Street, Mayfair. He developed his property at Hampton Wick, and bought land in Lambeth Marsh. The Lambeth site contained a large mansion and space for keeping animals, and was near the laboratory used for the manufacture of the fever powders (noted in Figure: 2.10). This sequence illustrates the vibrancy of the city at that time and James’s successful career, re-emphasising his entrepreneurial character. The properties may also be viewed as a principal aspect of an authoritative style of masculinity.¹⁰³

Authorship

Print culture had expanded rapidly following the lapse of the Licensing Act in 1695 and, with this, writing became a principal method of advertising, gaining a reputation and earning some money. As noted by Brown, publications provided proof of liberal tastes and learning, and medicine was not just a trade.¹⁰⁴ In many respects, James was following Johnson’s example on arrival in London. Self-advertisement was the norm and, initially through his writings and later through the fever powders, James advertised widely. As a result of time spent writing, James felt he had to defend himself against attacks for

¹⁰² David Little, George Kahl eds., *The Letters of David Garrick*, vol. I, Letters 1-334, (London: Oxford University Press, 1963), pp. 25-26

¹⁰³ Karen Harvey, *The Little Republic*, p. 134.

¹⁰⁴ Michael Brown, *Performing Medicine*, pp. 50-51.

spending ‘all my days in study, and had never meddled with practice’.¹⁰⁵ James’s boastful counter-argument was that he ‘entered upon practice extremely young, and had an opportunity of visiting more patients, and conducting more cases than I believe any man ever did in the same number of years’.¹⁰⁶ James did not leave any written record of the publisher, Thomas Osborne, or how they met. Further consideration of Osborne is contained in Chapter 3. It is likely that Johnson was involved, and James may have been looking for a publisher for his method of preventing and curing rabies and for *The Rational Farmer*. James had submitted a paper to the Royal Society in February 1741 on *A New Method of Preventing and Curing the Madness Caused by the Bite of a Mad Dog*. This was printed for the Society of Booksellers for Promoting of Learning, and sold by Osborne and Smith sometime in 1741. Whether James was impressed with Osborne’s newly formed but short-lived Society of Booksellers, which attempted to recognise authors’ rights, is unknown. Another publishing connection that may have been important was Robert Dodsley (1703-1764).¹⁰⁷ On his arrival in London, Johnson was introduced to Dodsley by Edward Cave.¹⁰⁸

Once the initial contacts were made there was little delay in setting up the dictionary. The articles for writing *A Medicinal Dictionary* were signed by James, and the *Proposals*, written by James and Johnson, were published in June 1741. I have explored these in more detail in Chapter 3. It must be assumed, but not known for certain, that Thomas Osborne

¹⁰⁵ Robert James, *A Dissertation on Fevers*, (1778), p. 100.

¹⁰⁶ O.M. Brack, Thomas Kaminski, ‘Johnson, James and the *Medicinal Dictionary*’, *Modern Philology*, 11 (1984), 378-400, (p. 384).

¹⁰⁷ Raven noted that the powerful booksellers and publishers in the mid-eighteenth century were Andrew Millar, Thomas Cadell, Robert and James Dodsley, Jacob Tonson, Bernard Lintot and John Knapton, but not Osborne. James Raven, *Publishing Business in Eighteenth-Century England* (Woodbridge: Boydell Press, 2014), p. 39. James Dodsley died worth more than £70,000 and Tonson more than £40,000.

¹⁰⁸ Dodsley published (anonymously) Johnson’s poem ‘*London*’ in 1738, for which Johnson was paid 10 guineas.

was a partner in the Booksellers of London and Westminster, publishers of the first and second editions of James's *The Rational Farmer*. James continued to associate with Osborne after the publication of *A Medicinal Dictionary*. His treatise on gout and rheumatism contained case reports, reviews of some other authors and discussed the use of mercury.¹⁰⁹ A revised edition of a book by Thomas Moffet (1553-1604) followed.¹¹⁰ This book had a complex history, and it is not clear how James became involved, but probably through Thomas Osborne and William Oldys (1696-1761). Simon Paulli's treatise was published in 1746.¹¹¹ It was soon after the printing of *A Medicinal Dictionary* that James published a translation of the pioneering book on occupational diseases *De Morbis Artificum Diatriba* by Bernardino Ramazzini (1633-1714) which I discuss in Chapter 4.¹¹² After 1746, when James was making and marketing the fever powders, he used various publishers, including G. Strahan, J. Hodges, J. Whiston and J. Newbery, but not Osborne. Other substantial works by James included a comprehensive textbook of medicine, which was a translation of Boerhaave's medical works, together with those of Friedrich Hoffmann.¹¹³ The preface to the first volume contained a tribute to Boerhaave. Another

¹⁰⁹ Robert James, *A treatise on the gout and rheumatism* (London: T. Osborne, J. Roberts, 1745). The case of Walter Baker, printer, provides an important link to Samuel Richardson, a publisher, printer and author.

¹¹⁰ Thomas Moffet, *Health's Improvement: Or Rules Comprising and Discovering the Nature, Method and Manner of Preparing All Sorts of Foods Used in This Nation* corrected and enlarged by Christopher Bennet with a short view of the author's life by Mr. Oldys and an introduction by R James, (London: T. Osborne, 1746).

¹¹¹ Simon Paulli, *A Treatise on Tobacco, Tea, Coffee and Chocolate*, trans. by R. James (London, York, Newcastle and Bath: T. Osborne, London, J. Hildyard, York, M. Bryson, Newcastle, J. Leake, Bath, 1746).

¹¹² Bernardino Ramazzini, *A Dissertation on Endemical Diseases*, trans. by R. James, 1st edn (London and York: T. Osborne, J. Hildyard, 1746). *Health Preserved in Two Treatises* (London: J. Whiston, J. Woodyer, 1750). A second edition was published four years later.

¹¹³ Herman Boerhaave, Friedrich Hoffman, *The Modern Practice of Physic*, in 2 vols., trans. by Robert James (London: J. Hodges, 1746). Hoffmann (1660-1742), using the more usual spelling of his name, was Professor in University of Halle, and had an impact on British medicine. William Cullen in Edinburgh preferred him to Herman Boerhaave, though he did not attract a large following of students. W.F. Bynum, 'Health, Disease and Medical Care' in, *The Ferment of Knowledge: Studies in the Historiography of Eighteenth-Century Science* ed. by G.S. Rousseau, Roy Porter (Cambridge: Cambridge University Press, 1980), pp. 211-253 (p. 218).

substantial work written by James was *Pharmacopoeia Universalis*.¹¹⁴ It would have been tempting for James to extract the *materia medica* from *A Medicinal Dictionary for The English Dispensatory*, which went through three editions. I sought evidence for this by comparing a limited number of sections. In Part 1, for example, the texts for ‘Detonation’, ‘Extraction’, ‘Incorporation’, ‘Menstruum’, ‘Sublimation’ and ‘Volatilization’ are different, whereas ‘Filtration’ and ‘Lutes’ are the same, and ‘Distillation’, ‘Precipitation’ and ‘Trituration’ are not in the dictionary. In Part 2, the entry for ‘Anodynes’ is different, but ‘Alternatives’, ‘Cardiacs’, ‘Cephalics’, ‘Diuretics’ and ‘Topics’ are very similar or identical. In Part 4, ‘Electuaries’, ‘Syrups’ and ‘Troches’ are again different. The dictionary does indeed provide some material for this pharmacopoeia, but there is also a considerable amount of original material not included in the dictionary. I have discussed this book again in Chapter 4.

Books were just one way of imparting knowledge. Apprenticeships and lectures were additional methods in which James did not appear to participate. Whereas the initial motives for writing were probably the need to earn a living and to advertise, James’s output can also be considered a part of the shaping of medical knowledge. He mainly contributed to learned publications rather than to medicinal literature for the lay person, as outlined by Porter and Porter.¹¹⁵ Despite his familiarity with classical authors and his language skills, James did not publish English translations of these authors. It is difficult to know whether the substantial work on the dictionary had any effect on James as an author

¹¹⁴ Robert James, *Pharmacopoeia Universalis or a New Universal English Dispensatory*, 1st edn 1747, 2nd edn 1752, 3rd edn 1764 (London: J. Hodges, J. Wood). Italian translation. *Nuovo Farmapea Universale* (Niccolo below Pezzana, 1758).

¹¹⁵ Dorothy Porter, Roy Porter, *Patient’s Progress; Doctors and Doctoring in Eighteenth-Century England* (Cambridge: Polity Press, 1989). Also (Stanford: Stanford University Press, 1989), pp. 197-201.

apart from what has already been noted above on translations and the pharmacopoeia. The reason why James's innovative writing effectively stopped after 1750 may have been due to the promotion and increasing success of his fever powders. The final part of his career was dominated by the manufacture and sale of these powders and practising as a physician.

Patented medicines

The sale of proprietary medicines was an important part of the income of many publishers and booksellers, who became involved in both the advertising and distribution of medicines.¹¹⁶ Osborne did not appear to be involved in such commercial activity, which may have been the reason why James became partnered with John Newbery (bap.1713-1767). Like James, Newbery was the son of a farmer, and had experience of selling medicines when working for *The Reading Mercury*.¹¹⁷ A strong commercial link was formed between them in 1746 for the sale of the fever powders.

¹¹⁶ Peter Isaac, 'Pills and Print' in, *Medicine, Mortality and the Book Trade*, ed. by Robin Myers, Michael Harris (Folkestone: St Paul's Bibliographies, 1998), p. 29. Alan Mackintosh, *The Patent Medicines Industry in Georgian England: Constructing the Market by the Potency of Print* (Basingstoke: Springer International, 2017). Elizabeth L. Furdell, *Publishing and Medicine in Early Modern England* (Rochester: University of Rochester Press, 2002). Furdell stressed the long history of this practice, giving a similar example of Daniel Brown the publisher and John Colbatch's 'Vulnerary Powder' and the publication of *Novum Lumen Chirurgicum or the New Light on Chirurgery* (London: Daniel Brown, 1695).

¹¹⁷ John Rowe Townsend, *John Newbery and his Books* (Lanham, Maryland: The Scarecrow Press, 1994), p. 149.

Figure 2.6: A Packet of James's Fever Powder



On loan to Erasmus Darwin House, Lichfield, from the Royal Pharmaceutical Society.
Date of the packet unknown.

Figure 2.7: Advertisement for Dr James's Powder

**Dr. James's Powder for
F E V E R S ,**
And other Inflammatory Distempers.

*Publis'd by Virtue of
His Majesty's Royal Letters Patent;*

WILL remove (as has been Experienced in many thousand Cases) any continual Acute *Fever* in a few Hours, though attended with Convulsions Light-headedness, and the worst Symptoms: But if taken in the Beginning of a Fever, *one Dose* is generally sufficient to perform a Cure.

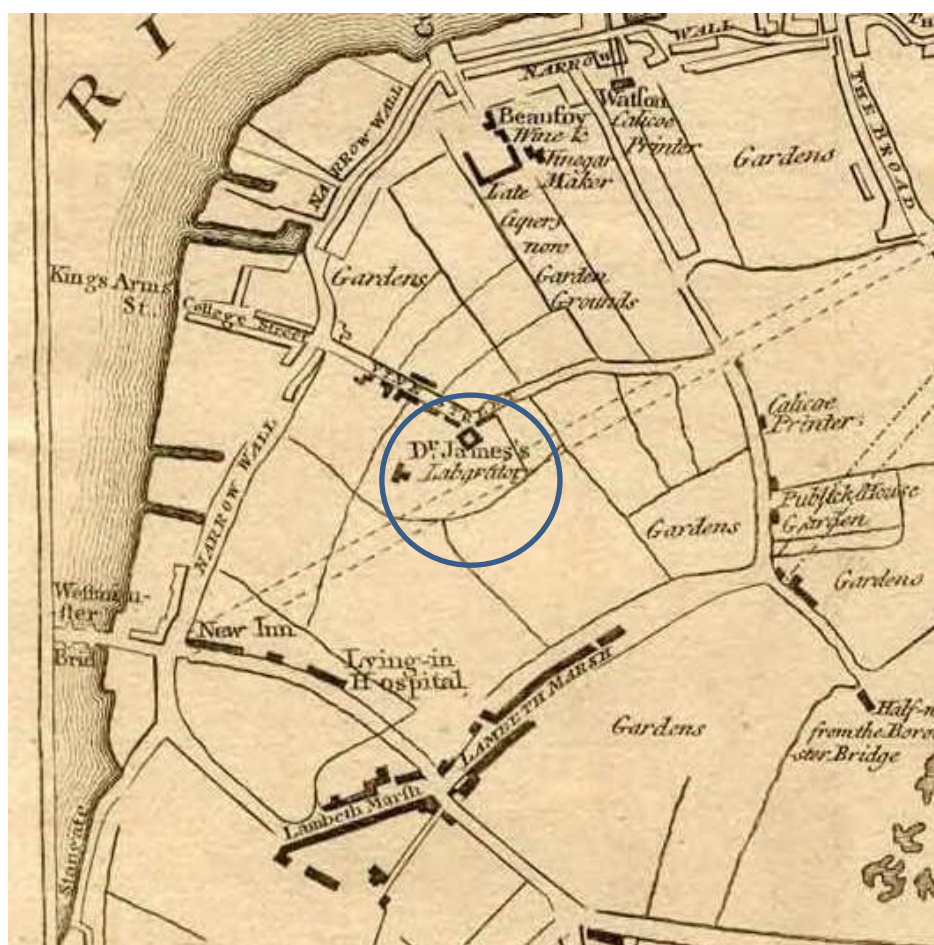
These POWDERS are Sold only by J. NEWBERRY, at
The Bible and Sun in S^t. Pauls Church Yard, over against the North-Door of the Church, at 2^s. 6^d. the two Doses; with good Allowance to those who buy them for Charitable Uses or to Sell again.

F. Aldrich, Sculp^r. G. Kneller, Delin^r.

© Wellcome Collection, London

This ostentatious advertisement claimed it could cure any fever in a few hours. The fever powders could be considered the aspirin of the eighteenth century, and James is probably better known by scholars today for these powders than his writings.¹¹⁸ The fever powders contained oxide of antimony and calcium phosphate, and were manufactured under James's supervision and sold widely.¹¹⁹

Figure 2.8: Plan of the Surrey side of the Thames.



Dr James's laboratory is a named feature on the map. A scheme for laying out new roads is marked as dotted lines. James built a house in Lambeth Marsh.

From *The Gentleman's Magazine*, 1766.

¹¹⁸ B. Hill, 'Dr James's Powders', *The Practitioner*, 171 (1953), 71-76; J.K. Crellin, 'Dr James's Fever Powder', *Transactions of the British Society for the History of Pharmacy*, 1 (1974), 136-143.

¹¹⁹ George Pearson, J. Banks, 'Experiments and Observations to Investigate the Composition of James's Powder', *Philosophical Transactions*, 81 (1791), 317-367.

The publication relating to the fever powders went through eight editions.¹²⁰ The fever powders had diaphoretic effects without emesis, satisfying much of the contemporary medical thought about affecting humours and restoring their balance. The fever powders were patented in 1747 and the patent was challenged unsuccessfully in 1753 on the grounds of being copied from the German, William Schwanberg. It is of interest that the difference between James's powder and the late Schwanberg's preparation was referred to by David Garrick in the introduction to his play *Lilliput* in 1757.¹²¹ In the agreement with Newbery in 1746, James undertook to make the medicine for twenty-one years (8d per box of two pills and 8d per box for two doses of the powders) and that he would not undercut Newbery. James was left the freedom to sell abroad as long as he paid Newbery 6d per box. The cost of the powders was 2s 6d for two 20-grain doses with a discount for large quantities at £1.- 2s.- 6d. for a dozen. The success of the powders was reflected in James's claim that 1.6 million doses had been sold by Newbery between 1746 and 1764.¹²² Newbery's accounts showed that in 1768/9 sales were a little less than 20,000 packages, rising to 38,000 packages in 1775. Some indication of the scale of the business may also be deduced from the 'usual' supply of 500lb of antimony supplied by William Jones, Druggist and Chymist in 1772.¹²³ The powders were exported and there is evidence of their use in North America, the West Indies, Persia and India.¹²⁴ The powders were so successful that they remained in production, being recorded in Queen Victoria's medicine chest in 1860,

¹²⁰ Robert James, *A Dissertation on Fevers and Inflammatory Distempers: Wherein a Method is Proposed of Curing, or at Least Removing the Danger Usually Attending Those Fatal Disorders* 1st edn (London: J. Newbery, 1748).

¹²¹ David Garrick, *Lilliput, a Dramatic Entertainment* (London: J. Hoey, W. Whitestone, S. Price, 1757).

¹²² Robert James, *Dissertation*, 6th edn 1764.

¹²³ James Gray, Thomas J. Murray, 'Dr Johnson and Dr James' in, *The Age of Johnson, a Scholarly Annual*, vol. VII, ed. by Paul J. Korshin (New York: AMS Press, 1996), p. 244.

¹²⁴ Christopher Hamlin, *More Than Hot; A Short History of Fever* (Baltimore: Johns Hopkins University Press, 2014), pp. 106-107.

and being manufactured until 1941. The last entry in Martindale was in that year. A letter written in 1964 by the managing director of May, Roberts & Co. Ltd., wholesale and manufacturing chemists who had succeeded to the business of Francis Newbery & Sons Ltd, indicated that manufacture of James's powder was discontinued in 1941 due to the loss of the firm's premises, papers and the formula of the medicine during WWII. 1941 was also the date when the status of patent medicines changed with the introduction of the Pharmacy and Medicines Act which required full disclosure of all active ingredients on the medicine label.¹²⁵

It was agreed by James that Newbery might have an account in writing on how to make or prepare all or any of the medicines, to be opened by Newbery's representatives after his death. In turn, Newbery agreed not to make known to any person or persons the 'secret art or mystery' of making the medicines. Each party bound themselves to each other in case of dispute for the sum of £5,000. Soon after making these agreements, James sold a part of his share to Mr Benjamin Collins of Salisbury in order to raise a sum of money.¹²⁶ Mr Collins 'having some time after repented of his bargain', Newbery paid him back the purchase money with interest, and made James a present of the assignment. This may have enhanced the close relationship between Newbery and James. When the patent was granted, James assigned a half-share to Newbery and the agreement was extended indefinitely in 1755.

¹²⁵ Martindale, *The Complete Drug Reference* (Pharmaceutical Press); Mackintosh, p. 270.

¹²⁶ John Rowe Townsend, *Trade & Plum-Cake for Ever, Huzzah!: The Life and Work of John Newbery, 1713-1767, Publisher and Bookseller* (Cambridge: Colt Books, 1994), p. 51.

There were no laws restricting the sale of poisons or medicines at that time and the fever powders became remarkably popular.¹²⁷ However, some concerns were expressed on both safety and efficacy. The powders were implicated in the deaths of Laurence Sterne and Oliver Goldsmith.¹²⁸ Following the death of Goldsmith in 1774, a publication by an apothecary, William Hawes, claimed to have ‘vehemently entreated him not to take Dr James’s powders’.¹²⁹ Hawes actually gave credit to James, ‘who always administers his fever powders with great caution and circumspection, and desists from the exhibition of them when he finds them not to operate in the manner he wishes or expects’.¹³⁰ Francis Newbery was still defending the powders seventeen years after this incident, noting that Goldsmith had repeatedly expressed his dissatisfaction with Mr Hawes, implying that he had sent him a counterfeited preparation, because the effects were different from those he had always experienced from James’s powders, which was his favourite medicine. Newbery continued to discredit Hawes by alleging that

The officious publication did not get through an edition of 500, though he used the disingenuous artifice of twice reprinting the title pages under the pretence of a second edition and a third; but James’s powder rose in estimation; for the sale increased considerably from the time of the attack as my books can incontestably show.¹³¹

James himself noted that he did tell Sir Edward Hulse about the ingredients of the powders when he met in consultation about a patient, and also the late Dr Shaw (referred to on p.

¹²⁷ ‘This medicine is in such general vogue that almost every apothecary is obliged to keep it’, William Hawes in P.S. Brown, ‘The Venders of Medicines Advertised in Eighteenth-Century Bath’, *Medical History*, 19 (1975), 352-369, p. 363.

¹²⁸ Francis Spilsbury, *Free Thought on Quacks and their Medicines, Occasioned by the Death of Dr Goldsmith and Mr Scawen* (London: J. Wilkie, Mr Davenport, 1776).

¹²⁹ William Hawes, *An Account of the Late Dr Goldsmith’s Illness so far as Relates to the Exhibition of Dr James’s Powders* (London: W. Brown et al., 1774).

¹³⁰ *Ibid.*, p. 10.

¹³¹ Francis Newbery, *Letter to ‘My Lord’* (British Library: Percy Papers. Vol II, 29 January 1791).

62).¹³² It is also possible that Johnson was privy to the secret formula of the fever powders.¹³³

The fever powders were not unique in containing antimony being a constituent of Plummer's pills, Russell's powder, Spilsbury's anti-scorbutic drops, Ward's pills and drops and Wilson's panacea.¹³⁴ The reasons why James's fever powders were so popular and lucrative are complex, but include the endorsement by a physician, the use of the name 'James' as a brand, the patent, the extensive marketing, no skill required for use, a rapid effect and, perhaps, the exclusive price. An incident involving advertising was recalled by James:

The advertisement runs thus: 'Will remove any acute continual fever in a few hours.' Upon this the wag reasons in this manner: 'Either Dr. James does believe this, or he does not. If he does believe it, he is no physician. If he does not believe it, he is dishonest. . . .' All these expressions are to be construed, not universally, but generally, and with a reserve to some exceptions. I must however give up the expression, and think that it had been better said, that my powders 'remove *most* continual and acute fevers.'¹³⁵

Advertising, particularly for medical goods and services as illustrated so graphically in Figure 2.9, helped to underwrite the cost of newspapers. Most medical advertisements were placed by marginal practitioners, book and print-sellers.¹³⁶

Other orthodox practitioners cashed in on patent medicines or even proprietary pills prepared to secret formulae. For example, Porter noted Nehemiah Grew with Epsom salts, John Radcliffe with a purging elixir, Richard Mead with a rabies powder and Pulvis

¹³² James, *A Dissertation*, 8th edn, pp. 88-89.

¹³³ Gray and Murray, *Dr Johnson and Dr James*, p. 235.

¹³⁴ Joshua Ward (1684-1761), famously depicted along with Sarah Mapp (possibly Hans Sloane) and John Taylor in Hogarth's etching and engraving of 'The Company of Undertakers' (1736) (see figure 1, p. 22) also became wealthy, leaving an estimated £16,000 at his death.

¹³⁵ Robert James, *A Dissertation* (1778).

¹³⁶ Lisa. F. Cody, "'No Cure, No Money,'" or the Invisible Hand of Quackery: the Language of Commerce, Credit, and Cash in Eighteenth-Century British Medical Advertisements', *Studies in Eighteenth-Century Culture*, 28 (1999), 103-130.

Antyllissus, Hans Sloane with medicinal chocolate and an ointment, Paul Chamberlain with teething necklaces, and Edward Jenner with a stomach medicine.¹³⁷ The incomplete development of medicine as a profession, with physicians, apothecaries and non-professionals competing for patients, and no statutory regulation of drugs, meant that the concept of illegal practice and false claims for remedies had little meaning.¹³⁸ The extent of the trade is illustrated, for example, by the list of fifty-three medicines, including Dr James's powder, on sale in a shop in 1786.¹³⁹ Fissell has also argued that, except for the poor, these commercial remedies expanded options for patients and the domestic healing repertoire. The monarchy also benefited by promoting patents for revenue generation, and Royal or governmental authority could imply that a medicine was both original and effective.¹⁴⁰ On reviewing the patent medicines industry in late-Georgian England, Mackintosh argued that they were a separate, substantial industry, providing a wide range of popular products. Although distinctively separate, there was an overlap of the patent medicine industry with unorthodox, irregular medicine and with regular medical practitioners.¹⁴¹ Approximately a hundred medical patents were taken out during the eighteenth century, five before 1740.¹⁴² I have already noted Thomas Henry's antacids and medicines for nervous diseases, Dr Samuel Solomon's cordial balm of gold, and James Graham's pills in addition to Nehemiah Grew's Epsom salts, Richard Mead's Pulvis

¹³⁷ Roy Porter, *Health for Sale: Quackery in England, 1660-1850* (Manchester: Manchester University Press, 1989), p. 8.

¹³⁸ Patrick Singy, 'The Popularisation of Medicine in the Eighteenth Century: Writing, Reading, and Rewriting Samuel Auguste Tissot's *Avis au Peuple sur sa Santé*', *The Journal of Modern History*, 82 (2010), 769-800.

¹³⁹ Mary E. Fissell, *Patients, Power and the Poor in Eighteenth-Century Bristol* (Cambridge: Cambridge University Press, 1991), p. 53.

¹⁴⁰ Alan Mackintosh, 'The Patent Medicines Industry in Late Georgian England: a Respectable Alternative to both Regular Medicine and Irregular Practice', *Social History of Medicine*, 30 (2016), 22-47.

¹⁴¹ *Ibid.*, p. 263.

¹⁴² Roy Porter, *Health for Sale*, p. 28.

Antylisus, Dr Radcliffe's purging pills, Hans Sloane's medicinal chocolate and an eye salve, Paul Chamberlain's teething necklaces, Edward Jenner's tartar emetic and absorbent digestive lozenges.¹⁴³ All were working within the laws and regulations of the time and even a hundred years later patent medicines were not included in the Pharmacy Act 1868 and the Sale of Food and Drugs Act 1875.¹⁴⁴ Patented medicines fit in the concept of the medical marketplace within which medical practice itself could be considered as both a trade and a profession.¹⁴⁵ Indeed, the very success of Georgian patent medicines may have led to later views of them being part of quack medicine, and the disadvantage that medicines associated with trade might militate against social respectability.¹⁴⁶

John Newbery

The printed word and the publisher, John Newbery, were essential components of the fever powder's success. Publishers and booksellers provided promotion, instruction, advertisements, distribution and retailing of patent medicines in England and elsewhere.¹⁴⁷ It is not clear whether it was through James that Newbery became acquainted with Johnson, or whether Johnson introduced Newbery to James.¹⁴⁸ Johnson's business association with Newbery had begun by 1751. These dates alone suggest that James introduced Johnson to Newbery. One unconfirmed story recounts James going for an

¹⁴³ Dr Joshua Ward (1684-1761), who invented Friar's Balsam, was famous for his pills and drops, but was a pharmacist/chemist and not a qualified doctor.

¹⁴⁴ Anne Digby, *Making a Medical Living: Doctors and Patients in the English Market for Medicine, 1720-1911* (Cambridge: Cambridge University Press), p. 68.

¹⁴⁵ *Ibid.*, p. 26.

¹⁴⁶ Michael Brown, *Performing Medicine: Medical Culture and Identity in Provincial England, c.1760-1850* (Manchester: Manchester University Press, 2011), p. 23.

¹⁴⁷ Alan Mackintosh, *The Patent Medicines Industry in Georgian England: Constructing the Market by the Potency of Print* (Basingstoke: Springer International, 2017), p. 262.

¹⁴⁸ John Rowe Townsend, *Trade & Plum-Cake for Ever*, p. 51.

interview with Newbery.¹⁴⁹ Part of John Newbery's success as a publisher can be attributed to the marketing of James's fever powders, the earnings from which supported not only Newbery's children's books and his other publications, but also those of several other authors, notably Oliver Goldsmith and Johnson.¹⁵⁰ Loans were given by Newbery as advances for work in progress. Goldsmith and Johnson both left descriptions of Newbery 'in perpetual motion' and Sir John Hawkins wrote of him as 'a man of a projecting head, a good understanding, and great integrity; and who, by a fortunate connection with Dr James, the physician, and the honest exertions of his own industry, became the founder of a family'.¹⁵¹ Francis Newbery's warehouse (1779) shows that the Newbery family gained as much from James's fever powders as James did himself (Figure 2.1). Francis Newbery (1746-1818), John Newbery's nephew, was reputed to be almost a millionaire when he died.¹⁵² The closeness of James and John Newbery is shown by the joint commercial enterprise, James's care of him in his final illness, and the bequest of thirty guineas to

¹⁴⁹ An anecdote was told about the occasion when James applied to the publisher, John Newbery, known today as the 'father of children's literature', to sell his powder. He was asked to go to Newbery's country house at Vauxhall on the following Sunday morning - a short distance across the river from where James was living. While crossing Westminster Bridge James saw a horseshoe lying in the road which he considered a sign of good luck and put it in his pocket. Newbery accepted James's proposals and entered into an agreement which 'promised so fairly to the doctor that he ascribed all to the horseshoe. The fever powder succeeded; and James getting rich, set up his carriage, and adopted the horse-shoe as the crest of his armorial bearings on his carriage'. The veracity of this story is uncertain as construction was started on Westminster Bridge after much debate in 1739, with the last stone being laid in 1746. The bridge was funded by a specific lottery. Completion was delayed when one pier started to sink in 1747, so it is not known when people were able to cross the river on foot. The bridge was officially opened on 18 November 1750. John Timbs, *Doctors and Patients* (London: Richard Bentley & Son, 1876), p. 115; Charles Welsh, *A Bookseller of the Last Century* (Clifton: Augustus M. Kelly, 1972), p. 24.

¹⁵⁰ Johnson asked for a loan on 18 April 1751 for £2 and made further requests for £2 and a guinea that year and nearly £50 in 1759. Donald D. Eddy, *Samuel Johnson: Book reviewer in the Literary Magazine or Universal Review, 1756-1758* (New York: Garland Publishing, 1979), pp. 3-4. Newbery's first children's book was published in 1744 and the first encyclopaedia for children '*The Circle of the Sciences*' 1745-48. *The Ladies' Complete Pocket Book* (1750-1789) came next. He was probably involved in the funding of *The Rambler* and of the *Literary Magazine*; many of these ventures may have been made possible because of income from the fever powders and the thirty other medicines.

¹⁵¹ John Newbery in *Oxford Dictionary of National Biography* [accessed 12 March 2019]; John Hawkins, *The Life of Samuel Johnson*, 2nd edn revised (London: J. Buckland et al., 1787), p. 364.

¹⁵² Mackintosh, *The Patent Medicines Industry*, p. 81.

James in Newbery's will for a mourning ring.¹⁵³ The epitaph on Newbery's grave included '... skill that introduced the most powerful discovery in the annals of medicine'.¹⁵⁴ Both were successful in business.

Less is known about other medicines invented and marketed by James and for which he used his professional title. Hester Thrale discovered that Evans's Worming Powder was actually one of James's powders, dyed red with cinnabar.¹⁵⁵ Other preparations advertised were Dr James's powders for distemper in cattle (possibly the same composition as the fever powders), Dr James's Analeptic Pills, Dr James's Mild Powder and a fever plaster.¹⁵⁶ The definition of 'analeptic' given by James was 'restorative', the pills consisting of James's powder, gum ammoniacum and the pill of aloes in equal parts, with a sufficient quantity of the tincture of castor oil to make a mass. After the death of James, 'the trade in St Paul's Churchyard . . . went on very prosperously, particularly by the accession of a new medicine, the Analeptic Pill'.¹⁵⁷ It has been claimed that James's Mild Powder was introduced in later years when James was keen to defend his position in the medical marketplace. It was contrived as to be proper for women, infants and those whose constitutions were extremely delicate.¹⁵⁸ In an advertisement in *The Gentleman's Magazine* in 1748, a fever plaster by a Dr James was listed but not the fever powders.¹⁵⁹

¹⁵³ Charles Welsh, *A Bookseller of the Last Century* (London: Griffin et al., 1885; reprinted Clifton: A. Kelley, 1972), p. 163.

¹⁵⁴ John Rowe Townsend, *Trade & Plum-Cake for Ever*, pp. 81-82.

¹⁵⁵ Jerry White, *London in the Eighteenth Century* (London: Bodley Head, 2012), p. 276.

¹⁵⁶ Robert James, *A Dissertation* (1778), p. 160.

¹⁵⁷ Welsh, *A Bookseller of the Last Century*, p. 143. An analeptic drug stimulates the central nervous system.

¹⁵⁸ Jonathan Andrews, Andrew Scull, *Customers and Patrons of the Mad-Trade* (Berkeley: University of California Press, 2003), p. 154.

¹⁵⁹ Roy Porter, 'Lay Medical Knowledge and Medication in the Eighteenth Century: the Evidence of *The Gentleman's Magazine*', *Medical History*, 29 (1985), 138-168, p. 166.

Medical Practice and Physicians in London

Before achieving these commercial successes and whilst actively publishing, James may have struggled to attract medical work, despite the likely demand for medical services from the increased population, and improved life expectancy. Medicine was neither well organised nor firmly controlled.¹⁶⁰ Patient and physician power had reached a balance, whereas later in the century the professions were increasingly in charge, with the development of more hospitals and dispensaries.¹⁶¹ On arrival in London, James lacked patrons and society connections, and he did not inherit a medical practice in London as did Richard Mead from John Radcliffe, William Hunter from James Douglas, and John Coakley Lettsom from John Fothergill. A possible connection with the most successful physician of the day, Richard Mead (1673-1754), would have been useful, but the relationship may have been no more than currying favour for the dictionary. I was unable to find any direct contact between John Floyer and Mead.¹⁶² Hans Sloane had been written to by James regarding experiments with mercury¹⁶³ and he dedicated his first publication to Sloane, but again I was unable to find evidence of any personal contact.

The network of coffeehouses and taverns could well have been used as a method of recruiting patients.¹⁶⁴ Cowan has recently described the long history of coffeehouses in London, from the time of the Restoration, stressing their importance for business, political

¹⁶⁰ Anne Digby, *Making a Medical Living*, p. 25.

¹⁶¹ For example, the Westminster Hospital, 1719, Guy's Hospital, 1721, St George's Hospital, 1733, the Middlesex Infirmary, 1745, the General Dispensary, 1770. Guenter B. Risse, 'Medical Care' in, *Companion Encyclopedia of the History of Medicine*, ed. by W.F. Bynum, Roy Porter (London: Routledge, 1993), pp. 45-77.

¹⁶² Intriguingly, Floyer's sister, Susanna (born 1646) married a William Mead (born 1668) though I failed to make a connection between this William Mead and Dr Richard Mead, to whom James's dictionary was dedicated.

¹⁶³ 'A letter from Dr Robert James, of Lichfield, to Sir Hans Sloane, Bart. Pr.R.S. containing some experiments made upon mad dogs with mercury', *Philosophical Transactions*, 39 (1735), 244-250.

¹⁶⁴ Brian Cowan, *The Social Life of Coffee: The Emergence of the British Coffeehouse* (New Haven: Yale University Press, 2005).

and professional contacts, formation of societies (for example the Society of Arts and the Mathematical Society), concerts and gambling. In 1737 London possessed 207 inns, 447 taverns for wines and spirits, and 531 coffeehouses (mostly licensed to sell wines and sometimes beer).¹⁶⁵ Richard Mead spent his afternoons consulting at Tom's Coffeehouse' in Russell Street, Covent Garden.¹⁶⁶ A weekly club for a network of Scottish medical men met at the British Coffeehouse in Cockspur Street, Charing Cross; the Medical Society of London, formed in 1752, met at the Mitre Tavern, and the Medical Society of Physicians (1764) at Old Slaughter's Coffeehouse, dining at the Crown and Anchor.¹⁶⁷ I have surveyed the large number of different establishments mentioned in James's treatises on fevers. These included Ordinance near the Court of Request; George's, Chancery Lane; White's and the Thatched House Tavern in St James's Street; the Peacock in Cateaton Street; Golden Sugar Loaves in Bury Street; Sun Tavern in St Paul's Church Yard; Coltie Tavern, Covent Garden; George's Chancery Lane; Wine Office Court in Fleet Street; and the Sun and Apple in Drury Lane. James also noted the King's Arms tavern in St Paul's Churchyard in one of his cases of gout.¹⁶⁸ The Goat at Charing Cross was the tavern in which James first met 'Baron' Schwanberg, who subsequently challenged James on the origin of the fever powders. This demonstrates a wide coverage of different establishments.

¹⁶⁵ Jerry White, *London in the Eighteenth Century: a Great and Monstrous Thing* (London: Vintage Books, 2013), p. 328.

¹⁶⁶ William F. Bynum, 'Health, Disease and Medical Care' in, *The Ferment of Knowledge*, ed. by G.S. Rousseau, Roy Porter (Cambridge: Cambridge University Press, 1980), pp. 211-253 (p. 229).

¹⁶⁷ Arnold Chaplin, 'Medicine in England during the Reign of George III', *British Medical Journal*, 2 (1917), 637-641.

¹⁶⁸ Robert James, *A Treatise on the Gout and Rheumatism: Wherein a Method is Laid Down of Relieving in an Eminent Degree Those Excruciating Distempers* (London: T. Osborne, J. Roberts, 1745), p. 81.

Physicians were not a homogeneous community, sharing backgrounds, identity, values, perception of roles and interests.¹⁶⁹ I confirmed this by surveying ninety-seven physicians born between 1680 and 1730, and who practised in London (Table 2.3) for comparison with James.¹⁷⁰ These colleagues reflect a vibrant medical community in London alongside James, and show that the majority came from outside London, with a minority of sixteen physicians from families already living within the London area. The different backgrounds, the prevalence of a Scottish background and Leiden in training, and the wide range of activities undertaken are noted. The most common related activity was a hospital appointment. Association with the Royal College of Physicians applied only to about a third, confirming findings in the previous century when the College was assessed as somewhat isolated from mainstream medicine.¹⁷¹

¹⁶⁹ Rosemary O'Day, *The Professions in Early Modern England, 1450-1800; Servants of the Commonwealth* (Harlow: Pearson Education, 2000), p. 8.

¹⁷⁰ Short-term visits were excluded such as Archibald Cameron (1707-1753) who was brought from Scotland to the Tower of London to be executed for being a Jacobite. The survey was undertaken using the *Oxford Dictionary of National Biography* [accessed April-June 2019].

¹⁷¹ Margaret Pelling, Frances White, *Medical Conflicts in Early Modern London: Patronage, Physicians, and Irregular Practitioners, 1530-1640* (Oxford: Clarendon Press, 2003), p. 23.

Table 2.3: Details of ninety-seven physicians born 1680-1730 and working in London¹⁷²

Parental background:

Minister	16	Army	6	Farming	3
Various trades	15	Academic	5	Gentry/land	3
Medical	13	Law	4	Not recorded	32

Schooling:

Local, except 14 noted to have attended Winchester, Eton, Rugby, Repton, Shrewsbury, or Merchant Taylors

From Scotland: 29

Trained in Leiden: 28

Activities in London other than standard medical practice and authorship:

Hospital appointment	39
Royal College of Physicians	33
Royal Society	12
Royal Appointment	11
Military	8

An interest in chemistry was unusual, Peter Shaw being a notable exception, as discussed earlier in this chapter. Physicians in London published on subjects such as the chemical analysis of mineral waters and urinary calculi. Particular individuals who were interested in chemistry included George Fordyce (1736-1802, of St Thomas's Hospital), Alexander Marcet (1770-1822, of Guy's Hospital) and George Pearson (1757-1828, of St George's Hospital). Their enthusiasm may have been brought from Edinburgh under the influence of William Cullen (1710-1790).¹⁷³ Pearson was known for experiments on the composition of pus, for adopting the term 'nitrogen' and for the early support of vaccination and the work of Jenner, even though he was later in dispute with him. Pearson also investigated James's powders and found them to be a mixture of bone ash and antimony oxide.

¹⁷² Taken from *Oxford Dictionary National Biography* [accessed April-June 2019].

¹⁷³ Susan Lawrence, pp. 314-317. Pearson had studied under Joseph Black, and taught chemistry at his own laboratory outside the hospital.

The social origins of physicians in my survey were similar to those noted for medical emigrants from Scotland, mainly sons of clergymen or merchants, or younger sons of the gentry, though parental background was not available for a third of the physicians.¹⁷⁴ It would appear that medicine was becoming more acceptable as a career, but remaining below the church and the law.¹⁷⁵ A farming background, such as James's, was unusual, though George Cheyne (1672-1743) was the son of a tenant farmer as were three of the London physicians surveyed in Table 2.3. The reasons for physicians moving to London were not sought in my survey, but I noted that James's fever powders were the precipitating reason for the distinguished physician, Dr Anthony Relhan (1715-1776), moving from Dublin to Brighton and then to London in 1758. This followed disagreements with fellow physicians on the propriety of his prescribing the powders. Relhan was an author on the history of Brighton and on the drinking of mineral waters. Authorship was common in my survey as might be anticipated from the selective processes for inclusion in the Oxford dictionary of National Biography, with half of the physicians contributing medical and scientific publications and 8% producing non-medical literature. This is similar to the finding of 48% of seventy-five physicians elected to seven London hospitals between 1700 and 1759 as noted by Lawrence.¹⁷⁶

The comment that James was little known by people of rank, fashion and talents is not wholly accurate.¹⁷⁷ According to Francis Newbery, James soon acquired a large practice

¹⁷⁴ Anita Guerrini, 'Scots in London Medicine in the Early Eighteenth Century' in, *Scots in London in the Eighteenth Century*, ed. by Stana Nenadic (Lewisburg: Bucknell University Press, 2010), p. 167.

¹⁷⁵ Joan Lane, *A Social History of Medicine; Health, Healing and Disease in England, 1750-1950* (London: Routledge, 2001), p. 26.

¹⁷⁶ Susan Lawrence, *Charitable Knowledge: Hospital Pupils and Practitioners in Eighteenth-Century London* (Cambridge: Cambridge University Press, 1996), p. 219.

¹⁷⁷ James L. Clifford, *Dictionary Johnson* (New York: McGraw-Hill, 1979), p. 44.

and became a fashionable physician.¹⁷⁸ A wide range of patients were attended by James in London, a few being aristocratic though none being from the Royal Family. James's case reports, contained in his treatise on fevers, show a range of patients, such as a distiller, a cabinetmaker, and an attorney at law.¹⁷⁹ He noted helping the Hon. Mr Vere Powlett, a 'lady of distinction' in Westminster and the Rt. Hon. Countess of Anglesea. He also made a home visit to a 'very worthy person' in Henley in Oxfordshire. Similarly, 'a lady desired me on a Friday to attend a person ill of a pleurisy, whom she employed as a solicitor in the House of Lords . . .'¹⁸⁰ A joint consultation was recorded with Anthony Addington (1713-1790) concerning the daughter of the Earl of Cardigan.¹⁸¹ Addington was trained in Oxford and became a physician with a reputation for the treatment of mental illness. He practised in London for twenty years from 1754 and became family doctor to William Pitt, Earl of Chatham. Dr Addington charged £100 for his services during the fatal illness of Harriet Brudenell in 1767, in contrast to Dr James's £23.

G.P.R. James recalls that Rockingham (the second Marquis of Rockingham, 1730-1782, Whig statesman and twice Prime Minister) gave James a beautiful gem, dug up at Tusculum, engraved with a man having a conventional face of a faun, either engaged in sculpting a vase or tapping a vessel of wine. G.P.R. James (James's grandson) added a comment: 'perhaps the latter interpretation is the more harmonious with the habits of the giver and the receiver'. G.P.R. James possessed this gem. It is not known whether the

¹⁷⁸ Francis Newbery also noted that James was a profound scholar, an excellent chemist and an admirable physician. Welsh, p. 25.

¹⁷⁹ Robert James, *A Dissertation on Fevers and Inflammatory Distempers*, 1st edn (London: J. Newbery, 1748), 8th edn (London: Francis Newbery, 1778).

¹⁸⁰ Robert James, *A Dissertation* (1778), p. 108.

¹⁸¹ Digby, pp. 185-186; Joan Wake, *The Brudenells of Deene* (London: Cassell, 1953), p. 276.

¹⁸¹ William Hawkes, ed., *The Diaries of Sanderson Miller of Radway, Together with His Memoir of James Menteath* (Bristol: The Dugdale Society, 2005), pp. 263-270.

Marquis was a patient of James. Another distinguished patient who became a part of James's networks was Sanderson Miller of Radway, an English pioneer of Gothic revival architecture.¹⁸² Miller struggled throughout his adult life with fits of severe depression and he consulted James in London on 5 September 1756. It would appear they quickly became friends, having breakfast together on the following 12 September and 19 September. At the second breakfast, they discussed Miller's illness.¹⁸³ Miller also noted that James let out some ground in Lambeth for £12 an acre. Miller dined with James on 17 December 1756 'with fellow guests Mr Wodehouse of Colney near St Albans there, and Mr Grosvenor. Conversation about Newsham, farming etc.'¹⁸⁴ Miller also referred to James as a great physician and shared with him a love of horses. Three testimonials about James's management of Miller were recorded in letters to Sanderson Miller from Mrs Stanley (November 1756), Lord Lyttleton (December 1756) and from Lord Dacre (January 1759).¹⁸⁵ This association of James with the Marquis of Rockingham and with Sanderson Miller suggests a Whig connection. The last letter also added '... and I shall not only have a higher opinion of Dr James for what he has done in your case but shall love him as long as I live.'

Other patients that were recorded include Lady Diana Spencer, wife of Topham Beauclerk (who was a friend of Johnson), who noted that James did not listen to what she

¹⁸² From Sanderson Miller's correspondence there is evidence that Sir Edward Turner was patient of James. Lilian Dickins, Mary Stanton, eds., *An Eighteenth-Century Correspondence* (London: J. Murray, 1910), pp. 335-336.

¹⁸³ 'He says it is caused by a little feverish ferment in the blood, which his powders will remove. Advised me to drink wine only as a cordial, is against tea, advises me to rise early and use some brisk exercise to promote perspiration, to eat some very light thing for supper, to go to bed soon. Would take no fee. Met Miss Molly Waldo there.' *The Diaries of Sanderson Miller*, p. 270.

¹⁸⁴ The Newshams were Miller's recently widowed sister and her three children.

¹⁸⁵ Lilian Dickins, Mary Stanton, *An Eighteenth-Century Correspondence*, pp. 346, 347 and 401.

said.¹⁸⁶ Topham himself recorded taking James's powder. One of the few surviving letters of the poet Christopher Smart (1722-1771) was written to James in 1756, thanking him for restoring him to health 'since this was the third time, that your judgment and medicine rescued me from the grave . . .'.¹⁸⁷ Richard Cumberland wrote an ode praising James's powders, a 'great tamer of the fever's rage', which had saved his son.¹⁸⁸ James was a trusted physician in the Thrale household. At one point, Mrs Thrale considered James as one of 'the three best characters in London - perhaps in Europe'; the other two being Johnson and Garrick¹⁸⁹. Hester Thrale's mother was a patient of James, and James and Johnson discussed her condition in 1773. One of James's patients in 1734, noted earlier in this chapter, was David Garrick's mother with violent pains in her hip and a fever on her spirits.¹⁹⁰ It may be significant that Johnson, who respected James's learning and supported his patented medications, is not recorded as having consulted James in London.

One London medical colleague mentioned by James was Dr Thomas Thompson (active 1746). James dedicated his book on gout and rheumatism to him.¹⁹¹ Thompson was a successful Scottish physician in London, attracting influential patients. He moved into politics and described himself as 'Prosyndic of Padua'.¹⁹² His treatment of the Honorable Thomas Winnington, Paymaster General of His Majesty's Forces, with thin diet, exercise, frequent bleedings and purgings, was unsuccessful. The patient died and Thompson was

¹⁸⁶ David Noy, *Dr Johnson's Friend and Robert Adam's Client, Topham Beauclerk* (Newcastle upon Tyne: Cambridge Scholars Publishing, 2016), p. 244.

¹⁸⁷ Betty Rizzo, Robert Mahony, eds., *The Annotated Letters of Christopher Smart* (Carbondale: Southern Illinois University Press, 1991), pp. 67-68.

¹⁸⁸ Richard Cumberland, 'Ode II to Dr. Robert James' in, *Odes* (London: J. Robson, 1776), pp. 21-27. Ode I was to the Sun.

¹⁸⁹ Later Mrs Thrale became Hester Lynch Piozzi.

¹⁹⁰ David Little, George Kahl eds., *The Letters of David Garrick*, vol.I, Letters 1-334 (London: Oxford University Press, 1963), p. 13.

¹⁹¹ Robert James, *A Treatise on the Gout and Rheumatism: Wherein a Method is Laid Down of Relieving in an Eminent Degree Those Excruciating Distempers* (London: T. Osborne, J. Roberts, 1745).

¹⁹² A syndic is a magistrate.

criticised in a number of pamphlets, notably by William Douglas. James censured Thompson for not vindicating his character. In commenting on the management of gout, James apologised for proposing a different method for relieving gout but

... to return you, thus publicly, my thanks, for my recovery from the most violent of fevers, attended with purple eruptions, and a malignant thrush; which I am abundantly sensible I owe to your abilities in your profession, and care in attending me during the time I laboured under it.

A separate account of family illnesses was given by James in the dictionary under ‘Pix Liquida’, another name for tar water, which had been introduced by Bishop Berkeley. Tar water became very popular, being readily available and relatively cheap and a tar-water warehouse was established in St James’s Street, London.¹⁹³ Tar water was thought to cleanse the finest capillaries much better than water alone.¹⁹⁴ James notes under ‘Pix Liquida’:

I found all this confirmed by my own experience, in the late sickly season of the year 1741, having had twenty-five fevers in my own family cured by this medicinal water, drank copiously. The same method was practised on several of my poor neighbours with equal success.

No evidence can be found that James became involved in the workings or lectures of the Royal College of Physicians and he did not become a fellow.¹⁹⁵ On the other hand, he did not join the dissident Society of Collegiate Physicians.¹⁹⁶ I could find no evidence that he obtained a hospital or dispensary appointment which, although often unpaid, resulted in

¹⁹³ Marina Benjamin, ‘Medicine, Morality and the Politics of Berkeley’s Tar-water’ in, *The Medical Enlightenment of the Eighteenth Century*, ed. by Andrew Cunningham, Roger French (Cambridge: Cambridge University Press, 1990), pp. 165-193. Tar water was made from ‘tar’, that is, resin from pine trees that had been allowed to stand for three days in cold water.

¹⁹⁴ Lester King, *The Medical World of the Eighteenth Century* (Chicago: Chicago University Press, 1958), pp. 39-44.

¹⁹⁵ A licentiate of the Royal College of Physicians could not vote on College matters but was allowed to dabble in ‘trade’ or midwifery.

¹⁹⁶ In 1767 a group of dissident licentiates established this society with the aim of changing the College’s exclusive rules, but it was not until 1834 that Oxford and Cambridge lost their grip. Lloyd G. Stevenson, ‘The Siege of Warwick Lane; together with a brief history of the Society of Collegiate Physicians (1767-1798)’, *Journal of the History of Medicine and Allied Sciences*, 7 (1952), 105-121.

influential contacts and set a person apart from their professional peers. Most of the development of medical societies came too late for James.¹⁹⁷ It was the dictionary and other writings, together with the fever powders, that helped him to become established in London.

Appraisal of James

I will now turn to what is known about James as a person and the success or otherwise of his careers in medicine and in publishing. The value of medical biographies continues to be debated. Social historians of medicine, such as Söderqvist, have described biography as a useful tool for a contextual history of science, technology and medicine.¹⁹⁸ On the other hand, Noble has warned that biography should be ‘an historical science based on impartial analysis of the available sources’.¹⁹⁹ There is a danger that writing about a great doctor perpetuates the concept of a medical practitioner’s professional dominance.²⁰⁰ Failure to stress the associated aspects of social history risks omission of issues such as gender, race and class, as perceived by Duffin.²⁰¹ Another positive view on biography, expressed by Hankins, is that the person is honoured, even when their representation is not very flattering.²⁰² Not everything recorded about James is flattering, but the comparison should

¹⁹⁷ Lawrence, *Charitable Knowledge*, p. 259.

¹⁹⁸ Thomas Söderqvist, ‘“No Genre of History fell under more Odium than that of Biography”: the Delicate Relations Between Scientific Biography and the Historiography of Science’ in, *The History and Poetics of Scientific Biography*, ed. by Thomas Söderqvist (Farnham: Ashgate Publishing Group, 2007), p. 257.

¹⁹⁹ Jonathan Noble, ‘Biography: Hagiography or Demonology?’, *Journal of Medical Biography*, 23 (2015), 123-124.

²⁰⁰ Beth Linker, ‘Resuscitating the “Great Doctor”: the Career of Biography in Medical History’ in, *The History and Poetics of Scientific Biography* ed. by Thomas Söderqvist (Aldershot: Ashgate, 2007), p. 222.

²⁰¹ Jacalyn Duffin, ‘“La Mauvaise Herbe”: Unwanted Biographies Both Great and Small’ in, *The History and Poetics of Scientific Biography*, ed. by Thomas Söderqvist (Aldershot: Ashgate, 2007), p. 188.

²⁰² Thomas L. Hankins, ‘Biography and the Reward System in Science’ in, *The History and Poetics of Scientific Biography*, ed. by Thomas Söderqvist (Aldershot: Ashgate, 2007), p. 93.

be made within his own society, which, as Porter has described, was materialistic, market-oriented and responsive to economic forces.²⁰³

The contributions made by a publisher can be evaluated, for example, by the number of first and subsequent editions, the reviews, the size of the print run, the quality of publications, the number of copyrights held, and the accumulated personal wealth or even bankruptcy of the individual. Success in the marketing of fever powders could be measured by the location and size of sales, testimonials and the length of life of the product. More difficult, is the measurement of the clinical and academic success of a physician in the eighteenth century. Some of the criteria that have been used include the number of patients, their social class, testimonials and complaints, recommendations from other practitioners and patients, public benefit and philanthropy, fees charged, earnings attained, publications, collections, and money left at death. Parameters such as diagnostic accuracy, morbidity and mortality outcomes would be unreliable and so discourage us from using modern categories to assess the past. Direct evidence about James's medical skills is mainly limited to selected personal testimonies, so whether his reputation as a doctor in his lifetime was affected by his personality and his drinking habits, or by his patented powders and pills, is inexact. Direct evidence about his personality is largely derived from the personal recollections of his grandson, G.P.R. James, and those of his publisher and friend, John Newbery.

What counted for patients at that time, as Dorothy Porter reminded us, was character and temperament.²⁰⁴ Overall, the patient was the final judge of the physician.²⁰⁵ Expressed

²⁰³ Roy Porter, *English Society in the Eighteenth Century*, rev. edn (London: Penguin Books, 1991), p. 2; Roy Porter, *Health for Sale: Quackery in England, 1660-1850* (Manchester: Manchester University Press, 1989), pp. 21-59.

²⁰⁴ Dorothy Porter, Roy Porter, *Patient's Progress* (Cambridge: Polity Press, 1989), p. 68.

differently, medical orthodoxy did not control medical practice and illness was not depersonalised in institutions, with the possible exception of mental disorders.²⁰⁶ The Royal College of Physicians did not set any standards and tended to lay stress on classical learning. Self-advertising by physicians in publications generally selected positive outcomes, and testimonials were likely to be biased. Contemporary physicians, such as Richard Mead (1673-1754), John Fothergill (1712-1780) and William Heberden (1710-1801), built reputations based on expert diagnostics and sympathetic case management.²⁰⁷ Samuel Johnson expressed his view on Mead who ‘lived more in the broad sunshine of life than almost any man.’ Fothergill was noted to be ‘as kind as he is skillful’ and William Heberden believed the essence of a good physician lay in bedside sagacity.²⁰⁸

A common description of the basis of a good doctor at this time included gentlemanly behaviour, cultural achievement, wide erudition and contacts. Politeness and gentlemanliness became a feature of society in the eighteenth century.²⁰⁹ The view that this culture accounts for all men has been challenged, though, as it is not at all clear that politeness served as the most important characteristic of the ‘middling sort’.²¹⁰ A capable medical man had to be able to demonstrate reason and learning.²¹¹ John Radcliffe (1650-1714), Erasmus Darwin (1731-1802) and William Withering (1741-1799) were successful in attracting patients despite having reputations for abruptness of manner. Opinions have

²⁰⁵ Wayne Wild, *Medicine-by-Post: The Changing Voice of Illness in Eighteenth-Century British Consultation Letters and Literature* (Amsterdam: Rodopi, 2006), p. 21.

²⁰⁶ Andrew Wear, ‘Interfaces: Perceptions of Health and Illness in Early Modern England’ in, *Problems and Methods in the History of Medicine*, ed. by Roy Porter, Andrew Wear (London: Croom Helm, 1987), pp. 230-255 (p. 232).

²⁰⁷ Dorothy Porter, Roy Porter, *Patient’s Progress*, p. 123.

²⁰⁸ Roy Porter, *The Greatest Benefit to Mankind* (London: Fontana Press, 1999), p. 256.

²⁰⁹ Philip Carter, *Men and the Emergence of Polite Society, Britain, 1660-1800* (London: Longman, 2001)

²¹⁰ Karen Harvey, *The Little Republic: Masculinity and Domestic Authority in Eighteenth-Century Britain* (Oxford: Oxford University Press, 2012), p. 170.

²¹¹ Roger French, *Medicine Before Science: the Business of Medicine from the Middle Ages to the Enlightenment* (Cambridge: Cambridge University Press, 2003), pp. 1 and 202-204.

varied about James's personality and medical skills, ranging from having 'all the confidence and dogmatism of a poor clinician',²¹² to 'an able and acute physician'.²¹³ Descriptions of James as a person from his earlier years are extremely limited and the portrait we have is largely based on events that occurred later in life in London or recorded after his death. These give consistent descriptions without obvious display of the gentlemanly behaviour or politeness that has been described as a feature of the eighteenth century. The little that has been recorded is probably not that of a virtuous man of high moral standards, as I have already noted in the section on the early years. An anonymous comment published after his death noted James was 'large and corpulent; in conversation coarse; deportment far from engaging. His temperance frequently betrayed him . . . but never early in the day, as he always refrained from the bottle until after dinner . . . Notwithstanding such powerful impediments to his advance, his scientific skill and literary powers procured him a high reputation and a great practice'.²¹⁴ A more contemporary account through his publishing friend, Newbery, noted that 'Dr James was of a cheerful disposition, and was said to have sat too long sometimes over his wine . . . delaying food . . . upon one occasion nearly three hours had elapsed after the appointed time of dinner, before the doctor returned home from his round of business. He was fatigued, and then a trifle will put a man out of temper, and when crossed the doctor was apt to be rather

²¹² John Wiltshire, *Samuel Johnson in the Medical World* (Cambridge: Cambridge University Press, 1991), pp. 71, 96.

²¹³ Alexander Chalmers, *The General Biographical Dictionary*, new edn, vol. XVIII (London: J. Nichols et. al., 1814), pp. 458-459.

²¹⁴ Anon., 'Military and Naval Commanders, Judges and Barristers; Physicians and Surgeons' in, *The Georgian Era*, vol. II (London: Vizetelly, Branston & Co., 1833), pp. 380-381.

violent’.²¹⁵ Another anecdote illustrating James’s behaviour was recalled by his grandson, G.P.R. James.

On one occasion, when dining in his house in Bruton Street, a roast pig was served. Being somewhat of a gourmand, the cooking on this day failed to please him, and in a furious state of wrath the little man grasped the offending dish – pig and all – strutted to the window, and threw the whole into the street below. There happened to be passing at that identical moment a beau, clad in all the elaborate velvet, lace, and periwig of the day; and upon his exquisite confection and head descended the pig with concomitants of gravy and stuffing and breaking china. The outraged beau forced his way into the house, drew his sword, as did the equally irate James, and a duel without preliminaries commenced. The combatants were separated before serious mischief was done.²¹⁶

James’s grandson confirmed that he was very short in stature and, as some of the collected anecdotes reveal, ‘possessed of an irritable, violent temper. At the same time he was just and frank in his dealings when the storm was over’.²¹⁷ Few, if any, comments have been recorded about James by fellow practitioners. Peer review would have been a difficult way of judging a physician because of the competition for patients. Indeed medical practitioners were capable of reviling one another. On his own abilities James wrote:

As soon as I had finished the *Medicinal Dictionary*, it was commonly said that I was a scholar, but that I had spent all my days in study, and had never meddled with practice. I know better than they do how little I deserve the compliment expressed in the first part, which was paid me only to introduce the malevolence of the last, which I think did not affect me, when there were so many that could contradict it.²¹⁸

Summary

James worked in medicine and publishing initially, and in medicine and pharmaceutical marketing later. These were not conflicting interests and he became successful in all three

²¹⁵ Charles Welsh, *A Bookseller of the Last Century* (London: Griffith, Farran, Okeden, Welsh, 1885), pp. 140-141.

²¹⁶ S.M. Ellis, *The Solitary Horseman or the Life and Adventures of G.P.R. James* (Kensington: Cayme Press, 1927), pp. 22-23.

²¹⁷ *Ibid.*, p. 17.

²¹⁸ *A Dissertation on Fevers*, 8th edn, p. 102.

fields. Perhaps, more importantly, his background and career suggest that he was an example of the ‘middling sort’ of man in terms of background and wealth, though not necessarily in manners.²¹⁹ The middling sort is difficult to define and is not a unified group.²²⁰ James can certainly be considered part of the upper professional level at the intellectual fringe of the middling sort.²²¹ Similar findings have been noted in a study of physicians of an earlier century, with an additional observation that delayed marriage was characteristic of this group.²²² Later in life, James’s development and acquisition of properties in the country must be viewed in terms of becoming a member of the gentry or, perhaps more likely, as an investment. His properties were also consistent with an authoritative style of masculinity.²²³ There is evidence that he became a Justice of the Peace.²²⁴ The contrast between his initial practice in the Lichfield and Birmingham areas and his later practice in London is striking. His career reflects many differing aspects of the medical marketplace in both locations and illustrates actions largely taken on his own. There was a great increase in trade, goods, and banking at the time James went to London and people bought and sold medical goods from drugs to books, medical services and medical education, as cash commodities.²²⁵ James’s wealth came from this, and

²¹⁹ Peter Earle, ‘The Middling Sort in London’ in, *The Middling Sort of People: Culture, Society and Politics in England, 1550-1800* (London: Macmillan, 1994), pp. 141-158. Karen Harvey, *The Little Republic: Masculinity and Domestic Authority in Eighteenth-Century Britain* (Oxford: Oxford University Press, 2012), p. 170.

²²⁰ Karen Harvey, *The Little Republic*, p. 7.

²²¹ Margaret Hunt, *The Middling Sort: Commerce, Gender and the Family in England, 1680-1780* (Berkeley: University of California Press, 1996), p. 20.

²²² Margaret Pelling, Frances White, *Medical Conflicts in Early Modern London: Patronage, Physicians, and Irregular Practitioners, 1530-1640* (Oxford: Clarendon Press, 2003), p.19.

²²³ Karen Harvey, p. 134. James’s Will mentioned freehold properties at Teddington and Hampton Wick, real estate in Huntingdonshire and a leasehold mortgage for Vine Street, Lambeth Marsh. London Metropolitan Archives, James Family Papers, ACC/0976/142.

²²⁴ The National Archives, Kew, June 1759-June 1760 (C202/147/2) lists an oath of Dr Robert James, J.P. but the record is missing and unavailable.

²²⁵ Susan C. Lawrence, *Charitable Knowledge: Hospital Pupils and Practitioners in Eighteenth-Century London* (Cambridge: Cambridge University Press, 1996), p. 6.

specifically from the interconnections of medical practice with his publications and fever powders. His financial success is evident from his residences, horses and carriage, and, in contrast to John Ash's portrait by Joshua Reynolds, a bust of James was sculpted by Scheemakers. The bust could have been created either by Peter Scheemakers (1691-1781) before he returned to Antwerp in 1771, or his son, Thomas Scheemakers (1740 -1808). The father had a very successful business in both large monuments and smaller items, and was patronised by Richard Mead.

Figure 2.9: Robert James (1788)



William Salt Library, Stafford, WSL Portraits: JAMES/ROBERT/1

The engraved drawing by W. Walker (1729-1793) of this bust was published on 1 November 1778.²²⁶ This drawing may have been prepared by Walker before James died in 1776, in order to advertise and promote James's intellectual solidity, perhaps as counter-propaganda against caricatures.²²⁷ The publication date suggests it may have been prepared as part of an obituary for inclusion in the eighth edition of *A Dissertation on Fevers and Inflammatory Distempers*, which was published posthumously.²²⁸ This serious, dominant male portrait in formal dress is the image likely to have been chosen by James, showing how he wished to be remembered. The engraving emphasises James's medical and literary success, with the staff of Asclepius and a single, coiled serpent, the laurel of olive branches and the three volumes of *A Medicinal Dictionary* are prominently displayed. It also illustrates his successful relationship with publishers in London and the hard work involved in authorship. This image does not portray his love of animals, his short stature and his entrepreneurial flair in the development of the fever powders and other commercial products, which he demonstrated after leaving Lichfield and Birmingham. This would have required a more detailed portrait.

In many respects James could be described as a successful 'middling sort' of physician, who was willing to take risks and invest his assets in experimental ventures.²²⁹ However, some fifty-seven years after his death, a biography was written alongside other eminent doctors such as Richard Mead, Edward Jenner, William and John Hunter, William Cullen

²²⁶ No reference to Robert James was made in Scheemakers's catalogue of 1756. Abraham Langford, *A Catalogue of the Genuine, Large and Curious Collections of Models and Marbles, in Groups, Figures, Busts etc.* (London: s.n., 1756).

²²⁷ Patricia Fara, 'Framing the Evidence: Scientific Biography and Portraiture' in, *The History and Poetics of Scientific Biography*, ed. by Thomas Söderqvist (Farnham: Ashgate Publishing Group, 2007), p. 73.

²²⁸ The engraving is not in the copy of *A Dissertation on Fevers* held in the library of the University of Birmingham.

²²⁹ Susan E. Whyman, *The Useful Knowledge of William Hutton; Culture and Industry in Eighteenth-Century Birmingham* (Oxford: Oxford University Press, 2018), pp. 35-55.

and William Heberden, summarising that, despite powerful impediments to his advance, ‘his scientific and literary powers procured him a high reputation, and great practice’.²³⁰ He may be considered to be an example of a gentleman writer who accepted or even negotiated for money from a publisher but typically had other sources of income.²³¹

A good summary of James’s philosophy on medical practice and teaching occurs in the *Proposals for A Medicinal Dictionary*.

It is doubtless of importance to the happiness of mankind, that whatever is generally useful should be generally known; and he therefore that diffuses science, may with justice claim, among the benefactors to the public, the next rank to him that improves it.

This makes an appropriate epitaph which, in my view, has the resonance of his influential, lifelong friend, Samuel Johnson. Boswell records Johnson’s comments on seeing a note of James’s death in the newspaper, which suggested some indifference: ‘I thought that the death of an old schoolfellow, and one with whom he had lived a good deal afterwards, would have affected Dr Johnson much.’ According to Boswell, he only said “Ah! Poor Jamie!” Afterwards he stated with more tenderness, “Since I set out on this jaunt I have lost an old friend and a young one; Dr James and poor Harry.”²³²

The next chapter will consider some of the practical aspects of the making of the dictionary and highlight the key role of the publisher, Thomas Osborne.

²³⁰ *The Georgian Era*, vol. II (London: Vizetelly, Branston, 1833), pp. 380-381.

²³¹ Dustin Griffin, *Authorship in the Long Eighteenth Century* (Newark: University of Delaware Press, 2014), p. 184.

²³² *Boswell: The Ominous Years*, p. 302. Harry was Thrales’s son, Henry.

Chapter 3. The Making of *A Medicinal Dictionary*

This chapter will show the hard-working and literary aspects of James's character and describe the role of the publisher, Thomas Osborne. This will put a material object at the centre of my study and illustrate the complex social relationships of the object with a number of different people including the author, the publisher, the engravers and printers.¹ In this chapter, I will first explore how James came to be the author of the dictionary and the role played by Johnson. Then I will consider what resources were available and how the dictionary was funded. The extent that James relied on previous dictionaries for selecting his list of headwords and whether he showed any preferences for any particular dictionary will be investigated for the first time. Finally, evidence will be sought for changes made during the writing of the dictionary and consideration given to the typesetters, printers and proofreaders.

Making knowledge more generally available was a feature of the eighteenth century, with the appearance of an increasing number of books and other publications, ranging from newspapers and pamphlets to novels and academic volumes, some of the latter being expensive and of limited availability.² Retail booksellers in the early eighteenth century were the nucleus of the writing community, employing printers, commissioning authors and some becoming retail outlets for proprietary medicines.³ Over two hundred printers and sellers of medical books have been identified in London and during the century there

¹ Karen Harvey, ed., *History and Material Culture: A Student's Guide to Approaching Alternative Sources*, 2nd edn (New York: Routledge, 2018), p. 3.

² Richard Yeo, *Encyclopaedic Visions* (Cambridge: Cambridge University Press, 2001), p. 44.

³ Elizabeth L. Furdell, *Publishing and Medicine in Early Modern England* (Rochester: University of Rochester Press, 2002), p. 129.

was a boom in medical advice books.⁴ The development of dictionaries and encyclopaedias in the eighteenth century may have been driven partly by commerce but also by expanding areas of knowledge, and even by the fear of the loss of traditional knowledge.⁵ Scientific dictionaries and encyclopaedias are good examples of how this trade in knowledge was worthy of considerable capital investment, aiming for the free circulation of knowledge and accessibility to anyone, irrespective of social rank.⁶ Thus the history of a dictionary reflects not only the language but also the culture and resources of the time.

Little scholarship has been undertaken on the authors and the making of the two previous medical dictionaries published in English. Steven Blankaart (1650-1704) was a Dutch physician whose medical dictionary (*A Physical Dictionary*, 1684) was translated by ‘J.G.’, who may have been John Gellibrand.⁷ Similarly, John Quincy (d.1722) is a relatively obscure figure who appeared to write *Lexicon Physico-Medicum* (1719) in his spare time as an apothecary/physician. He was competent in Latin but not in Greek.⁸ For comparison, another important publication was John Harris’s *Lexicon Technicum* (1704). Despite detailed analysis of the contents, Bradshaw has not identified any of Harris’s working methods or whether he continued to perform light clerical duties, including giving public lectures on applied mathematics in Oxford, whilst writing the work.⁹ Harris himself admitted having the help of an amanuensis in the preface to his lexicon. Similarly,

⁴ Anne Digby, *Making a Living: Doctors and Patients in the English Market for Medicine, 1720-1911* (Cambridge: Cambridge University Press, 1994), p. 42.

⁵ Yeo, *Encyclopaedic Visions*, pp. 83-88. Fear of loss of knowledge came from the devastation caused by fire, armies and dictators.

⁶ Yeo, *Encyclopaedic Visions*, p. 47.

⁷ Roderick McConchie, *Discovery in Haste* (Berlin: De Gruyter, 2019), p. 84.

⁸ *Ibid.*, pp. 94-126.

⁹ Lael E. Bradshaw, ‘John Harris’s *Lexicon Technicum*’ in, *Ashgate Critical Essays on Early English Lexicographers*, vol. V, *The Eighteenth Century*, ed. by Anne McDermott (Farnham: Ashgate, 2012), pp. 231-245.

Chambers relied on anonymous help to prepare *Cyclopaedia* (first edition 1728) which was conceived whilst apprenticed 1714-1721 to John Senex, a globe maker in London.¹⁰

Likewise, the complex process of writing, illustrating and printing James's large work in three folio volumes has received limited scholarly attention, apart from considerable efforts to identify Samuel Johnson's contributions, exemplified by Brack and Kaminski's detailed analysis. This concluded that most of the attributions to Johnson in the dictionary must be rejected.¹¹ A more recent assessment by McConchie of *A Medicinal Dictionary* focused on the writing of the dictionary in terms of assistants (that is 'several hands') and the identification of John Maitland and William Schwanberg, who were employed as translators.¹² McConchie also summarised James's methods of compilation as including a gathering of sources and preparing and editing extracts.¹³ However, little has been recorded on plans made for the dictionary, how it was compiled, how headwords were chosen and definitions assembled, how the encyclopaedic entries were written, what resources were available for James and for the printing of the book, and how the editing was achieved. The special features of the illustrations and the substantial contributions of the engravers have not been previously assessed. Evidence of poor planning and a change from the original design of a two-volume into a three-volume dictionary will be sought. The dictionary itself will be the primary source of information because, apart from the preface, no other written

¹⁰ Jeff Loveland, *The European Encyclopedia* (Cambridge: Cambridge University Press, 2019), p. 250.

¹¹ O.M. Brack, Thomas Kaminski, 'Johnson, James, and *A Medicinal Dictionary*' in, *Ashgate Critical Essays on Early English Lexicographers*, vol. V, *The Eighteenth Century*, ed. by Anne McDermott (Farnham: Ashgate, 2012), pp. 289-311.

¹² Roderick McConchie, 'Robert James (1703-1776) and *A Medicinal Dictionary* (1742-1745)' in, *Discovery in Haste: English Medical Dictionaries and Lexicographers, 1547-1796* (Berlin: De Gruyter, 2019), pp. 140-170, p. 147. McConchie makes the point that although the publication date of the dictionary is 1743-1745, the first fascicles appeared in February 1742, p. 141.

¹³ McConchie, *Discovery in Haste*, p. 169.

sheets or notebooks pertaining to its production are known to have survived.¹⁴ The results of this study will add to our knowledge of the publishing world in London in the mid-eighteenth century, with particular reference to Thomas Osborne, the publisher, and will shed light on the complex process involved in publishing such an extensive and specialised dictionary.

In understanding the material process of making *A Medicinal Dictionary*, it is important to consider other existing practices of creating such a work. The key person was James's school friend, Samuel Johnson. The involvement of Johnson in the early stages of *A Medicinal Dictionary* is evident from his contributions to the *Proposals*, the writing of the dedication and some of the biographies within the first volume of the dictionary. Whereas the influence of Johnson on James's dictionary is clear, this also gives rise to the question about whether James's dictionary had any influence on Johnson's *A Dictionary of the English Language*. This will be discussed in Chapter 4. More importantly for my study, the better known methods of compiling Johnson's dictionary may indicate how James worked.¹⁵ For example, McDermott has argued that the method of providing the author with an interleaved copy of a base dictionary, with the interleaves bound in, was standard practice among providers of dictionaries.¹⁶ McCracken considered it was not possible to know precisely how much Johnson used an interleaved copy of Nathan Bailey's dictionary (*Dictionnarium Britannicum*, 1730) in compiling his word list but concluded that

¹⁴ Although a handwritten copy of the Preface has been recorded, current ownership of this is unknown.

¹⁵ Allen Reddick, *The Making of Johnson's Dictionary, 1746-1773* rev. edn (Cambridge: Cambridge University Press, 1996).

¹⁶ Anne McDermott, 'The Compilation Methods of Johnson's Dictionary' in, *Ashgate Critical Essays on Early English Lexicographers*, vol. V, *The Eighteenth Century*, ed. by Anne McDermott (Farnham: Ashgate, 2012), pp. 105-124.

Johnson's specific debt to Bailey was surprisingly small.¹⁷ Interleaving was used in a new edition of Ephraim Chambers's *Cyclopaedia* (1741-1743).¹⁸ It is not clear what method Chambers used for the first edition in 1728, but it is known that he was the sole author and was helped by amanuenses for later editions.¹⁹ The multiple bibliographical references in *Cyclopaedia* show that information came from other available books. As already noted, John Harris's *Lexicon Technicum* was another single-author effort, again probably with the assistance of an amanuensis.²⁰ Although Harris may have worked mostly alone from a wide variety of published sources, his legal entries were read and corrected by 'a gentleman of known ability in the profession'.²¹ The names of some of Johnson's amanuenses could have been relevant for James, but I was unable to confirm any evidence of such a link.²²

Long definitions and encyclopaedic entries are not easily accommodated by the interleaving method of compiling. The use of notebooks initially, and sheets of paper later, have been described.²³ The final stage of production was the writing up of a note-book copy for the printer.²⁴ Johnson used annotated printed books to indicate precise quotations

¹⁷ David McCracken, 'The Drudgery of Defining; Johnson's Debt to Bailey's *Dictionarium Britannicum*' in, *Ashgate Critical Essays on Early English Lexicographers*, vol. V, *The Eighteenth Century*, ed. by Anne McDermott (Farnham: Ashgate, 2012), pp. 73-76. Nathan Bailey, *Dictionarium Britannicum*, 2nd edn (London, T. Cox, 1736).

¹⁸ McDermott, 'The Compilation Methods of Johnson's Dictionary' p. 108.

¹⁹ Two named amanuenses were Airey and Macbean.

²⁰ Lael E. Bradshaw, 'John Harris's *Lexicon Technicum*' in, *Ashgate Critical Essays on Early English Lexicographers*, vol. V, *The Eighteenth Century*, ed. by Anne McDermott (Farnham: Ashgate, 2012), pp. 231-245.

²¹ *Ibid.*, pp. 235-236.

²² Macbean, Maitland, Stewart and Shiels were paid 23 shillings a week in 1749-1750. Allen Reddick, *The Making of Johnson's Dictionary, 1746-1773*, rev. edn (Cambridge: Cambridge University Press, 1996), p. 60.

²³ *Ibid.*, p. 56.

²⁴ McDermott, 'The Compilation Methods of Johnson's Dictionary', p. 111.

and clerks transcribed these on to separate slips of paper. Although thirteen of Johnson's marked books have survived, those of James, Chambers and Harris have not.²⁵

I will now consider the many different sources and models used by James. It has been argued that James's dictionary can be seen as a greatly magnified and extended version of the medical section of Harris's *Lexicon Technicum*.²⁶ This seems unlikely, as medicine in *Lexicon Technicum* was largely reliant on Blankaart's *A Physical Dictionary* (1684).²⁷ Although James does acknowledge Blankaart with almost three hundred references, these are mainly for definitions, the naming of relatively obscure terms and for synonyms. In contrast, the first edition of Quincy's *Lexicon Physico-Medicum* (1719) contained no references to Blankaart and the first edition of Chambers's *Cyclopaedia* had only one.²⁸ Little has been recorded about the working methods of John Quincy (1683?-1723) but his medical dictionary became influential, with many editions being produced throughout the eighteenth century (11th edition published in 1794).²⁹ Quincy acknowledged his sources, including Blankaart, although at the same time noting Blankaart's dictionary 'is grown now extremely defective'. Nevertheless, it is likely that Quincy used Blankaart as his primary source but also incorporated text from other authors. Subsequently, Johnson quoted extensively from Quincy in his dictionary.³⁰ The starting point for James could, therefore, have been the publications by Blankaart, Quincy, Chambers or Bailey. I will seek evidence for the use of an interleaved copy of one or more of these publications by

²⁵ Ibid., p. 116.

²⁶ McConchie, *Discovery in Haste*, p. 15.

²⁷ Lael E. Bradshaw, 'John Harris's *Lexicon Technicum*' in, *Notable Encyclopedias of the Seventeenth and Eighteenth Centuries: Nine Predecessors of the Encyclopédie*, ed. by Frank A. Kafker (Oxford: Voltaire Foundation, 1981), pp. 107-121, p. 116.

²⁸ McConchie, *Discovery in Haste*, p. 92.

²⁹ The dictionary has been described as part of the 'hard words' tradition. McConchie, p. 100.

³⁰ On 292 occasions, see McConchie, p. 125.

comparing the frequency of common headwords and the correspondence of James's definitions.

After establishing the starting point, I will investigate the timescale of the project, what resources were available and whether any assistance was given. I will give special attention to the copperplates and who engraved them. I will consider whether the publisher was ignorant of what was involved in preparing a dictionary and was optimistic in estimating sales. The answers to these questions will help add to an appreciation of the dictionary, demonstrate the courage of the publisher and illustrate the vibrant nature of the book scene in mid-eighteenth-century London. The new knowledge gained by these investigations will provide further information about the working of the publishing, printing and engraving industries of this competitive market. More light will be shed on the success of one particular publisher, Thomas Osborne, who was largely known as a seller of second-hand books, and managed to remain solvent despite the considerable financial outlay involved in the production of *A Medicinal Dictionary* and other publications.

The relationships between the three key people involved in the creation of the dictionary (Robert James, Thomas Osborne and Samuel Johnson) were of paramount importance. Osborne, though a successful publisher and trader in books, had limited experience with dictionaries and did not have a literary or academic reputation. This chapter highlights the risks taken by him in publishing this extensive, folio dictionary, written by a largely unknown author. As will be discussed later, subscribers were invited but there may have been limited support from patrons and other booksellers.

Timetable for *A Medicinal Dictionary*

The dictionary was started very soon after James arrived in London in September 1740. The chronology is instructive, showing the speed and context of the production of *A Medicinal Dictionary* (Table 3.1). During this time the Gregorian calendar commenced in 1741 which was also the year of David Garrick's stage debut in *Richard III* in London. The first performance of Handel's *Messiah* in Dublin was in 1742, the Gin Act was passed in 1743 and the Jacobite rising in 1745 resulted in the Battle of Culloden in 1746.

Table 3.1: Chronology of the writing of *A Medicinal Dictionary*

Date	Event
3 June 1735	'A Letter from Dr Robert James, of Lichfield, to Sir Hans Sloane, Bart. Pr.R.S. Containing some Experiments made upon Mad Dogs', <i>Philosophical Transactions</i> , 39 (1735-1736), 244-250
March 1737	Johnson and David Garrick travel to London
September 1740	James arrives in London
1741	Publication: <i>Bibliotheca Bibliothecarum</i> (London: T. Osborne)
1741	Publication: James's <i>A New Method of Preventing and Curing the Madness Caused by the Bite of a Mad Dog</i> , 1 st edn (London: Society of Booksellers for Promoting Learning; sold by messieurs Osborne & Smith)
10 June 1741	James signs contract for writing <i>A Medicinal Dictionary</i>
24 June 1741	<i>Proposals for Printing a Medicinal Dictionary</i> written by James and Johnson (London: Society of Booksellers for Promoting Learning)
4 February 1742	First fascicle of <i>A Medicinal Dictionary</i>
September 1742	Purchase of Harley Library by Thomas Osborne Johnson and William Oldys started work on the catalogue
1 November 1742	<i>Proposals for Printing, by Subscription, the Two First Volumes of Bibliothecae Harleianae</i> (London: T. Osborne)
28 February 1743	Publication: vols. I and II of <i>Catalogus Bibliothecae Harleianae</i> (London: T. Osborne)
1743	Publication: <i>The Rational Farmer</i> 1st edn (London: Booksellers of London and Westminster) anonymous, but James was the author
1743	Publication: vol. I of <i>A Medicinal Dictionary</i> (London: T. Osborne)

1 December 1743	Letter from Johnson to Mr Levett, Lichfield, sent from Mr Osborne's, bookseller in Gray's Inn
1744	Osborne's father, Thomas Osborne, senior, dies
14 February 1744	Date of start of second sale of Harley library books; rare pamphlets March 1744-1746
31 May 1745	Last fascicle of <i>A Medicinal Dictionary</i> ³¹
17 August 1745	Publication: vols. II and III of <i>A Medicinal Dictionary</i>
18 June 1746	Johnson signs contract for a dictionary of the English language
August 1747	Johnson submits plan of a dictionary of the English language
1747	Publication: 2 nd edn of <i>The Rational Farmer</i> by the author of <i>A Medicinal Dictionary</i> (London: Booksellers of London and Westminster)

Considering its size and complexity, James's dictionary could have taken many years to write and publish. Indeed, Ephraim Chambers's *Cyclopaedia* (1728) was the result of 'many years' application'.³² As I have indicated in Table 3.1 the dictionary was, in fact, proposed, written and produced over four years, with a consistent style throughout. For comparison, although Johnson took nearly nine years from signing a contract to publication, his work was interrupted and a large part of the dictionary, from mid-letter 'C' to the end, was written in eighteen months - a remarkably similar timescale to that achieved by James. The short gap between the publication of the *Proposals* and the first fascicle is similar to that achieved by Chambers, whose *Proposals* were published in 1726 and the appearance of the first edition *Cyclopaedia* in 1728.

Authorship, proposals and subscribers relating to *A Medicinal Dictionary*

Having considered the timetable, I will now move on to the authorship of *A Medicinal Dictionary*. I have been unable to find evidence that James came to London with the

³¹ *Daily Gazetteer* (London Edition) Issue 5029, 31 May 1745. This day is published no. CLXVII, price 5s., containing 24 sheets and a half which completes the work, *A Medicinal Dictionary*.

³² John Nichols, Samuel Bentley, *Literary Anecdotes of the Eighteenth Century*, vol. V (London: Nichols, Son and Bentley, 1812), p. 659.

intention of writing a dictionary. The choice of James for writing a medical dictionary has some similarities to the choice of Johnson for the writing of *A Dictionary of the English Language*, where Robert Dodsley (1704-1764) was the key person who noted Johnson's ability. Johnson was also a comparatively unknown author with anonymous early publications, but without a university degree. Johnson was approached by Dodsley and a group of publishers to collaborate on a major new dictionary.³³ Even less had been written by James, compared with Johnson, before *A Medicinal Dictionary* was published, and his only substantial book at that time was published later and anonymously.³⁴ Another example of the initiation of a dictionary by a publisher was that of John Harris's *Lexicon Technicum* (London: D. Brown, 1704).³⁵ In considering the choice of a compiler of an encyclopaedia, Loveland suggests that publishers often set their sights low and reduced their costs by selecting a young or obscure person who would be unable to command a high salary.³⁶

The introduction of James to Osborne may have been arranged by Johnson, as James was probably looking for a publisher for his paper on the prevention and treatment of rabies, which was published at the same time as the contract was signed for his dictionary. The link to Osborne may have been through fellow publisher, Edward Cave, or through Robert Dodsley (1703-1764).³⁷ Dodsley was an author and very successful publisher as noted above, supporting Johnson among others. He collaborated with many other

³³ Jack Lynch, *The Lexicographer's Dilemma* (New York: Walker, 2009), pp. 74-75.

³⁴ Discussed in greater detail in the Chapter 2. *The Rational Farmer*, 1st edn (London: Printed and sold by the Booksellers of London and Westminster 1743).

³⁵ Lael E. Bradshaw, 'John Harris's *Lexicon Technicum*' in, *Ashgate Critical Essays on Early English Lexicographers*, vol. V, *The Eighteenth Century*, ed. by Anne C. McDermott (Farnham: Ashgate, 2012), p. 233.

³⁶ Jeff Loveland, *The European Encyclopedia*, p. 137.

³⁷ On his arrival in London, Johnson was introduced to Dodsley by Edward Cave who had sent Dodsley a copy of Johnson's poem '*London*' in 1738.

booksellers and publishers, including Thomas Osborne, with whom he shared the imprint on five occasions.³⁸ James's second work, *The Rational Farmer* (1743), came later and Osborne was likely to have been part of the Booksellers of London and Westminster which published this book.³⁹

The contract for *A Medicinal Dictionary* was signed by James in June 1741, and the *Proposals for a Medical Dictionary*, written by James and Johnson, published two weeks later (Appendix 1). The *Proposals* are a key source in this study of the influences on the dictionary. They indicate a vital involvement by Johnson and his first known involvement in lexicography.⁴⁰ It is important to note this was more than a year before Osborne purchased the acclaimed collection of books and manuscripts of Robert Harley, first Earl of Oxford and Earl Mortimer (1661-1724). I could find no direct evidence that James and Johnson were working together but was likely at the time when Johnson was cataloguing the prestigious Harleian collection. This started after the first fascicle of *A Medicinal Dictionary* was published. The main text of the *Proposals* has been discussed by Sherbo, and it is generally agreed that both the style and content show evidence of Johnson making significant contributions, although James is the author of the published version.⁴¹ This is confirmed by Johnson, who told Boswell that he 'had written, or assisted in writing, the proposals for this work; and being very fond of the study of physick, in which James was his master, he furnished some of the articles'.⁴² Johnson was also quoted as saying: 'my

³⁸ Robert Dodsley, *The Correspondence of Robert Dodsley, 1733-1764*, ed. by James E. Tierney (Cambridge: Cambridge University Press, 1988), p. 40.

³⁹ I have been unable to find any details of these booksellers.

⁴⁰ Robert James, *Proposals for Printing a Medicinal Dictionary* (London: The Society of Booksellers for Promoting Learning, 1741).

⁴¹ Arthur Sherbo, 'Some Observations on Johnson's Prefaces and Dedications' in, *English Writers of the Eighteenth Century*, ed. by John H. Muddendoff (New York: Columbia University Press, 1971), pp. 133-142.

⁴² Boswell, *Life*, vol. I, p. 159.

knowledge of physic . . . I have learned from Dr James, whom I helped in writing the proposals for his dictionary and also a little, in the dictionary itself.”⁴³

The *Proposals* were preceded by certain conditions on the timetable and costs (Appendix 1). Books, especially folio size, were expensive to publish in the mid-eighteenth century and, as a result, expensive to buy in comparison with wages and the cost of living.⁴⁴ Underwriting the costs of producing *A Medicinal Dictionary* has not hitherto been considered but could only have been achieved by an established and wealthy bookseller or with the help of financial backers. Subscription and serialisation were common methods for procuring books at that time and would have helped to bring in some income to the publisher before the work was completed.⁴⁵ Harris’s *Lexicon Technicum* (1704) was a successful example, having at least 900 subscribers for the first edition, which sold for twenty-five shillings,⁴⁶ and over 1,200 subscribers for subsequent editions.⁴⁷ Similarly, Ephraim Chambers’s *Cyclopaedia* (1728) was another successful publication by subscription.⁴⁸ The *Cyclopaedia* was serialised in 418 numbers costing 6d. each, amounting to a little over £10 for the complete set. William Cheselden’s *Osteographia* (1733) was offered at a prepublication subscription price of four guineas with the promise that none should be sold afterwards for less than six guineas.⁴⁹ The first edition of Johnson’s dictionary in two folio volumes, selling for £4.-10s., was not a financial success.

⁴³ Boswell, *Life*, vol. III, p. 22.

⁴⁴ Members of the petty bourgeois would have an income between £50-£100 pa, and a careful artisan family could manage on £1 per week. Johnson calculated that it cost him £30 per annum to live.

⁴⁵ Dustin Griffin, *Literary Patronage in England, 1650-1800* (Cambridge: Cambridge University Press, 1996), pp. 123-154, p. 267.

⁴⁶ Jeff Loveland, *The European Encyclopedia*, p. 122.

⁴⁷ Lael E. Bradshaw, John Harris’s *Lexicon Technicum*, pp. 232-243.

⁴⁸ Yeo, *Encyclopaedic Visions*, p. 47.

⁴⁹ Martin Kemp, ‘The Mark of Truth; Looking and Learning in some Anatomical Illustrations from the Renaissance and Eighteenth Century’ in *Medicine and the Five Senses* ed. by W.F. Bynum, Roy Porter (Cambridge: Cambridge University Press, 1993), p. 104.

The subsequent abridged version sold well at 10s.⁵⁰ The advertised cost of the serialised second edition was £4.-2s.-6d. for 580 sheets unbound, produced weekly.⁵¹ For James's dictionary, the original condition stipulated two folio volumes at a cost of approximately £20. This may have been an underestimate because of the eventual size of James's dictionary. The actual price charged by Osborne when *A Medicinal Dictionary* was first published has not been recorded and was not mentioned in advertisements. My research in the Strahan printing archives showed that Osborne was charged £98 for the printing of the letters 'R' and 'S' (seventy sheets at £1.-8s. per sheet) and between £4.-10s. and £5.-5s. for a complete copy.⁵²

Although subscribers were invited by Osborne in the *Proposals*, their names were not printed in the dictionary. It was estimated that the whole work would make about 'four hundred sheets in two volumes, folio and five sheets will be delivered to the subscribers every fortnight, stitch'd in a cover. Price one shilling.'

In defence of the cost it is admitted that some present publications give a sheet more for the same price; but when it is observed, that the proprietors of those have already been reimbursed the copy-money, and all other expenses, with a considerable profit, from the sale of many editions, it is presumed, a wide difference will be discerned, and this article will be thought a very reasonable one; especially when the great quantity of matter contained in every sheet is duly considered.

Furthermore, it was stated that if the publication be interrupted by any accidental difficulty, the booksellers will take care that several numbers shall be printed before the appearance

⁵⁰ Allen Reddick, *The Making of Johnson's Dictionary* (Cambridge: Cambridge University Press, 1990), pp. 81 and 86.

⁵¹ Philip B. Gove, 'Notes on Serialisation and Competitive Publishing; Johnson's and Bailey's Dictionaries, 1755' in, *Ashgate Critical Essays on Early English Lexicographers*, vol. V, *The Eighteenth Century*, ed. by Anne McDermott (Farnham: Ashgate, 2012), p. 179.

⁵² Strahan Papers, vol. I, 1739-1768, British Library, MS 48800.

of the first, the printing of this useful and laborious performance being undertaken by the Society of Booksellers for Promoting Learning.⁵³

The better to enable them to ascertain the number to be printed, such gentlemen as are inclined to encourage it, are desired to subscribe their names (or to send orders so to do) in a book kept for that purpose by James Crockatt, at the said Society's Office, near St Bride's Church in Fleetstreet; or to T. Osborn, Bookseller, in Gray's-Inn, Holborn, and the numbers shall be sent them regularly; no money being required but on receipt of each number, as printed.

Among the sixty-eight book subscriptions made by Johnson, there is no evidence that he made a subscription to *A Medicinal Dictionary* or any other medical book.⁵⁴ Although subscriptions may have helped publishers, they were not always popular with the purchaser.⁵⁵

Dedication

Until the end of the eighteenth century, patronage was useful for encouragement, protection and favour, and added a stamp of authority.⁵⁶ *A Medicinal Dictionary* was dedicated to the eminent physician, Dr Richard Mead (1673-1754) (Figure 3.1) whom I have already noted on pp.124 and 126. Mead was very much respected both within and outside the medical profession, including by Johnson.⁵⁷ It was said of him that he gained the most, spent the most and enjoyed the highest fame during his lifetime, not only in his

⁵³ Little is known about this Society. McConchie has suggested it was an attempt by Osborne and others to salvage their reputations from accusations of profiteering at the expense of authors. McConchie, p. 149.

⁵⁴ Don D. Eddy, J.D. Fleeman, 'A Preliminary Handlist of Books to which Dr Samuel Johnson Subscribed', *Studies in Bibliography*, 46 (1993), 187-220.

⁵⁵ George Crabbe, *The Library. A Poem*, 2nd edn (London: J. Dodsley, 1783), pp. 7-8.

Yon folio's; once the darlings of the mode
Now lie neglected like the birthday ode;
There learning, stuffed with maxims trite though sage,
Makes indigestion yawn at every page

...

Our nicer palates lighter labours seek
Cloyed with a folio-number once a week

⁵⁶ Dustin Griffin, *Authorship in the Long Eighteenth Century* (Newark: University of Delaware Press, 2014), p. 77.

⁵⁷ 'who lived more in the broad sunshine of life than almost any man.' Samuel Johnson in *Boswell's Life of Johnson* vol. III, ed. by George B. Hill, rev. by L.F. Powell (Oxford: Clarendon Press, 1934), p. 355.

own country but in foreign countries.⁵⁸ Mead was a Royal physician to both Queen Anne and King George II, and his patients included Sir Isaac Newton and Alexander Pope. He was wealthy and respected, being an author, a patron of arts and sciences, and a philanthropist.

Figure 3.1: Dr Richard Mead, 1747



Artist: Allan Ramsay (1713-1784)

Copyright: Coram Family in the care of the Foundling Museum, London.

In this thesis, I have been unable to establish a direct link between James and Mead. An indirect connection may have been through John Freind (1675-1728) who influenced

⁵⁸ William Macmichael, *The Gold-Headed Cane*, The Classic of Medicine Library edn (New York: Paul B. Hoeber, 1925), p. 148.

James as noted in Chapter 2. Mead and Freind were colleagues, and Mead assisted Freind in his release from imprisonment in the Tower of London.⁵⁹ I have already referred to Mead on p. The abbreviated obituary of Mead, published in *The Gentleman's Magazine*, was probably written by Johnson rather than by James.⁶⁰ The popularity of Mead is shown by the fact that *A Medicinal Dictionary* was one of at least thirty-five books dedicated to him.⁶¹ Boswell stated that Johnson wrote the dedication for the dictionary, for which James paid Johnson five guineas.⁶² Some two dozen dedications were written by Johnson, following the established convention in complimenting the patron.⁶³

That the *Medicinal Dictionary* is dedicated to you is to be imputed only to your reputation for superior skill in those sciences which I have endeavoured to explain and facilitate. And you are, therefore, to consider this address, if it be agreeable to you, as one of the rewards of merit; and if otherwise, as one of the inconveniences of eminence. However you shall receive it, my design cannot be disappointed; because this public appeal to your judgment will shew that I do not found my hopes of approbation upon the ignorance of my readers; and that I fear his censure least, whose knowledge is most extensive.

Equal emphasis is given to the patron's merits and to the author's useful labours in this dedication.⁶⁴ Although the patron could give encouragement and a stamp of cultural authority, there was also the possibility of a cash payment.⁶⁵ I was unable to discover whether Mead made a financial contribution or, more importantly, whether James received any help with his writing, such as the use of Mead's fine library, which was made available to scholars (see below on resources) or whether James was seeking support for his embryonic clinical practice.

⁵⁹ William Macmichael, *The Gold-Headed Cane*, pp. 72-77.

⁶⁰ 'Some Account of the Life and Writings of the Late Dr. Richard Mead', *The Gentleman's Magazine*, 24 November 1754.

⁶¹ An example being Richard Brocklesby, *An Essay Concerning the Mortality Prevailing Among Horned Cattle, in Several Parts of Europe, and Chiefly about London* (London: John Brindley, 1746).

⁶² Boswell, *Life*, vol. I, p. 159.

⁶³ Dustin Griffin, *Literary Patronage in England*, (1996), p. 272.

⁶⁴ *Ibid.*, pp. 284-285.

⁶⁵ Dustin Griffin, *Authorship in the Long Eighteenth Century*, p. 77.

Assistance and costs

I shall now consider whether James was the sole author of the dictionary. It appears from my study that additional authors did not contribute directly to the dictionary apart from Johnson with some of the biographies. Boswell admitted that in the dictionary ‘I have in vain endeavoured to find out what parts Johnson wrote for Dr James. Perhaps medical men may.’⁶⁶ At least two amanuenses, John Maitland and William Schwanberg, were used by James. John Maitland . . . ‘assisted the Doctor as an amanuensis, whilst he was writing the *Medicinal Dictionary*; but was during that time so often drunk, that he was of very little use’.⁶⁷ ‘Baron’ Schwanberg, who later was embroiled in the affair of the fever powders, assisted James in translating from German. An indirect comment on James’s sources and assistance was published anonymously.

Everyone who understands physic must be sensible that the explication of the jargon of the old chemists is the most difficult part to execute of *A Medicinal Dictionary*. The greatest help the doctor had in the execution of this part of the work was from Rulandus, who wrote a chemical dictionary on purpose to explain the old chemical terms. But as these were explained partly in Latin, partly in High Dutch; the doctor being utterly unacquainted with the last mentioned language, thought it very fortunate that he had met with a German, who at last pretended to understand chemistry, that would for a stipend of ten shillings a week, attend him, in order to facilitate this part of the work. In this, however, he found himself in a great measure disappointed, for Schwanberg was only capable of explaining words, and understood nothing of the things. His principal employment therefore was to translate Bartholomae’s *Zoru Botanologia* from German into bad French, which the doctor translated into English for the use of the *Medicinal Dictionary*.⁶⁸

I could find no connection with Alexander Macbean (d.1784) who had been involved with Chambers’s *Cyclopaedia*, and who subsequently worked on Johnson’s dictionary.

⁶⁶ Boswell, *Life*, vol. II, p. 57.

⁶⁷ Anon., *An Answer to a Late Scurrillous Pamphlet, Published by One Baker and his Accomplices Respecting Dr James’s Powder, and Sold at a Public House in the Liberties of the Fleet* (London: J. Bouquet, 1754), p. 70. Roderick W. McConchie, ‘Johnson’s Mr. Maitland’, *Notes and Queries*, 63 (2016), 603-605.

⁶⁸ Anon. *An Answer to a Late Scurrillous Pamphlet (Published by One Baker and his Accomplices Respecting Dr James’s Powder, and Sold at a Public House in the Liberties of the Fleet* (London: J. Bouquet, 1754).

It is unlikely that Osborne, himself, gave any assistance to the writing of the dictionary but it may be important to consider the business practices and resources of Osborne in some detail, as these are important indicators of his motivations for becoming involved in the dictionary project with James. The role of the publisher, Thomas Osborne, as a central part of James's authorship has not hitherto been considered in any detail by scholars, but in eighteenth-century London the publisher was often more important than the author.⁶⁹ Authors had limited copyright. The lapse of the Licensing Act in 1695, which required consent of a Licensor (the Stationer's Company) for printing, and the introduction of the Copyright Act in 1710, incorporating the concept of the author as the owner of literary property, gave the copyright of new books to the bookseller for fourteen years, renewable for another fourteen years, if the author was alive.⁷⁰ The problem of copyright for encyclopaedias and dictionaries was not addressed legally and there was a convention of tolerance concerning plagiarism. Authors and booksellers required an agreement, and it was described as 'to write for the bookseller is, more or less a grievance, according as the bargain [sic] can be driven . . . and (the bookseller) is as absolute in prescribing the time of publication, as in proportioning the pay'.⁷¹ Copyright prices increased during the eighteenth century, varying between £180 to over £3,000.⁷² It is not known how much James was given for the copyright of *A Medicinal Dictionary* or, indeed, how many copies were printed, but the capital outlay usually limited most book editions to about 750

⁶⁹ James Raven, 'Investing in Books; the Supremacy of the Booksellers' in, *The Business of Books, Booksellers and the English Book Trade, 1450-1850* (New Haven: Yale University Press, 2007), pp. 119-153.

⁷⁰ Discussed by Richard Yeo, (2001), pp. 195-221.

⁷¹ James Ralph, *The Case of Authors by Profession or Trade* (London: R. Griffiths, 1758).

⁷² Arthur S. Collins, *Authorship in the Days of Johnson* (Clifton: A.M. Kelly, 1973), pp. 33-34.

copies.⁷³ Print runs tended to be in multiples of 250, the size of the pressman's original token calculation of full sheets printed on one side per hour.⁷⁴ It has also been noted that the number of impressions that can be taken from a single copperplate is limited, perhaps to 500 good quality and 500 more of inferior quality.⁷⁵ My estimate of 750 copies of *A Medicinal Dictionary* is consistent with the current known numbers of copies held in 316 libraries throughout the world, with a smaller number (173) of libraries holding copies of the *Proposals*.⁷⁶ The dictionary may not have sold particularly well, as advertisements for a few remaining copies appeared twice weekly in *The Public Advertiser* from February to December 1753.⁷⁷

Thomas Osborne and groups of publishers

Osborne's motives for publishing *A Medicinal Dictionary* can only be surmised, but the production has all the hallmarks of a prestigious, academic publication, perhaps following Chambers's *Cyclopaedia* with which Osborne (or more likely his father, Thomas Osborne senior) had been associated.⁷⁸ As noted above, *Cyclopaedia* was produced by a large group of publishers. Osborne may have judged it was the right moment for a large medical dictionary, noting the continuing success of Quincy's medical dictionary. Thomas Osborne was one of at least five Osbornes/Osborns in the London book trade in the eighteenth

⁷³ The first edition of Johnson's dictionary, however, was 2,000 copies. James Raven, 'The Book as a Commodity' in, *The Cambridge History of the Book in Britain* vol. V, 1695-1830, ed. by J. Barnard, D.J. McKitterick, J.R. Wilson (Cambridge: Cambridge University Press, 2009), p. 92.

⁷⁴ James Raven, *The Business of Books: Booksellers and the English Book Trade, 1450-1850* (New Haven: Yale University Press, 2007), p. 306.

⁷⁵ Roger Gaskill, 'Printing House and Engraving Shop; a Mysterious Collaboration', *Book Collector*, 53 (2004), 220-222.

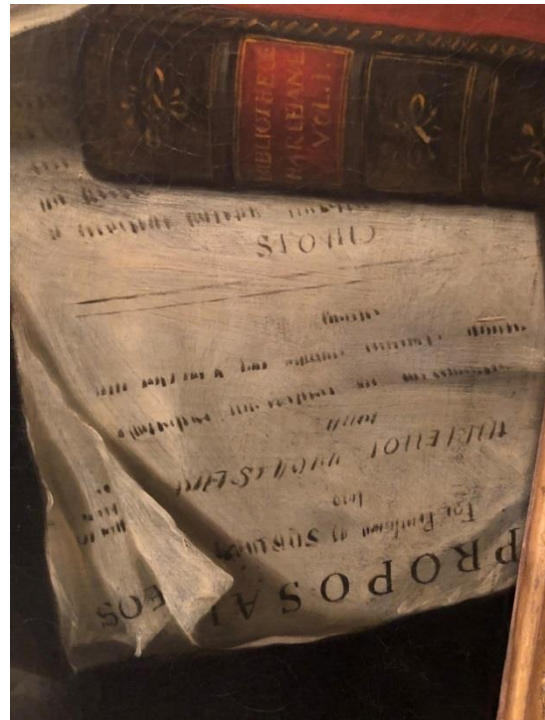
⁷⁶ World Catalogue, 2015. [Accessed September 2017].

⁷⁷ Beverley Schneller, 'Using Newspaper Advertisements to Study the Book Trade: a Year in the Life of Mary Cooper' in, *Writers, Books, and Trade* ed. O.M. Brack, Jr (New York: AMS Press, 1994), p. 127.

⁷⁸ Ephraim Chambers, *Cyclopaedia* (London: James and John Knapton et al., 1728).

century.⁷⁹ Thomas Osborne (1704?-1767) (Figure 3.2), who published *A Medicinal Dictionary*, was the son of Thomas Osborne (d.1744), also a bookseller. It is not known if the Thomas Osbornes were related to either of the John Osbornes, who were contemporary publishers. When Thomas Osborne senior died, his stock, copyrights and properties were left to his son. Thomas Osborne junior probably took up a job in his father's business before 1728 when made a freeman and then, four days later, a liveryman of the Worshipful Company of Stationers and Newspaper Makers. Osborne junior established a business at 1-2, Page's Buildings, Field Court, Gray's Inn, London. The working relationship between father and son is not clear.⁸⁰

Figure 3.2: Thomas Osborne junior by James Cranke⁸¹ Detail on table



⁷⁹ John Osborne senior died about 1746; his son, John Osborne junior, was apprenticed to his father but was bankrupt in October 1751. Frank A. Mumby, *Publishing and Bookselling*, 5th edn (London: J. Cape, 1974), p. 164. Many booksellers and printers were migrants to London, for example Samuel Richardson, William Strahan and Robert Dodsley. James Raven, *The Business of Books*, p. 214.

⁸⁰ O.M. Brack, 'Thomas Osborne', in *Oxford Dictionary of National Biography* [accessed 8 December 2018].

⁸¹ Noted in *Illustrated London News*, 24 December 1966. The artist, James Cranke (1707-1780), attempted to make his name in London c.1737-1752.

Yale Center for British Art. <https://collections.britishart.yale.edu/vufind/Record/1670788>

Detail kindly provided by Abigail Lamphier, Curator of the Yale Centre. The papers shown on the table appear to be headed 'Proposal' and the title of the book resting on the papers is *Bibliotheca Harleiana* Vol I. The significance of the Harleian collection has already been noted.

Publishers did not work in isolation. Publishing large texts usually required the support of a group of booksellers, a conger or syndicate, either for wholesale or shared copy-owning. The financial risk was spread and literary property was protected.⁸² This is demonstrated by the range of publishers involved in producing other dictionaries (Table 3.2). For example, the first edition of Ephraim Chambers's *Cyclopaedia* in 1728 involved the participation of twenty-one booksellers, including John Osborn(e) and, interestingly, Thomas Osborne. The Osbornes were not involved in the second edition of Chambers's *Cyclopaedia* in 1738, but Thomas Osborne was one of the nineteen booksellers for volume II of the edition published in 1741-43 and he remained one of the publishers for the seventh edition in 1752.

⁸² Jeff Loveland, *The European Encyclopedia*, p. 156.

Table 3.2: Groups of publishers for Blankaart's and Quincy's medical dictionaries, Chambers's *Cyclopaedia* and Johnson's dictionary

Steven Blankaart, *The Physical Dictionary*

1684 printed by J.D., sold by John Gellibrand

7th edn 1726 J. & B. Sprint.

John Quincy, *Lexicon Physico-Medicum*

1st edn 1719 A. Bell, W. Taylor and J. Osborn

4th edn 1730 J. Osborn, T. Longman.

Ephraim Chambers, *Cyclopaedia*

1st edn 1728 James and John Knapton, John Darby, Daniel Midwinter, Arthur Bettesworth, John Senex, Robert Gosling, John Pemberton, William and John Innys, John Osborn and Tho. Longman, Charles Rivington, John Hooke, Ranew Robinson, Francis Clay, Aaron Ward, Edward Symon, Daniel Browne, Andrew Johnston, Thomas Osborn.

5th edn 1741/43 W. Innys, J. and P. Knapton, S. Birt, D. Browne, T. Longman, R. Hett, C. Hitch, L. Hawes, J. Hodges, J. Shuckburgh, A. Millar, J. & J. Rivington, W. Ward, M. Senex and the executors of J. Darby.

Samuel Johnson, *A Dictionary of the English Language*

1st edn (1755) W. Strahan, for J. and P. Knapton, T. and T. Longman, C. Hitch and L. Hawes, A. Millar, and R. and J. Dodsley.

Thomas Osborne collaborated with a number of other different publishers over his lifetime.

For example, a major project before James's dictionary was the publication of Thomas

Salmon's *Modern History or the Present State of all Nations* in several volumes from

1728, the publishers being James Crockatt, Thomas Wootton and Thomas Osborne.⁸³

Another example of a major project produced after *A Medicinal Dictionary* was John Hill's

The British Herbal (London: T. Osborne, J. Shipton, J. Hodges, J. Newbery, V.B. Collins,

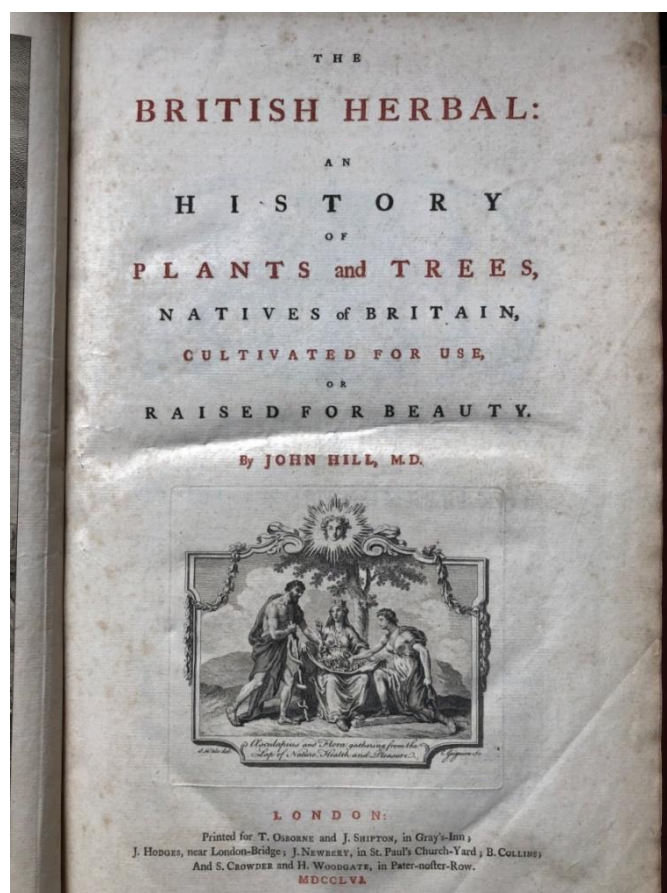
S. Crowder, H. Woodgate, 1756) (Figure 3.3), showing collaboration with John Newbery,

among others. It also illustrates the continuing importance of herbals as I have discussed in

Chapter 1.

⁸³ The third edition in 3 vols. (1744-46) was published by Thomas Longman, Thomas Osborne, J. Shuckburgh, C. Hitch, S. Austen and J. Rivington.

Figure 3.3: Title page of *The British Herbal* (1756)



(personal copy)

Osborne was the main publisher for James's dictionary but a comment in the preface is consistent with more than one bookseller. In the preface, James admits 'I must not finish this preface, without taking notice of some complaints which the booksellers concerned in this work have sufficiently teized [sic] me with, relative to its length.' Possible partners were J. Roberts, Samuel Richardson and James Crockatt (a bookseller in Fleet Street who became an insolvent debtor and was jailed at Ludgate in 1749). Volume I of *A Medicinal Dictionary* gives Thomas Osborne as the only publisher but in volumes II and III of the

dictionary J. Roberts is given as an additional seller.⁸⁴ So we can see this work was the result of the hands of many men.

Osborne's enterprise is also demonstrated by the publication from January to June 1737 of six issues of *The British Librarian* on rare books and manuscripts. This was the first English periodical on these topics. Furthermore, in 1739 Osborne and Rivington approached Samuel Richardson to put together a 'model letter writer'. The result was Richardson's best-selling and Britain's first novel, *Pamela*. Osborne's most famous purchase was the valuable library of Edward Harley, second Earl of Oxford, in 1741 for £13,000, and for inviting Samuel Johnson, William Oldys and Michael Maittaire to write a catalogue for some of the over 50,000 books. This was not just a bookseller's commercial project but a contribution to learning.⁸⁵ The invitation to Johnson came after Osborne had sought advice from Thomas Birch (1705-1766).⁸⁶ Johnson had composed an epigram in Greek in *The Gentleman's Magazine* in December 1738, complimenting Birch on his many contributions to *A General Dictionary, Historical and Critical* (ten volumes published 1734-1741) for which Osborne was one of the publishers.⁸⁷ Later, Johnson sent Birch some

⁸⁴ Little is known about Roberts. This could have been John Roberts (died 1776) who set up in partnership with George Robinson in 1764. James Raven, *The Business of Books* (New Haven: Yale University Press, 2007), p. 175.

⁸⁵ Dustin Griffin, *Authorship in the Long Eighteenth Century* (Newark: University of Delaware Press, 2014), p. 121.

⁸⁶ Birch was an historian and Keeper of Books at the British Museum, and Secretary of the Royal Society 1752-65. He was a prolific writer and had advised Edward Cave on the running of *The Gentleman's Magazine*. Johnson commented 'Tom Birch is as brisk as a bee in conversation, but no sooner does he take a pen in his hand, than it becomes a torpedo to him, and benumbs all his faculties.' George Birkbeck Hill, ed., *Boswell's Life of Johnson*, vol I (Oxford: Clarendon Press, 1934), p. 159.

⁸⁷ Truth, in joyful witness of Thomas Birch

Author of the lives of brave, wise men

Prays, that when he's struck by the Spear of death

There may arise another Birch to write of him.

Albert E. Gunther, *An Introduction to the Life of the Rev. Thomas Birch DD, FRS, 1705-1766* (Halesworth: the Halesworth Press, 1984), p. 29.

proofs of his dictionary in 1755, and had a very favourable reply from him.⁸⁸ William Oldys was an antiquarian, bibliographer and literary secretary to the Earl of Oxford from 1738-1741, and had been involved in Osborne's *The British Librarian*. The various connections are illustrated by an interesting dinner meeting that was arranged in the Earl of Oxford's library in Cavendish Square, St Marylebone, on 9 October 1742 with Thomas Birch, Martin Folkes (1690-1754) (President of the Royal Society), Samuel Johnson and William Jones (1675-1749), a mathematician who introduced the use of the symbol π .⁸⁹

The purchase of the Harley collection by Osborne was a controversial enterprise as many considered that the government should have bought more of the collection. Dibdin in *Bibliomania* lamented that Osborne's acquisition was 'the irreparable loss, and I had almost said the indelible disgrace of the country'.⁹⁰ 7,639 manuscripts were bought for the nation for £10,000 which, with Sir Hans Sloane's books and manuscripts, formed the basis of the British Museum/Library. Advertisements for a catalogue of the Harleian collection appeared in newspapers in November and December 1742. Johnson's proposals for printing the first two volumes of *Bibliotheca Harleiana* were dated 1 November 1742, and Johnson began work on the collection at that time and continued at least until the end of 1743. Volumes 1 and 2 were ready by 28 February 1743 and the sale started in April.⁹¹ These dates indicate that James and Johnson would have been in close professional contact through Thomas Osborne for at least a year. The speed of the production of the catalogues

⁸⁸ Gunther, *An Introduction to the Life of the Rev. Thomas Birch*, p. 56.

⁸⁹ James L. Clifford, *Young Samuel Johnson* (London: William Heinemann, 1955), p. 256.

⁹⁰ Edward Marston, *Sketches of Some Booksellers of the Time of Dr Samuel Johnson* (London: Marston, 1902), pp. 45-55.

⁹¹ *Catalogus Bibliothecae Harleianae, in Locos Communes Distributes cum Indice Auctorum*. Five volumes. (London: T. Osborne, 1743-1745). This catalogue was not just a bookseller's commercial project but a contribution to learning. Dustin Griffin, *Authorship in the Long Eighteenth Century* (Newark: University of Delaware Press, 2014), p. 121.

resulted in poor organisation and incomplete descriptions of many of the books. Osborne banned previews of the Harleian catalogue until the first day of the sale, and annoyed booksellers by charging for the catalogue (5s per volume), later relenting by allowing purchasers to claim the money back. Johnson's 'Account' gives a broad overview of the collection and was an apology for charging for the catalogue.⁹² Some of the medical books may have been a useful resource for James though it is unknown if he acquired or borrowed any of them.⁹³ A large number of texts by European and English authors were listed, including: *Natural philosophy* (113 items), *Medicina* (723 items), *Materia Medica* (46 items), *De Alchymie and Chemistry* (48 items), *Pharmacopoeiae* and *Dispensatories* (31 items), *Anatomy* (67 items), *Surgery* (27 items), *Obstetrics* (21 items), *Natural History* (243 items), and *Medical Waters* (36 items), *Lapidibus and metals* (133 items).

Osborne was accused of charging too high a price for the books, to which he replied:

If I have set a high value upon books, if I have vainly imagined literature to be more fashionable than it really is, or idly hoped to receive a taste well-nigh extinguished, I know not why I should be persecuted with clamour and invective, since I shall only suffer by my mistake, and be obliged to keep the books I was in hope of selling.⁹⁴

This could have been written by Johnson. Despite the moderate prices of the books, the sale was slow and Johnson assured Boswell 'there was not much gained by the bargain'.⁹⁵ Nevertheless, Osborne continued to be successful in business, as shown by his purchase of

⁹² Volume I included Bibles, commentaries, classic texts, and books on geographia, antiquities, coins, monuments and history. Volume II included theology, history, law, philosophy, natural philosophy, physick and natural history, containing Blankaart's *Physical Dictionary* and Harris's *Lexicon Technicum*. Volumes III and IV of the catalogue were published on 4 January 1744, and the pamphlets in a *Harleian Miscellany*, 1744-6.

⁹³ For comparison, Chambers made use of the books of John Senex to whom he was apprenticed. Senex was a map and globe maker and bookseller, see Yeo, p. 37.

⁹⁴ E. Marston, *Sketches of Some Booksellers*, p. 48.

⁹⁵ Charles H. Timperley, *Encyclopaedia or Literary and Typographical Anecdote*, 2nd edn (London: H. Bohn, 1842), p. 717.

another fine library from the second Earl of Leicester in 1743, and his many subsequent publications.

In this section, I have brought together various comments about Osborne as a person which may help to explain his ambition to correct some of the prevailing negative images with a scholarly publication such as a medical dictionary. Several contemporaries noted Osborne's business methods and personality traits, but I have been unable to discover any record made by James. In addition to Johnson, other authors have left differing comments about Osborne as a person, and 'to assess Osborne's character properly is difficult'.⁹⁶ Overall, he has been described as 'an expert in all the tricks and arts of his trade'.⁹⁷ Boswell records the story of an episode from about 1744, when Johnson attacked Osborne with a large folio volume in his shop, before putting his feet on the bookseller's neck.⁹⁸ Johnson admitted to beating Osborne, but at his own house.⁹⁹ Sir John Hawkins recounts the episode in more detail and describes Osborne abusing Johnson roughly for wasting time on one of the pamphlets to decide whether it should be reprinted in the *Harleian Miscellany*.¹⁰⁰ Johnson was quoted about the incident: 'Sir, he was impertinent to me and I beat him down'.¹⁰¹ Hester Thrale many years later noted:

I asked [Johnson] the other day about his combat with that Osborne, how much of the story was true: 'It was true' said he 'that I beat the fellow, and that was all; but

⁹⁶ O.M. Brack, *Oxford Dictionary of National Biography* [accessed 16 August 2019].

⁹⁷ Adolphus W. Ward, Alfred R. Waller, 'Book Production and Distribution, 1625-1800' in, *Cambridge History of English Literature*, vol. XI, ed. by A.W. Ward, A.R. Waller (Cambridge: Cambridge University Press, 1907), p. 332.

⁹⁸ The folio book used was said to have been a Bible, *Biblia Sacra Graece* (Francofurti: A. Wecheli, 1597). John D. Fleeman, *The Sale Catalogue of Samuel Johnson's Library* (English Literary Studies: University of Victoria, 1975), p. 70.

⁹⁹ Boswell, *Life*, vol. I, p. 154.

¹⁰⁰ 'Johnson's anger at so foul a charge was not so great as to make him forget that he had a weapon at hand; he seized a folio that lay near to him, and with it felled his adversary to the ground, with some exclamation, which, as it is differently related, I will not venture to repeat.' Hawkins, p. 150.

¹⁰¹ Charles H. Timperley, *Encyclopaedia or Literary and Typographical Anecdote*, p. 716.

the world so hated poor Osborne that they never done multiplying the blows and increasing the weight of them for twenty years together.¹⁰²

I have been unable to find any record of this event noted by James and there is no evidence of any similar episodes involving James and Osborne. Indeed, Osborne's character and business acumen may well have fitted James's entrepreneurial nature better than Johnson's.

Many other comments have been recorded about Osborne. Osborne's advertisements in *The London Gazette* were described by Dibdin as drawn up in the most ridiculously vain and ostentatious style and Dibdin claimed that Osborne advertised his shop as having all the pompous editions of classics and lexicons.¹⁰³ On the other hand, Thomas Dibdin was also quoted as describing Osborne as 'the most celebrated bookseller of his day'. As a person, Osborne was described by Dibdin as 'short and thick; and to his inferiors, generally spoke in an authoritative and insolent manner' but 'his collections were truly valuable, for they consisted of the purchased libraries of the most eminent men of those times'.¹⁰⁴

Richard Gough said of Osborne that he 'filled one side of Gray's Inn with his lumber, and without knowing the intrinsic value of a single book, contrived such arbitrary prices, as raised him to his country house, and dog-and-duck huntings', and Dell said that 'by him the books no place or order gain, confused like chaos, and his muddy brain'.¹⁰⁵ Nicols also recalled 'his insolence to his customers was also frequently past bearing. If one came for a book in his catalogue, he would endeavour to force on him some new publication of his

¹⁰² O.M. Brack, 'Samuel Johnson, Thomas Osborne, and the folio: the incident revisited', *Johnsonian Newsletter*, 59: 2 (September 2008), pp. 18-24.

¹⁰³ John Nichols, *Literary Anecdotes of the Eighteenth Century* vol. III (London: Nichols & Bentley, 1812), p. 402.

¹⁰⁴ Charles H. Timperley, *Encyclopaedia or Literary and Typographical Anecdote*, p. 716.

¹⁰⁵ James Raven, *The Business of Books*, p. 189.

own, and, if he refused, would affront him'.¹⁰⁶ 'He attained an immortality from the verbal and physical attacks he received from men of genius'.¹⁰⁷ In his *Life of Alexander Pope* (1688-1744) Johnson says that Osborne was 'a man entirely destitute of shame, without sense of any disgrace but that of poverty'. Osborne, 'deadened by his impassive dullness', could not understand Pope's satire.¹⁰⁸ In the 1743 edition of *The Dunciad*, Pope mocked Thomas Osborne; in previous editions the character was named 'Chetwood', and in the 1735 edition, 'Chapman'.¹⁰⁹ This attack was in response to Osborne selling remaindered copies of Pope's translation of the *Iliad*.¹¹⁰ In a urinating contest in book II of the *Dunciad*, to see whose urine stream was the highest, Osborne's efforts were insufficient to produce an arc and he splashed his face. Pope uses the image of the pissing bookseller to describe his professional inadequacy and goes on to tell us what kind of writing attracts Osborne's attention - 'the wild meander' and the 'watery round'.¹¹¹ Pope would have been well aware of other unauthorised publications of his work.¹¹² Osborne's reaction to Pope's mockery has not been recorded, but it is of interest that Richard Mead was delighted to have been immortalised by Pope.¹¹³ Pope's health was deteriorating at the time James was writing the dictionary so he missed being immortalised.

¹⁰⁶ John Nichols, *Literary Anecdotes* (1812).

¹⁰⁷ Lester S. King, *The Medical World of the Eighteenth Century* (Chicago: Chicago University Press, 1958).

¹⁰⁸ This refers to Pope's poem *Dunciad* (1st edn 1728) in which he attacked mercenary authors, hacks, scribblers and dunces.

¹⁰⁹ Alexander Pope, *The Dunciad in Four Books* (London: T. Cooper, 1743), pp. 94-97.

¹¹⁰ 'This man published advertisements for a year together, pretending to see Mr Pope's subscription books of Homer's *Iliad* at half price; of which books he had none, but cut to the size of them (which was quarto) the common books in folio, without copperplates, on a worse paper, and never about half the value. Footnote to Pope, p. 94.

¹¹¹ Sophie Gee, 'The Sewers, Ordure, Effluence, and Excess in the Eighteenth Century' in, *A Concise Companion to the Restoration and Eighteenth Century*, ed. by Cynthia Wall (Oxford: Blackwell, 2005), pp. 116-117.

¹¹² The *Dunciad*, for example, was produced in 14 or 15 unofficial reprints between 1728 and 1751. David Vander Meulen, 'Unauthorised editions of Pope's *Dunciad*, 1728-1751' in, *Writers, Books, and Trade*, ed. by O.M. Brack, Jr (New York: AMS Press, 1994), pp. 221-242.

¹¹³ George Rousseau, *The Notorious Sir John Hill* (Bethlehem: Lehigh University Press, 2012), p. 67.

Sir John Hawkins was similarly dismissive of Osborne as a bookseller: ‘he was one of the most ignorant; of title-pages and editions he had no knowledge or remembrance, but in all the tricks of the trade he was most expert’.¹¹⁴ A more recent epithet described him as ‘predatory’.¹¹⁵ Plomer’s assessment of Osborne was mixed, describing him as ‘coarse, dull and uneducated’ and as ‘a very respectable man’.¹¹⁶ The Earl of Chesterfield clearly recognised value in Osborne’s bookshop with a recommendation to his son. ‘When you return here, I am apt to think that you will find something better to do than run to Mr Osborne’s at Gray’s Inn, to pick up scarce books. Buy good books, and read them.’¹¹⁷ Timperley, also, was generous, describing Osborne as a bookseller of great eminence.

In the latter part of his life his manners were considerably softened, particularly to the young booksellers who had occasion to frequent his shop in pursuit of their orders. If they were so fortunate as to call whilst he was taking wine after dinner, they were regularly called into the little parlour in Gray’s Inn to take a glass with him. ‘Young man’ he would say, ‘I have been in business more than forty years, and am now worth more than £40,000. Attend to your business, and you will be as rich as I am.’¹¹⁸

In my research I found another charitable aspect in that a Thomas Osborne of Gray’s Inn was listed as being elected governor of the Foundling Hospital on 14 May 1746.¹¹⁹ This is likely to have been Thomas Osborne, the publisher. Despite these mixed assessments of Osborne, Johnson, in the mid-1750s, wrote down a list of people he knew which included seven publishers namely, Thomas Osborne, John Newbery, Robert Dodsley, Andrew

¹¹⁴ Marston, *Sketches of Some Booksellers*, p. 50.

¹¹⁵ Mark Purcell, *The Country House Library* (New Haven: Yale University Press, 2017), p. 98.

¹¹⁶ Henry R. Plomer, *A Dictionary of the Printers and Booksellers Who Were at Work in England, Scotland and Ireland from 1726-1775* (Oxford: Bibliographical Society, 1907).

¹¹⁷ Letter 220 London 19 March 1750 in, *Letters Written by Philip Dormer, Earl of Chesterfield to His Son, 1737-1768* (London: W.W. Gibbings, 1890), p. 314.

¹¹⁸ Arthur S. Collins, *Authorship in the Days of Johnson* (Clifton: A.M. Kelly, 1973), p. 33.

¹¹⁹ Reginald H. Nichols, F.A. Wray, *The History of the Foundling Hospital* (London: Oxford University Press, 1935), p. 358. The first children were admitted on 25 March 1741. Handel was a governor and performed the Messiah annually from 1750 until his death in 1759 with the benefit of fund-raising for the hospital but also establishing the work. Johnson visited in November 1756 and his subsequent comments on the failure of religious instruction of the children nearly led to a legal action. John Wiltshire, *Samuel Johnson in the Medical World* (Cambridge: Cambridge University Press, 1991), pp. 118-122.

Millar, William Strahan, Jacob Tonson and David Henry. The purpose of this interesting list is unknown.¹²⁰ Millar, in contrast to Osborne, was known for being liberal and loyal to writers.¹²¹ Osborne at this time was in partnership with J. Shipton and published another folio dictionary.¹²²

Osborne's motives for publishing *A Medicinal Dictionary* can only be surmised, but the production has all the hallmarks of a prestigious, academic publication, perhaps following Chambers's *Cyclopaedia* with which Osborne (or more likely his father, Thomas Osborne senior) had been associated.¹²³ As noted above, *Cyclopaedia* was produced by a large group of publishers. Osborne may have judged it was the right moment for a large medical dictionary and noted the continuing success of Quincy's medical dictionary. Not all London booksellers were successful, as shown by the possible bankruptcy of John Osborne junior in 1751, and the bankruptcies of John Knapton in 1755 (perhaps related to Johnson's dictionary) and James Rivington in 1760, who overstretched himself, turned to piracy, and added criminality to his poor judgement.¹²⁴ Later, a large number of bankruptcies were recorded in the book trades, 317 between 1776 and 1778.¹²⁵ Another bankrupt was James Crockatt, who was linked to Osborne through the formation of the Society of Booksellers for Promoting Learning.¹²⁶ I have been unable to discover other members of this Society

¹²⁰ James Clifford, *Dictionary Johnson* (New York: McGraw-Hill, 1979), p. 156.

¹²¹ James Raven, *The Business of Books*, p. 159.

¹²² Thomas Broughton, *An Historical Dictionary of all Religions from the Creation of the World to this Present Time* (London: T. Osborne, J. Shipton, 1756).

¹²³ Ephraim Chambers, *Cyclopaedia* (London: James and John Knapton et al., 1728).

¹²⁴ Patricia Hernlund, 'Three Bankruptcies in the London Book Trade, 1746-61: Rivington, Knapton, and Osborn in, *Writers, Books, and Trade*, ed. by O.M. Brack Jr. (New York: AMS Press, 1994), pp. 77-122.

¹²⁵ Raven, *The Business of Books*, p. 296.

¹²⁶ James Crockatt, London, bookseller, was listed as an insolvent debtor and jailed at Ludgate (LG 24 January 1749). 'J. Crockatt is remov'd to the Golden Head opposite Surgeon's Hall in the Old Baily (LDA 30 December 1752). Last Saturday [10 March] died at his lodgings in Old Bailey, Mr. James Crockatt, formerly a bookseller in Fleet-street; a man well known in this busy town for his many schemes, several of which turned out greatly to the advantage of his brethren and the authors employed; but he met with the fate of most

apart from the mention of ‘James Crockatt’ and ‘Smith’. The Society may have assisted James in becoming an established author in London. The Society may have been an attempt to attract authors and to reduce the power of a single publisher in setting the contract. McConchie suggested that Osborne and others may have been trying to salvage their reputations from accusations of profiteering at the expense of authors.¹²⁷ Another possibility is that it was set up in opposition to The Society for the Encouragement of Learning (1735-1749). This Society was a co-operative of authors, independent of booksellers. One of the original members being Richard Mead whose home was the venue for the last meeting of the Society. Authors could apply to The Society of Booksellers for Promoting Learning. Applications were directed to James Crockatt at the Society’s offices in Fleet Street, near St Bride’s Church, in addition to Thomas Osborne. This was advertised in 1741.¹²⁸ James was the author of two of the nine titles published by this short-lived Society (Table 3.3).

Table 3.3: Publications of the Society of Booksellers for Promoting Learning

- [1] Anon., *The Christian Philosopher*, 1741
- [2] Anon., *An Essay on the Divine Paternity, or, God the Father of Men*, 1741
- [3] Robert James, M.D., *Proposals for Printing a Medicinal Dictionary*, 1741
- [4] Robert James, M.D., *A New Method of Preventing and Curing the Madness Caused by the Bite of a Mad Dog*, 1741
- [5] John Kelly, *The Levee. A Farce*, 1741
- [6] James Nihell, M.D., *New and Extraordinary Observations Concerning the Prediction of Various Crises by the Pulse*, 1741
- [7] Charles de St.Yves, *A New Treatise of the Diseases of the Eyes*, 1741
- [8] J. Shortess, *Harmonic Architecture. Exemplified in a Plan, Elevations and Sections, &c. of a Building*, 1741
- [9] Benjamin Parker, *The Divine Authority of the Scriptures Philosophically Prov’d*, 1742

projectors and has left a wife and infant daughter unprovided for.’, *Ladies Magazine*, 17 March 1753. Victor Berch, Ian Maxted, *Exeter Working Papers in Book Trade History*; X; *The London Book Trades of the Later 18th Century* (updated 25 January 2001).

¹²⁷ McConchie, *Discovery in Haste*, p. 149.

¹²⁸ *The Country Journal; or, The Craftsman*, Saturday, 18 July 1741 [Issue 785].

The book on the diseases of the eye by Charles de St. Yves may have been a useful resource for James.¹²⁹ Charles de Saint Yves is referred to by James as a celebrated oculist under the headword ‘Cataract’. The short life of the Society, as noted in the dates of the publications, shows that it was not a successful venture.

It is of interest that two of ‘Sir’ John Hill’s (see also p. 149) publishing contracts with Osborne survive, both revealing Hill’s custom to sell his copyright outright for large sums and to demand a stipulated sum if a particular work exceeded anticipated sales.¹³⁰ For example, an agreement was made on 21 December 1752 concerning the three-volume folio, *Natural History*.

... that in consideration for the sum of four hundred and seventy-two pounds ten shilling ... to the said Dr John Hill in hand paid by the said Thomas Osborne, He the said Dr John Hill, hath granted, bargained, sold and assigned transferred and set over and by these presents doth grant bargain, sell assign transfer and set over unto the said Thomas Osborne his executors administrators and assigns all that the copy right of privilege of printing reprinting publishing vending and selling in any volumes and under any title whatsoever of all those books compiled or written by the said Dr John Hill entitled *A General Natural History*.

Osborne achieved further notoriety for taking part in the ‘battle of the booksellers’, which was a prolonged but unsuccessful effort by London publishers to win perpetual copyright. In 1765, Osborne and another publisher, Andrew Millar, sued Alexander Donaldson in the Court of Chancery over the reprinting of books, maintaining that old works were protected in perpetuity. A ruling was made in favour of Donaldson and against common law

¹²⁹ J. Stockton, translator, *A New Treatise of the Diseases of the Eyes Containing Proper Remedies, and Describing the Chirurgical Operations Requisite for Their Cures. With Some New Discoveries in the Structure of the Eye, That Demonstrate the Immediate Organ of Vision*. By M. de St. Yves, Surgeon Oculist of the Company of Paris. Together with the author’s answer to M. Mouchard. (London: printed for the Society of Booksellers for Promoting Learning, and sold by J. Crockatt, and Osborne and Smith, 1741). Charles de St. Yves is referred to by James as a celebrated oculist under the headword ‘Cataract’.

¹³⁰ Rousseau, *The Notorious Sir John Hill*, p. 92.

copyright. Osborne and Millar did not take the case to the House of Lords, fearing a decisive rejection of their position.

Osborne's successful career within London's thriving publishing industry can also be illustrated by other major publications, some of which I have mentioned already, and by his exports. He was one of the members of a conger for the publication of a substantial illustrated geography book.¹³¹ He was involved in the publication of Richard Rolt's substantial *A New Dictionary of Trade and Commerce* (1756), consisting of 926 pages, and illustrated with tables. Osborne continued to be a leading publisher for *An Universal History*, which was produced in seven volumes.¹³² In the original version all seven volumes had the imprint of T. Osborne, and the first six had J. Crockatt in addition. Volume 7 had those of S. Richardson, J. Osborne, A. Millar and J. Hinton. Subsequent editions in twenty volumes in 1746 and in twenty-one volumes in 1752 continued to include T. Osborne. Osborne exported to the leading University of Göttingen.¹³³ This library, started in 1743, possessed 120,000 volumes by the 1780s, ten times the University of Halle and four times the University of Cambridge.¹³⁴ Osborne also entered the colonial book trade in about 1748, dispatching one of his first shipments to William Parks in Williamsburg and receiving orders from William Hunter, also of Williamsburg.¹³⁵ In 1748, Benjamin Franklin wrote 'Mr Thos Osborne, Bookseller in London, is endeavouring to open a correspondence in the plantation for the sale of his books. He has accordingly sent

¹³¹ Emanuel Bowen, *A Complete System of Geography* (London: William Innys et al., 1744).

¹³² *An Universal History* (London: J. Batley, E. Symon, T. Osborne, J Crockatt, 1736-1744).

¹³³ Hubert Steinke, 'Science, Practice and Reputation: The University of Göttingen and its Medical Faculty in the Eighteenth Century' in, *Centres of Medical Excellence?*, ed. by Ole Peter Grell, Andrew Cunningham, Jon Arrizabalaga (London: Routledge, 2010), pp. 287-303.

¹³⁴ *Ibid.*, p. 294.

¹³⁵ James Raven, *London Booksellers and American Customers* (Columbia: University of South Carolina Press, 2002), p. 87.

several parcels, one to Mr Parker of N. York, one to Mr Read here and one to Mr Parks in Virginia. I have seen invoices to Parker and Read; and the books to be very high-charged, so that I believe they will not sell.’¹³⁶ Nevertheless, Osborne and Franklin appeared to be on good terms, as indicated in a letter to Franklin, Speaker of the Assembly in Pennsylvania, from Thomas Osborne, in November 1764.¹³⁷ John Smith of Burlington and Philadelphia was also recorded as having bought books from Osborne.¹³⁸

Overall, Osborne was a successful publisher and bookseller for many years. *A Medicinal Dictionary* was but one of his many academic publications in several fields. Although his personality and business methods were not liked by everyone, some of his character traits were similar to James’s, probably helping to establish a successful partnership. Above all, Osborne had the financial stability to publish a substantial medical dictionary.¹³⁹

Printing of *A Medicinal Dictionary*

Compiling and writing was a major task but the considerable printing resource of 3,343 folio pages (40.5 x 25.5 cms) was another important aspect which has received little attention. McConchie noted that the typography of James’s dictionary is far in advance of

¹³⁶ Leonard W. Labaree, ed., *The Papers of Benjamin Franklin*, vol. III (New Haven: Yale University Press, 1961), p. 322.

¹³⁷ Mr Osborne’s compliments to Dr Franklin and has taken the liberty of sending him the 15th vol. of *Modern History* with some of his catalogues which Mr. O does not doubt but the Dr. will order to be distributed to the best advantage, and it would give him infinite pleasure if that intricated account with the gentleman who had the disposal of the books was settled [reference to Isaac Norris], ‘To Benjamin Franklin from Thomas Osborne, November 1764’ in, *Founders Online*, National Archives [last modified 30 March 2017] <http://founders.archives.gov/documents/Franklin/01-11-02-0144>. Original source: *The Papers of Benjamin Franklin*, vol. XI, *January 1, through December 31, 1764*, ed. Leonard W. Labaree. (New Haven and London: Yale University Press, 1967), pp. 478–479.

¹³⁸ Frederick Tolles, ‘A Literary Quaker: John Smith of Burlington and Philadelphia’, *Pennsylvania Magazine of History and Biography*, 65 (1941), 300–333.

¹³⁹ As Johnson remarked, after completing his dictionary, ‘composing a dictionary requires books and a desk; you can make a poem walking in the fields, or lying in bed’. Allen Reddick, *The Making of Johnson’s Dictionary* (Cambridge: Cambridge University Press, 1996), p. 11.

that in any medical dictionary previously published in England.¹⁴⁰ Head-words and their variants are in full capitals. Proper names and in-text references are in italics. In long entries especially, the headword and the gloss appear on one line, and the first sentence of the main text begins with a new paragraph. Numbering appears frequently in botanical entries, and common names appear at the end of a numbered section in full capitals. Sections within long entries have centred headings in various font sizes and variously in normal type, small capitals and full capitals. All of these features make the massive amount of material contained in the dictionary surprisingly accessible as it provides visual structure.

The printers have not been recorded so indirect evidence has been sought to discover some of those involved. The well-known printers in London between 1720 and 1750 were Charles Ackers (1702/3-1759), the Basketts (John Baskett 1664/5-1742 and his son Thomas), William Bowyer (1699-1777), Samuel Richardson (bap.1689-1761), William Strahan (1715-1785) and John Watts (1678?-1763), each of whom employed fifteen to twenty apprentices and numerous journeymen compositors.¹⁴¹ It is uncertain how often shared printing occurred but about 10% was noted for Bowyer in 1731.¹⁴² The cost of printing at this time was documented by the successful printer, William Strahan, varying between 13d and 17d for a sheet, depending on the typeface.¹⁴³ William Strahan printed for Osborne and was one of the important printers of Johnson's dictionary.¹⁴⁴ I discovered an

¹⁴⁰ McConchie, personal communication.

¹⁴¹ Keith Maslen, *An Early London Printing House at Work; Studies in the Bowyer Ledgers* (New York: Bibliographical Society of America, 1993), p. 106.

¹⁴² *Ibid.*, p. 157.

¹⁴³ Patricia Hernlund, 'William Strahan's Ledgers: Standard Charges for Printing 1738-1785', *Studies in Bibliography*, 20 (1967), 89-111.

¹⁴⁴ Strahan worked as a compositor for Bowyer from May 1736 to February 1738. Maslen, p. 89. Strahan's ledgers are the most detailed of the four extant printing ledgers known to have survived from eighteenth-

entry in Strahan's ledger for 1744-45 noting the costs for printing the letters 'R' and 'S' of James's dictionary, containing 70 sheets at £1.8s per sheet, amounting to £98. The cost for printing the letters 'W', 'X', 'Y', 'Z', together with the explanation of the Tables, came to £16.2s. The ledger also lists the sale of two copies to Andrew Millar in December 1747 for £9 and a further two copies in June 1748 for the same price, six copies of the dictionary in 1748 to Mr Charles Hitch for £27, and one copy for £5.5s and another copy, in quires, for £4.10s to John Newbery. The name J. Roberts was an additional seller of volumes 2 and 3 of the dictionary. This may be significant as Roberts often used William Wilkins (d.1751) as his printer.¹⁴⁵ Samuel Richardson from the Society for the Encouragement of Learning, and a friend of Thomas Osborne, may also have been one of the printers for James's dictionary. Richardson's given address was Salisbury Court, and his printing shop was on the corner of Blue Bell Court and Dorset Street. I have also discovered that James indicated a link to Richardson through Walter Baker, a printer, 'who may be heard of at Mr Richardson's in Salisbury Court, Fleet Street'. James treated Baker for gout and, in Baker's own words:

It is a custom among us printers to claim the advice of any physician whose works we are engaged in; and, as I was employed in the *Medicinal Dictionary*, I made use of this privilege, and consulted Dr James, who put me into a course of mercurial medicines . . .¹⁴⁶

This Walter Baker was unlikely to be the same person of Helmet Court in the Strand, a chemist, who was involved in the challenge to Robert James's fever powder patent and

century London. James Raven, *Publishing Business in Eighteenth-Century England*, (Woodbridge: Boydell Press, 2014), p. 86.

¹⁴⁵ James Raven, *Bookscape: Geographies of Printing and Publishing in London before 1800* (London: The British Library, 2014), p. 85.

¹⁴⁶ Robert James, *A Treatise on the Gout and Rheumatism* (London: T. Osborne, J. Roberts, 1745), pp. 74-78.

was described as a chemist.¹⁴⁷ Richardson often collaborated with Andrew Millar (1705-1768), another publisher, who in turn collaborated with William Bowyer.

The number of printing presses, and perhaps printers, used by Osborne may be gained from my study of print signatures and printer's marks in the dictionary.¹⁴⁸ The signatures in my personal copy are in a continuous sequence in all three volumes, but the mixture of signatures in volume 3 suggests that sections of this volume may have been published simultaneously.

Preface: a to z uninterrupted, aa, bb

Volume 1: B to Z uninterrupted sequence, Aa to Zz uninterrupted, Aaa to Zzz uninterrupted, Aaaa, Bbbb, Vol 1 Cccc to Vol I Zzzz uninterrupted, Vol 1 5A to Vol 1 5Z uninterrupted, Vol 1 6A to Vol 1 6Z uninterrupted, Vol 1 7A to Vol 1 7Z uninterrupted, Vol 1 8A to Vol 1 8Z uninterrupted, Vol 1 9A to Vol 1 9Z uninterrupted, Vol 1 10A to Vol 1 10Z uninterrupted, Vol 1 11A to Vol 1 11K uninterrupted.

Volume 2: Vol II A to Vol II Z uninterrupted sequence, Vol IIA to Vol IIZ uninterrupted, Vol II 3A to Vol II 3Z uninterrupted, Vol II 4A to Vol II 4Z uninterrupted, Vol II 5A to Vol II 5Z uninterrupted, Vol II 6A to Vol II 6Z uninterrupted, Vol II 7A to Vol II 7Z uninterrupted, Vol II 8A to Vol II 8Z uninterrupted, Vol II 9A to Vol II 9Z uninterrupted, Vol II 10A to Vol II 10Z uninterrupted, Vol II 11A to Vol II 11Z uninterrupted, Vol II 12A to Vol II 12Z uninterrupted, Vol II 13A to Vol II 13S uninterrupted.

Volume 3: Vol III [A*], to Vol 2 [K*] uninterrupted sequence, [L*] to [Z*] uninterrupted, [Aa*] to [Xx*] uninterrupted, Gothic A to Gothic Z uninterrupted, Gothic Aa to Gothic Zz uninterrupted, Gothic Aaa to Gothic Rrr uninterrupted, [*A] to [*X] uninterrupted, [*Aa] to [*Zz] uninterrupted, [*Aaa] to [*Zzz] uninterrupted, [Aaaa], [A†] to [Z†] uninterrupted, [Aa†], [Bb†], [Cc†], ** A to ** Z uninterrupted, ** Aa to ** Zz uninterrupted, [†A], †B to †F uninterrupted, [†G] to [†K] uninterrupted.

Printer's marks indicate a specific press or pressman. In volume 1, I found that marks do not occur from the initial signature B on the first page until two pages after the signature Aaaa 2^r. These numbers suggest three presses were used for most of volume 1,

¹⁴⁷ Anon., *Affidavits Sworn by Walter Baker, Administrator to the late Baron Schwanberg* (London, 1754).

¹⁴⁸ A signature is a group of pages printed on a single sheet of paper that once folded, trimmed and cut becomes a specific number of pages. They may be used to locate a reference in a book such as James's dictionary that does not have page numbers.

four for most of volume 2 and up to seven for volume 3 (Table 3.4). This indicates that volume 3 probably involved more than one printer and Osborne's wide contacts with printers will have been useful. An alternative explanation might be that the higher numbers in volume 3 indicate pressmen rather than presses.¹⁴⁹

Table 3.4: Frequency of printer's marks in the three volumes of *A Medicinal Dictionary*

Numeral	Volume 1	Volume 2	Volume 3
1	73	102	136
2	5	83	97
3		3	51
4	76	64	30
5	61	91	18
6			15
7			2

These figures suggest greater pressure on the printers of the third volume with recruitment of number 3, 6 and 7 presses. The effect of such pressure was noted by the London printer, William Bowyer, when in the final week of September 1734, 84,033 impressions were made by six men working at three presses and one man at a half-press. Bowyer's printers averaged 347 impressions an hour on a full press.¹⁵⁰ As noted above, it is possible that Bowyer was involved in the printing of James's dictionary.

Printing errors

Books are not infallible and so I now turn to the question of errors which may have arisen in the dictionary in order to assess the quality of the original script, the typesetters, the printers and the proofreaders. A near contemporary, John Smith, gave a printer's view of errors when he wrote:

It would therefore be generous in gentlemen to examine the circumstances that may have occasioned an error, before they pronounce it a typographical one, for whoever has any ideas of printing, must consequently know that it is impossible to

¹⁴⁹ Philip Gaskell, *A New Introduction to Bibliography* (Oxford: Clarendon Press, 1985), pp. 133-134.

¹⁵⁰ Raven, *Bookscape*, p. 311.

practise that art without committing errors, and that it is the province of an author to rectify them.’¹⁵¹

He also noted that correcting was the most disagreeable work of compositors.¹⁵² These findings fit the comment: ‘There is nothing like an errata sheet to prompt the reader to seek out yet more errata . . .’¹⁵³ Overall, James, like Harris and Chambers, showed careful editing with few misspellings or proofreading errors. An ‘advertisement’ occurs at the end of volume 1 admitting two errors.

Those who have ever been concerned with the mechanical manufactures of books and plates, will not be surprised to find some typographical errors, and inaccuracies of the engravers, though all possible care has been taken to prevent them. But there are some errors of greater moment than those of the press. Thus under the article *Amygdalus*, in a prescription quoted from *Paulus Aeginata* is translated, *Wine and Water*, instead of *Honey and Water*. And under the article BUSSI SPIRITUS BEZOADICUS, in the prescription for this medicine, *three pints of the highest rectified spirit of wine*, which should be added after *Oil of Cedar, or of Juniper, half an ounce*, is entirely omitted.

In researching my personal copy of the dictionary, I found minor spelling errors, for example ‘Acor’ for Alcor, and ‘Strsdor Dentsum’ for Stridor Dentsum, and an occasional alphabetical misplacement, for example ‘Album jus’ coming after ‘Album olus’; ‘Album nigrum’ and ‘Album oculi’; ‘Aluta aegyptia’ between ‘Aegyptium linum’ and ‘Aegyptium andromachis emplastum’; ‘Flores’ occurs after ‘Flos’. An incorrect date of April 29 1769 was found under ‘Animalcula’.

Discrepancies in a few of the catchwords were identified, with more in volume 3 (Table 3.5), suggesting less care in proofreading or less time available.

¹⁵¹ John Smith, *The Printer's Grammar* (London: W. Owen, 1755), p. 222.

¹⁵² Smith, *Ibid.*, p. 279.

¹⁵³ Seth Lerer, ‘Errata: Print Politics and Poetry in Early Modern England’ in, *Reading, Society and Politics in Early Modern England*, ed. by Kevin Sharpe, Steven N. Zwicker (Cambridge: Cambridge University Press, 2003), pp. 41-71 (p. 42).

Table 3.5: Catchword Discrepancies

Volume 1

D2v catchword ‘it’ is followed by ‘up’ in the text on D2r. The text reads . . . that you cannot pinch up with your fingers. It appears the word ‘it’ has been omitted from the text.

Tttt4v catchword ‘parts’ is followed by ‘but’ in the text on Uuuu1r. The sentence does not make sense with ‘parts’ included.

Volume 2

8s catchword missing.

Volume 3

[Y*] 4v catchword ‘sects’ is followed by ‘and’ in the text on [Z*] 1r. ‘sects’ is missing from the text which should read ‘ . . . to prevent duct, insects and the like . . .’

[Uu*]4v the catchword ‘tangement’ is followed by ‘ment’ on [Xx*]1r. The sentence in the text is incomplete: ‘ . . . its small En-ment, and dispersed as water’ should read ‘its small entanglement, and dispersed as water’

[*Ccc]2v the catchword ‘to’ is wrong and should be ‘their’. The text reads ‘ . . . the patients lie with their eyes flaring . . .’ [*Ccc]3r

[** F]4v the catchword ‘sixthly’ is a mistake and should be fifthly [** G]1r

**
* Aaa4v/[†A]1r the catchword ‘X’ should be ‘W’

I found one note about reprinting in the Strahan ledger for 1744-45, recording the recomposition of sheets ‘J’ of the dictionary (£1.1s), with the cost of extraordinary corrections in the said 70 sheets being £2.18. In this research, I have established that the printing of the dictionary involved many printers and pressmen who achieved a uniform standard with few discrepancies or errors.

Change of plan

A copy of James’s original contract has not survived, but there is considerable evidence within the dictionary that the contract may not have been fulfilled. The extension of the publication into a third volume was a major change which must have imposed a considerable burden on the subscribers and the publisher. The *Conditions and Proposals* quite clearly state that the original plan for the dictionary was to be about four hundred sheets in two folio volumes. The booksellers issued a statement on 11 October 1742 in

response to complaints that the first letter ‘A’ ran to so great a length, making the subscribers apprehensive that ‘the whole work may be much more voluminous than was originally proposed’. A footnote added that the whole work would not exceed 500 sheets. Explanations were that much *materia medica* was listed under the first letter, and that ‘Alkali’, ‘Alimenta’, ‘Air’ and ‘Alcohol’ were important generic subjects. The treatise by Hippocrates on regimen in acute diseases is also to be reproduced in full and not ‘dismembered’, while the names of a great many ancient physicians occur under the letter ‘A’. The Greek *alpha* and the Arabic *al* are ‘much used in the composition of medicinal words’. ‘Anti’, ‘Apo’, ‘Dia’, ‘Dys’, ‘Ex’, and ‘Hypo’ could also have been mentioned as frequent prefixes, although it has been noted that clusters of the common Latin prefixes are, in general, balanced throughout the alphabet.¹⁵⁴ Other explanations have been given to account for the predominance of the letter ‘A’ in other dictionaries, including alphabet fatigue,¹⁵⁵ financial or printers’ pressures, changes in editorial policy, and inheritance from previous dictionaries.¹⁵⁶

I examined the number of headwords under the letter ‘A’ and found the proportion is indeed greatest (16.9%) in James compared with Quincy, a modern dictionary and a modern textbook of medicine (Table 3.6). I also surveyed the other common letters (‘C’, ‘P’ and ‘S’) occurring in James, which showed a reduced proportion of later letters ‘P’ and ‘S’.

¹⁵⁴ Noel Osselton, ‘Alphabet Fatigue and Compiling Consistency in Early English Dictionaries’ in, *Words and Dictionaries from the British Isles in Historical Perspective*, ed. by John Considine, Giovanni Iamartino (Newcastle upon Tyne: Cambridge Scholars, 2007), pp. 81-90.

¹⁵⁵ Noel Osselton, p.xii ‘At the dictionary’s letter A, Mr Brandt is young and gay; when he finally arrives at Zed, he’s in his wheelchair, nearly dead.’

¹⁵⁶ *Ibid.*, pp. 81-90.

Table 3.6: Comparison of number of headwords for the letters ‘A’, ‘C’, ‘P’ and ‘S’ in Quincy’s *Lexicon Physico-Medicum*, James’s *A Medicinal Dictionary*, a modern medical dictionary (Mosby) and a modern general medical text (Davidson)

	Quincy 1736	James 1745	Mosby 2013 ¹⁵⁷	Davidson 2010 ¹⁵⁸
No. headwords	3,270	14,330	40,570	6,240 in index
Letter ‘A’ (%)	10.1	16.9	9.8	7.8
Letter ‘C’ (%)	13.3	14.6	12.4	11.7
Letter ‘P’ (%)	11.4	8.6	11.0	9.1
Letter ‘S’ (%)	11.3	9.3	8.6	6.9

The larger percentage of headwords under the letter ‘A’ in James’s dictionary suggests an ambitious start to the dictionary which, together with common finding of a large number under the letter ‘C’, led to the revised plan which extended the dictionary from two to three volumes.

The midpoint in headwords in *A Medicinal Dictionary* is ‘Grus’, the crane. The midpoint in pages (p. 562 in volume 2) is even earlier and contains the word ‘Electrode’, interestingly defined as ‘Amber; an epithet for stools which shine like amber’. These midpoints are earlier than in modern medical dictionaries, for example ‘inguinal’ in Stedman’s *Medical Dictionary* 28th edn (2006), p. 1085, and ‘intrapartum’ in Mosby’s *Dictionary of Medicine, Nursing, and Health Professionals* 8th edn (2009), p. 1996 and in other general dictionaries of the period, which range from ‘Hu’ to ‘Lo’.¹⁵⁹ This finding is consistent with the view that pressure was exerted by Osborne on James to shorten the

¹⁵⁷ Mosby’s *Dictionary of Medicine, Nursing and Health Professions*, 9th edn (St Louis, Mo: Mosby, 2013).

¹⁵⁸ Davidson’s *Principles and Practice of Medicine*, 21st edn (Edinburgh: Churchill Livingstone/Elsevier, 2010).

¹⁵⁹ Osselton, *Alphabet Fatigue*, p. 82. Johnson’s mid-page word was ‘Landmark’.

latter part of the dictionary, both in number of headwords and perhaps in the length and number of the encyclopaedic articles.

I have noted other evidence for this change in plan. The last entry in volume 1 is a lengthy article on 'Calculus', suggesting an unplanned break within the letter 'C', whereas the letter 'M' is complete at the end of Volume 2. Three additional instructions suggest that the original plan was to put some of the illustrations within the text.

- a. Table 1 in volume 1 to be placed before the signature U (which is within the article on 'Acetum')
- b. Plate II at the article 'Acus',¹⁶⁰
- c. Plate III against the fourth page of the signature Kk, article 'Adeps',¹⁶¹

Directions are printed on the last page of the index, immediately before the first Table (XXVII) in volume 3 for the binder to place the plates to 35 inclusive at the end of the first volume, and the rest at the end of the third volume. Volume 1 (1743) was re-issued in the same year with a cancelled title page and a different imprint matching those of volumes 2 and 3, published in 1745. Although a greater number of printers or presses were used for the third volume, this bears few marks of a hurried production. The contents are similar in style to the earlier volumes but with notably fewer biographies.

Sources

The sources for the dictionary have not previously been considered, yet are important in understanding how the book came to be made. The Osbornes were clearly busy publishers and booksellers. It is possible that the first in a series of many trade catalogues issued in 1729 was begun by Thomas Osborne junior. It is not known how many were issued, as many have been lost, but fifty-three were noted in a sale of catalogues 1729-1768 by Thomas Thorpe. These catalogues give some indication of the content of Osborne's

¹⁶⁰ Needle.

¹⁶¹ Fat.

bookshop and the potential resource for James, at a time before public libraries were established. Osborne, however, was not unique in London in issuing catalogues of second-hand books. The Osbornes were also famous for the purchase and sale of libraries from eminent people, an example of Gilbert Walmsley's library being noted in Chapter 2. Another example, *Bibliotheca Bibliothecarum*, was a catalogue of 20,000 volumes from several libraries, including that of Dr Vernon Meade at a time the dictionary was been written.¹⁶² This contained works in anatomy, animals, botany, food, history, chemistry, medicine, *materia medica*, and surgery, and many of these authors are quoted by James. The question of resources for James's project will be explored again when considering the dictionary's illustrations. I have concluded that Osborne's bookshop and store contained resources which may have been used for compiling the dictionary, and for furnishing the originals for the copperplates. This has not been previously been considered.

Bearing in mind other possible sources of reference books, there is no record of James's own book collection or a sale after his death. The first commercial circulating library was opened in the 1740s in London as a development from the ad hoc lending services of London booksellers. The Royal Society's library may have been used, particularly for copies of *Transactions*, though it owed 'as much to the role of books in gentlemanly conversation as to their contribution to utility and innovation'.¹⁶³ The library of the Royal College of Physicians, refounded after the Great Fire of 1666, was efficiently run by Richard Tyson who was Harveian Librarian from 1734-1750, and was open to Fellows and Licentiates on payment of an admission fee of two guineas. Books and manuscripts could

¹⁶² *Bibliotheca Bibliothecarum; or a Catalogue of Several Entire Libraries; Amounting to Twenty Thousand Volumes* (London: T. Osborne, 1741).

¹⁶³ Scott Mandelbrote, 'Professional Collections: Libraries for Scientists and Doctors' in, *The Cambridge History of Libraries in Britain and Ireland*, vol. II, 1640-1850, ed. by Giles Mandelbrote, K. A. Manley (Cambridge: Cambridge University Press, 2006), p. 170.

also be borrowed.¹⁶⁴ As noted above, in consideration of the Dedication, another possible source was Dr Richard Mead's library. The nucleus of his library, formed initially during his grand tour of Italy in 1695, eventually contained over 10,000 books.¹⁶⁵ A special library, about sixty feet long, was built in the garden of his house at 49, Great Ormond Street, and a librarian employed (Figure 3.4). Scholars were encouraged to use this extensive collection of books and manuscripts. It is also possible that Richard Mead was chosen for the dedication of the dictionary because of this extensive collection of medical books.¹⁶⁶

¹⁶⁴ John Symons, 'Scientific and Medical Libraries in the Rise of the Institution' in, *The Cambridge History of Libraries in Britain and Ireland*, vol. II, 1640-1850, ed. by Giles Mandelbrote, K.A. Manley (Cambridge: Cambridge University Press, 2006), p. 389.

¹⁶⁵ This was summarised by Pope: 'Rare manuscripts for Hearne alone, and books for Mead, and butterflies for Sloane.' Alexander Pope, 'Epistle IV Moral Essays' in, *The Works of Alexander Pope*, ed. by G. Croly, vol. II (London: A.J. Valpy, 1835).

¹⁶⁶ William Macmichael, *The Gold-Headed Cane*, pp. 79-80. 'Mead threw open his library and art gallery to the humble student, the unrecognised foreigner, and the poor enquirer, who derived as much pleasure from them as their owner did.' Meade noted that books were allowed to be taken away by deserving students. Richard Meade, *In the Sunshine of Life: a Biography of Dr Richard Meade* (Philadelphia: Dorrance & Company, 1974), p. 88.

Figure 3.4: Interior of Dr Richard Mead's library



From William Macmichael, *The Gold-Headed Cane* (London: J. Murray, 1827)
The motto reads 'not for oneself but for all'. The room eventually became the first ward of the Great Ormond Street Hospital for Children.

Some of the contents of this library were published in a sale catalogue which included nearly 5,500 volumes, 21.6% of which were on medicine or medically related subjects.¹⁶⁷ Similarly, the wide range and depth of the books in the Harley collection, purchased by Osborne, may have been relevant to James, and I have considered this possibility in more detail as an important source when studying the illustrations. A large number of Harleian texts by European and English authors were listed, including: *Natural philosophy* (113 items), *Medicina* (723 items), *Materia Medica* (46 items), *De Alchymie and Chemistry* (48

¹⁶⁷ Samuel Baker, *Bibliotheca Meadiana* (London: 1754-1755). 6,827 items were sold for £5,496.15.0. Kenneth F. Russell, 'The Anatomical Library of Dr Richard Mead (1673-1754)', *Journal of the History of Medicine and Allied Sciences*, 2 (1947), 97-109.

items), *Pharmacopoeiae* and *Dispensatories* (31 items), *Anatomy* (67 items), *Surgery* (27 items), *Obstetrics* (21 items), *Natural History* (243 items), *Medical Waters* (36 items) and *Lapidibus and Metals* (133 items).

The illustrations

Having considered the conditions that helped produce the dictionary, I will now move to some detail of the creation of the illustrations. The wider importance of the illustrations will be considered in Chapter 4. At the end of volumes 1 and 3 there are sixty-three black and white, engraved plates ('Tables'), seven single folio page size, and twenty-nine folded, double folio page size. The contents of the plates, and many sources used for the figures, are listed in 'Explications' in the pages before the illustrations (11 pages of explication in both volume 1 and 3). Cross-referencing to the relevant headword in the dictionary is not used within the 'Explications'. The use of copperplates, requiring a different printing technique, meant it was not possible to place the illustrations within the text for greatest impact, and to encourage word-image interaction. Hence the importance in having descriptions of the figures contained within the text.¹⁶⁸ Under 'Fascia', James admits it is extremely difficult to form an idea of bandages without seeing them made.¹⁶⁹

¹⁶⁸ Ludmilla Jordanova, *The Look of the Past* (Cambridge: Cambridge University Press, 2012), p. 19.

¹⁶⁹ Fascia is defined by James 'as in surgery, a fillet, roller or bandage'.

Figure 3.5: 'Table' 58 from *A Medicinal Dictionary* illustrating different bandaging techniques



My analysis has found that the majority of the copperplates were engraved for *A Medicinal Dictionary* rather than obtained second-hand.¹⁷⁰ Most of the illustrations are copies from existing texts, the exceptions being the microscope findings and ‘tables’ of medical symbols and of weights and measures. The publications of at least thirty individual authors and the *Philosophical Transactions* and *Memoirs of the Royal Academy of Sciences* are acknowledged by James as primary sources for the illustrations, with a heavy reliance on two authors, Joannis Mariae Lancisi and Lorenz Heister.¹⁷¹ Also acknowledged are Michel Brisseau (eyes), Guichard Du Verney (ears), Reinier de Graafe (uterus), William Cheselden (genital tract), Francis Glisson (liver) and Antonie Leewenhoek (microscopy). Of the five book catalogues issued by Osborne, before and around the time the dictionary was being compiled, I found a small number of relevant medical books that may have been available for the illustrations in *A Catalogue of Several Valuable Libraries* (London: T. Osborne, 1738), in *Bibliotheca Rousettiana* (London: T. Osborne, 1740) and in *A Catalogue of a Choice and Valuable Collection of Books* (London: T. Osborne, 1741). I found a greater number of books in two other catalogues: *Bibliotheca Bibliothecarum* (London: T. Osborne, 1741)¹⁷² and *Catalogus Bibliothecae Harleianae* (London: T. Osborne, 1743).¹⁷³ These last two catalogues contained 63% of the sources quoted for the plates (Table 3.7), thus confirming that the substantial contents of Osborne’s shop would have been a relevant resource for the making of these illustrations.

¹⁷⁰ The new plates commissioned by William Cheselden, and engraved by Ger Vandergucht and Jacob Schijnvoet, might have been available to Osborne and James, but this does not appear to have happened.

¹⁷¹ Lancisi (1654-1720) was an Italian physician, epidemiologist and anatomist. Heister (1683-1758) was an anatomist, surgeon, and botanist of German origin working in Amsterdam.

¹⁷² *Bibliotheca Bibliothecarum; or a Catalogue of Several Entire Libraries; Amounting to Twenty Thousand Volumes* (London: T. Osborne, 1741).

¹⁷³ *Catalogus Bibliothecae Harleianae, in Locos Communes Distributes cum Indice Auctoru*, 5 vols (London: T. Osborne, 1743-1745).

Table 3.7: Osborne's book catalogues, 1738-1743

These catalogues contained books that are referred to by James for the illustrations in *A Medicinal Dictionary*[number of publications used by James]

1. *A Catalogue of Several Valuable Libraries* (London: T. Osborne, 1738). [2 books and copies of *Philosophical Transactions*]
2. *Bibliotheca Rousettiana* (London: T. Osborne, 1740). [2 books]
3. *Bibliotheca Bibliothecarum* (London: T. Osborne, 1741). [26 books]
4. *A Catalogue of a Choice and Valuable Collection of Books* (London: Osborne, 1742). [7 books]
5. *Catalogus Bibliothecae Harleianae* (London: Osborne, 1743). [21 books and copies of *Philosophical Transactions*]

Those plates that are signed give the names of Isaac Basire (1704-1768), George Bickham senior (1684-1758), George Bickham junior (1706-1771), R (possibly Remigius) and Parr (b.1723, flourished 1736-51) and their contributions are shown in Table 3.8.¹⁷⁴ A single engraver's name does not reveal any assistants who may have contributed.

Table 3.8: Signed plates in *A Medicinal Dictionary*

Engraver	'Table' number in the dictionary
Basire:	1, 4-5, 6/7, 8, 9, 12-13, 14-15, 18-19, 24-25, 40-41
Bickham:	2, 3
Bickham junior:	10, 11, 20-21, 22-23
Parr:	26-27, 32-33, 36-37, 38-39, 42-43, 44-45, 46-47, 48-49, 50-51
Not attributed:	16 (double plate), 17 (double plate), 28-29, 30-31, 34-35, 52-53, 54-55, 56-57, 58-59, 60-61, 62-63

The tradition of engraving was developed by migrants to London in the eighteenth century. Isaac Basire, for example, was the son of Jacques or James Basire, a Huguenot and native of Rouen. *George Vertue* listed fifty-five names of engravers in London in 1744.¹⁷⁵ The active picture engraving industry in the eighteenth century covered a very wide range of work from fine art, book illustrations, engraved texts, maps and music, to

¹⁷⁴ George Vertue, *Note Books vol VI, The Volume of the Walpole Society*, 30 (1951-52), 96-204 (p. 197).

¹⁷⁵ M. Harris, 'Scratching the Surface; Engravers, Printsellers and the London Book Trade in the mid-18th Century' in *The Book Trade* eds Arnold Hunt, Giles Mandelbrote (Winchester: A Shell. St Paul's Bibliographies, 1997), p. 98; George Vertue, *Note Books*, vol. VI, *The Volume of the Walpole Society*, 30 (1951-52), 96-204 (p.197).

trade cards, wrappers and labels, so that working for the book trade was but one of the sources of employment for engravers. Engravers were mobile and tended to work in a free market. A hierarchy of skills and personnel existed with continental immigrants, mainly from France and Holland, at the upper level, and native engravers at the lower level, providing ornaments, head-and-tailpieces, wrappers and labels.¹⁷⁶ The picture trade included famous artists such as William Hogarth (1697-1764), a contemporary of James, William Blake (1757-1827), apprenticed in 1772 to James Basire (son of Isaac Basire), John Rocque, a surveyor, and George Bickham senior and junior, who were writing masters. George Bickham junior had a colourful career, including producing political satires, a pirated edition of Pope's *Essay on Man*, and a prosecution in 1740 for publishing pornography.¹⁷⁷ My study has shown that Osborne commissioned the plates from an upper level of engravers, including Basire and the Bickhams Isaac Basire was the first in a family of engravers and was principally a cartographer, being noted for the frontispiece to an edition of Bailey's dictionary (1755).¹⁷⁸ It is not clear if George Bickham senior, known for publishing a highly regarded book on calligraphy, *The Universal Penman* (1750), or his son, George Bickham junior, or both father and son were involved in James's dictionary. George Bickham junior may also have printed the engravings as a press was found when his premises were searched during legal proceedings in the mid 1740's.¹⁷⁹ Parr was not noted for his artistic skills, but left some historically important engravings of London buildings.

¹⁷⁶ Harris, *Scratching the Surface*, p. 96.

¹⁷⁷ *Ibid.*, p. 106.

¹⁷⁸ His son, grandson and great-grandson were all named James and became noted engravers. William Blake was apprenticed to the second James Basire (b. 1730).

¹⁷⁹ Harris, *Scratching the Surface*, p. 100.

I was unable to determine when the engravings were made, nor when the illustrations were issued within the printing schedule. Within the letter 'F', I examined 'Fistula' which had references to 'Tables' 22, 24, 26, 28, 37, 39, 45; 'Fontanella'¹⁸⁰ to 'Tables' 23, 24, 33, 36; and 'Fractura' to 'Tables' 23, 28, 29, 30. These detailed entries suggest the plates were at least prepared, if not printed, before or whilst this text was being written. My research suggests that the first engravings were made by Basire and Bickham senior, who were then joined by Bickham junior (Table 3.5). Basire continued until 'Table' numbers 24-25, and then was followed by Parr who engraved all but one of the signed illustrations in volume 3. 'Tables' 60-61 and 62-63, containing script for weights and measures, were probably engraved by Bickham junior. The possible primary sources for the illustrations have already been considered and James, himself, contributed to the engravings.¹⁸¹ Drawings by James of some microscopic findings contain thirty-three items labelled A to Z, which relate to the entry 'Acetum'. These illustrate James's home experiments using a microscope.¹⁸² James's hypothesis is that these microscopic particles might be responsible for an acid taste. Forty-six items relating to the entry 'Vinum' consist of the 'saline particles' found by Leeuwenhoek in Holland in a number of different wines.

The illustrations will have increased the cost of the dictionary. The cost of the plates and the engraving and printing may have equalled all other production costs for the rest of

¹⁸⁰ James described 'Fontanella' as 'Small ulcers made by surgeons in various parts of the body, either for the preservation of the present, or the recovery of lost health . . .'

¹⁸¹ As did William Cheselden in his publication *Osteographia*. Geoffrey Lapage, *Art and the Scientist* (Bristol: J. Wright & Sons, 1961), pp. 8-28.

¹⁸² A-F are 'corpuscles' and crystals forming after about three months in James's annual barrel of wine vinegar. G-O are microscopic particles forming in vinegar left to stand for about eight weeks in James's parlour, consisting of saline particles with cavities and two eel-like creatures. P-Z are microscopic particles forming in wine vinegar which had been treated with crabs'-eyes to remove acidity. S-Z are microscopic particles found in Vin de Damoiselle from Orléans. Some are referred to again by James under 'Vinum'.

the book.¹⁸³ For example, copper folio plates for map-making in the eighteenth century cost between £2 and £3 each.¹⁸⁴ An example, at the time that James was writing his dictionary, was the richly illustrated sixth edition of *Pamela* by Samuel Richardson containing twenty-nine plates. The poor sales may have been due to the price of the book doubling from 12 to 24 shillings.¹⁸⁵

Translations

Although James was a competent linguist, it is uncertain how much translation was done by assistants. Comments within the dictionary, however, show that James was intimately involved in the translation process. His linguistic ability is evident in all entries, especially where the translation was questioned and corrections shown; a few examples follow:

Figure 3.6: 'Bdella' meaning horse leech

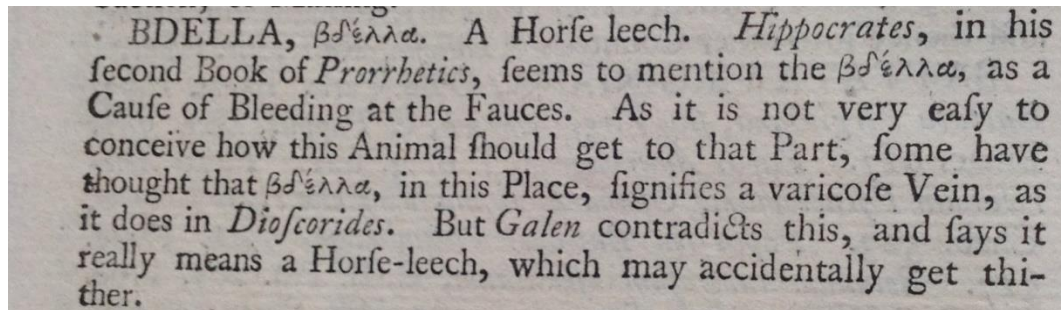
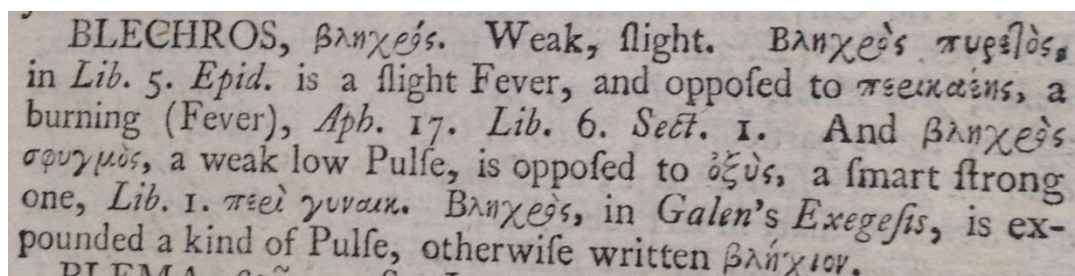


Figure 3.7: 'Blechros' meaning weak, slight



¹⁸³ Philip Gaskell, *A New Introduction to Bibliography* (Oxford: Clarendon Press, 1985), p. 154.

¹⁸⁴ Mary S. Pedley, *The Commerce of Cartography* (Chicago: University of Chicago Press, 2005), p. 44.

¹⁸⁵ Leigh G. Dillard, 'Drawing Outside the Book: Parallel Illustration and the Creation of a Visual Culture' in *Book Illustration in the Long Eighteenth Century*, ed. by Christina Ionescu (Newcastle upon Tyne: Cambridge Scholars Publishing, 2011), p. 236.

Figure 3.8: 'Bolbos' meaning the name of a herb or the juice of the Bulbus

BOLBOS, βολβός. *Erotian*, in *Hippocrates*, says, βολβόν βολάνης ὄνομα, “Bolbos is the Name of an Herb;” but, for βολβόν, perhaps we should read βόλβιον; tho’, in *Lib. 7. Epid.* we meet with βολβῶ χυλός, “the Juice of the Bulbus.” See BULBUS.

Figure 3.9: 'Deleterion' meaning to injure

DELETĒRION, δηλητήριον, from δηλέω, to injure. I don't know, that the *Greeks* use this Word as an Epithet to any thing, except φάρμακον, having never met with it in any Gender, but the Neuter. It imports pernicious, injurious, or poisonous. *Galen* defines deleterious Medicines such as agree with no one, either in Sicknes, or in Health.

Figure 3.10: 'Diabin' a 'barbarous and corrupt word'

DIABIN, διάβιν, a barbarous and corrupt Word in *Myrepsus*, *Antidot.* 37. and *Pastil.* 48. which *Fuchsius*, by the Help of *Aëturius*, amends, by reading διαῖων, “of Violets.” The *Latin* Copies of *Myrepsus*, he observes, render it *Diauf*.

Figure 3.11: 'Diaphthora' meaning to corrupt

DÍAPHTHORA, διαφθορά, from φθείρω, to corrupt; in *Hippocrates* signifies a Corruption of the Fœtus, an Abortion. The same is often expressed by φθορά, and, in the Beginning of the sixth Epidemic, by ἀποφθορά, which *Galen* expounds by διαφθορά and ἀμβλωσις, “Abortion.” The Verbs διαφθείρω, and φθείρω, are often us'd in the same Sense.

Under 'Actualis' James includes a typical personal comment: 'The Reader that does not understand Latin, will not suffer much, because I do not translate it, for it is equally nonsense in English and in Latin.' Again, under 'Alphabeticum Chymicum', James writes:

Raymond Lully has presented the world with a Chymical Alphabet, but to what end, and with what design, will be a difficult matter to discover, especially till it can be understood; and till then I shall beg leave to give it in his own words, it being very difficult to translate what one cannot comprehend.

Figures 3.6 to 3.11 also illustrate the use of the capital letter which I will note in Chapter 4.

Literary Resources

It has not been possible to determine James's methods of writing and for achieving such a major work in a relatively short time. Considerable literary sources would have been required. Original compositions and extensive copying of printed texts for the encyclopaedic entries are both evident in the dictionary. James himself wrote that 'The authors of other medical reference works have succeeded so well, that often nothing can be added to the accuracy of their expositions; and such passages we have carefully translated.' Compiling a list of headwords would have been an early task, but James does not indicate the use of previous medical dictionaries for this task. In an attempt to determine the primary source for a word list in *A Medicinal Dictionary*, I have analysed certain scientific terms from works published as near as possible to 1743. This method was limited because some entries in other dictionaries were not always directly comparable, particularly when James used a classical form. Additionally, the appearance of the same word in two or more dictionaries does not necessarily mean it was taken from the earlier for inclusion in the later compilation. Both could be dependent on an earlier common source.

I examined the headwords under the letter 'F' near the middle of the alphabet (study 1), and the beginning of 'D', 'H' and 'T' as representative letters throughout the alphabet (study 2). I compared James's entries with those in two medical, one technical and one

general dictionary, and one encyclopaedia, all published before *A Medicinal Dictionary*.¹⁸⁶

The results of my study 1 are shown in Table 3.9 and in Appendix 2.

Table 3.9: Headwords under the letter ‘F’ in four dictionaries and an encyclopaedia in comparison to James’s 298 headwords

Author	Number (%) of headwords similar to James	Headwords additional to Blankaart included by James (n)
Blankaart (1726)	112 (37.6)	
Quincy (1736)	53 (17.8)	9
Harris (1736)	65 (21.8)	10
Bailey (1736)	113 (37.9)	27
Chambers (1741)	71 (23.8)	18

These results indicate that Blankaart and Bailey were likely to have been primary sources.

The headwords used by James that were additional to Blankaart were terms belonging to chemistry (32), plants (26), medical (25), animals (15), food and drink (11) and some miscellaneous (10). This illustrated the need to identify additional sources that James uses for compiling headwords, particularly in chemistry and botany.

Firstly, in his use of chemistry terms, James refers to Rulandus, Castellus, William Johnson (1610-1665) and Boerhaave. The text of Bartholomeo Castelli’s *Lexicon Medicum Graeco-Latinum* (first published 1607 and remaining in print until at least 1762) was available for analysis in an edition published by Georgio Valentini and Francisco Bolzetti in Venice in 1626. This appears to be the least important of the reference texts with twenty-seven (9.1%) headwords similar to James, and only two being unique to Castellus. On the other hand, Martin Ruland the younger (1569-1602) (*A Lexicon of Alchemy*, Frankfurt: 1612), contained fifty-four of James’s entries (18.1%) and 13 of these were unique to Ruland. Gulielmum Johnsonum, *Lexicon Chymicum* (London: G. Nealand, 1660) contained half the chemistry terms (ie, thirty-two headwords, constituting 10.7% of

¹⁸⁶ Blankaart (1726), Quincy (1736), Harris (1736), Bailey (1736) and Chambers (1741).

James's letter 'F'), but no unique entries. Herman Boerhaave, *A New Method of Chemistry*, translated by P. Shaw, and E. Chambers (London: J. Osborne, T. Longman, 1727) would not have been useful for compiling headwords but was a potential source of definition of objects and descriptions of processes. My study suggests that Martin Ruland, despite the date of publication, together with William Johnson, were used by James as primary sources of chemical terms. Secondly, in his botanical entries James refers to Miller, Ray, Dale, Boerhaave and Tournefort in approximately twenty-six headwords. *Tournefort's History of Plants*, trans. by John Martyn (London: C. Rivington, 1732) was the most commonly used with sixteen headwords similar to James's, four of which were not found in the other dictionaries.

In this limited study, I conclude that James relied on Blankaart and Bailey as primary sources of headwords but wider resources were required for chemistry terms from Martin Ruland and William Johnson. Similarly, botanical headwords were obtained from a variety of sources but particularly from Tournefort. This demonstrates a strong influence of continental European authors and the basic impact of Blankaart's important medical dictionary.

The result of my study 2 are shown in Table 3.10. 150 headwords in James's dictionary in each of the bands 'D-Deon', 'H-Hemionis' and 'T-Testiculus' were compared with other dictionaries. Again, the edition of the dictionary closest to 1743 has been selected, but for Harris and for Chambers I included an additional search of their first editions, although this did not alter the results. This showed that Blankaart was the most common publication used by James. Bailey was second to Blankaart for use of identical 'D' words (22.8% vs 35.6%) and for identical 'H' words (23.3% vs 39.3%), but somewhat greater for

identical ‘T’ words (34% vs 30%). As might be expected, James took more than half of the headwords contained in Blankaart’s and Quincy’s dictionaries.

Table 3.10: 450 headwords (150 each from letters ‘D’, ‘H’ and ‘T’) in *A Medicinal Dictionary*, compared with nine other publications

(a) 150 Headwords D-Deon in James’s Dictionary

Author (date)	Headwords*	Headwords common to James		
	No.	No.	(% of James)	[% of author]
¹⁸⁷ Harris (1704)	110	20	(13.4)	[18.2]
¹⁸⁸ Blankaart (1726)	77	53	(35.6)	[68.8]
¹⁸⁹ Quincy (1726)	41	27	(18.1)	[65.8]
¹⁹⁰ Chambers (1728)	117	28	(18.8)	[23.9]
¹⁹¹ Coles (1732)	401	18	(12.1)	[4.5]
¹⁹² Bailey (1736)	495	34	(22.8)	[6.9]
Harris (1736)	156	30	(20.1)	[19.2]
¹⁹³ Dyche (1740)	295	16	(10.7)	[5.4]
Chambers (1741)	219	26	(17.4)	[11.9]

(b) 150 Headwords H-Hemionis in James’s Dictionary

Author (date)	Headwords*	Headwords common to James		
	No.	No.	(% of James)	[% of author]
Harris (1704)	59	13	(8.7)	[22]
Blankaart (1726)	89	59	(39.3)	[66.3]
Quincy (1726)	36	21	(14)	[58.3]
Chambers (1728)	190	10	(6.7)	[5.3]
Coles (1732)	383	11	(7.3)	[2.9]
Bailey (1736)	563	35	(23.3)	[6.2]

¹⁸⁷ John Harris, *Lexicon Technicum* 1st edn, 1704-10; 5th edn (London: Walthoe, Knapton, Midwinter, Bettesworth et al., 1736).

¹⁸⁸ Stephen Blankaart, *Lexicon Medicum Graeco-Latinum* 7th edn (London: B. Sprint & E. Symon, 1726).

¹⁸⁹ John Quincy, *Lexicon Physico-Medicum* 3rd edn (London: J. Osborne, T. Longman, 1726).

¹⁹⁰ Ephraim Chambers, *Cyclopaedia; or An Universal Dictionary of Arts and Sciences*. 1st edn (London: James & John Knapton, J. Senex et al., 1728); ?4th edn (London: D. Midwinter, J. Senex, R. Gosling, W. Innys, C. Rivington et al., 1741).

¹⁹¹ Elisha Coles, *An English Dictionary*, corrected by B. Johnson (London: J. Walthoe, R. Wilkin, J. Bonwicke, S. Birt, T. Ward, E. Wicksteed, 1732).

¹⁹² Nathan Bailey, *Dictionarium Britannicum* 2nd edn (London: T. Cox, 1736).

¹⁹³ Thomas Dyche (and William Pardon), *A New General English Dictionary*, 3rd edn (London: R. Ware, 1740).

Harris (1736)	113	16	(10.7)	[14.1]
Dyche (1740)	332	3	(2)	[0.9]
Chambers (1741)	195	10	(6.7)	[5.1]

(c) 150 Headwords T-Testiculus in James's Dictionary

Author (date)	Headwords*	Headwords common to James		
	No.	No.	(% of James)	[% of author]
Harris (1704-10)	84	17	(11.3)	[20.2]
Blankaart (1726)	70	45	(30.0)	[64.2]
Quincy (1726)	50	22	(14.7)	[46.0]
Chambers (1728)	176	31	(20.7)	[17.6]
Coles (1732)	285	20	(13.3)	[7.0]
Bailey (1736)	448	51	(34.0)	[11.4]
Harris (1736)	102	23	(15.3)	[22.5]
Dyche (1740)	205	16	(10.7)	[7.8]
Chambers (1741)	214	32	(21.3)	[15.0]

*Identical headwords with several meanings, or headwords with several derivatives with the same meaning, have been counted as a single entry. A few identical headwords had different spellings.

My results in study 2 show that Blankaart was indeed an important source (contributing about 35% of James's entries) and that Quincy (16%), Harris (11%-15%) and Chambers (15%) sharing fewer entries. The interesting finding, confirming my study 1, was the use of Bailey's dictionary, which was similar to Blankaart's, suggesting that Bailey also relied on Blankaart. It may have been simpler for James to use Blankaart as a primary copy-text, as Bailey's general dictionary had very many more entries that were not relevant for a medical dictionary. However, James appears to have supplemented his list of headwords from Bailey, as my study of the letter 'F' shows more words would have been contributed from Bailey compared with Quincy, Harris and Chambers. Blankaart, with Bailey's additions, would have accounted for 50% of James's headwords. Various reasons explain why some of Blankaart's entries were not used by James, including a synonym elsewhere,

different spellings, and some terms not relevant to medicine. I conclude that James used several sources (not all have been identified) to compile a list of headwords and my studies also confirm that the number of headwords is considerably greater in James's dictionary compared with those of both Blankaart and Quincy.

Word definitions

I now turn to the sources for word definitions, detailed examples of which are given in Appendix 4. Johnson, although using Bailey for interleaving, did not automatically use Bailey's definitions; for example, only 5% of Johnson's entries under the letter 'L' owe a recognisable debt to Bailey.¹⁹⁴ Unlike Johnson, as I have already indicated, no marked-up books used by James as source material have survived. The larger, encyclopaedic entries were taken by James from established texts, an example being given in the entry 'Auris' discussed in Chapter 4. I investigated the possibility that James used entries from other dictionaries for his definitions and explanations by two methods. Firstly, I took two words each from D-Deon ('Decortatio'/'Decortication' and 'Dentificium'/'Dentifrice'), H-Hemionis ('Hectica (febris)' and 'Hemicrania') and T-Testiculus ('Tabes Dosalis' and 'Tenesmus') and compared them. I chose these words for their varying complexity and the fact that they are comparable in the majority of the dictionaries. The text used by James appears to be unique for these words, and both Harris and Chambers rely on Blankaart to some extent. Secondly, I undertook a more detailed analysis of the letter 'F'.

Approximately half the headwords under this letter are simple one-line or two-line descriptions, sometimes giving the origin of the definition or word, for example:

'Fach': the name of a Turkish medicine celebrated for its efficacy against poisons

¹⁹⁴ David McCracken, 'The Drudgery of Defining: Johnson's Debt to Bailey's *Dictionarium Britannicum*' in, *Ashgate Critical Essays on Early English Lexicographers*, Vol. V, *The Eighteenth Century*, ed. by Anne McDermott (Farnham: Ashgate, 2012), pp. 73-76.

‘Fronto’: from Frons, is one who has a large and ample forehead (Castellus)

Detailed medical essays of varied length are included for prognostics from the face, ‘Fascia’ (bandages), ‘Fibra’, ‘Fistula’, ‘Fluor Albus’, ‘Fontanella’, ‘Fractura’, ‘Fungus’ (arising in wounds and ulcers) and ‘Furunculus’. I compared the definitions of eight individual headwords in different subject categories in James’s dictionary with comparable entries in Blankaart, Quincy, Harris, Bailey and Chambers, in order to assess plagiarism and the individuality of the different authors. With the exception of ‘Facultas’, James’s definitions of ‘Faeces’, ‘Faecula’ (Fecula), ‘Fasciculus’, ‘Flores’, ‘Fossa’, ‘Fugile’ and ‘Furor’ are distinctive, using different texts for these entries and showing no particular reliance on previous dictionaries. James includes more references than the other authors. Bailey copied Blankaart (‘Flores’ and ‘Fossa’) and Harris (‘Fossa’). Chambers copied Blankaart (‘Fossa’) and Harris (‘Flores’). James’s definition of ‘Fasciculus’ is different.¹⁹⁵

I conclude that James was not simply copying the definitions from other dictionaries but was largely composing his own definitions. The definitions are clear and of comparable clarity to those admired in Johnson’s dictionary.

The only personal comment made by James on his sources, that I could find, occurs at the end of the preface to *A Medicinal Dictionary*. ‘Dr Rieger, if I am well informed, was employed by the late Czar, Peter the Great; and after his death retiring from Russia into Holland, he lived in a bookseller’s house where he had the use of the best collection of medicinal authors that was ever exposed to sale in Europe; an advantage which I never had the satisfaction of enjoying.’¹⁹⁶ It may be true that James did not live in Osborne’s house

¹⁹⁵ Fasciculus now means a slender bundle of nerve or muscle fibres.

¹⁹⁶ Preface to *A Medicinal Dictionary*, p. 99.

but it is difficult to believe James did not have access to books in the shop and perhaps space in which to work. At the end of the preface James writes:

After a few numbers of the *Medicinal Dictionary* were published, I observed in the foreign papers the following title of a book, which was advertised to be published sometime after. *Introductio in Notitiam Rerum Naturalium etc Arte factarum, quarum in communi Vita, sed praecipue in Medicina Usus est. Per Alphabeti Ordinem digessit.* Jannes Christophorus Rieger, Hagae Comitum 1742. I found means to get this book, as soon as it was published; and as it is a most excellent performance, I thought myself obliged to insert in the *Medicinal Dictionary* whatever I had omitted in my collections; and to cancel what I had wrote upon several articles, in order to make room for better materials, which I frequently found in this work.¹⁹⁷

What effect this had on Osborne and the printers is not recorded. The speed of production of the dictionary suggests that this was an isolated episode, and I have found no other examples of changes in text. No references to Rieger occur in Volume 1 of the dictionary, nineteen in Volume 2 and none in Volume 3.

Conclusions

In conclusion, my study on the making of *A Medicinal Dictionary* shows how a single material object sheds light on a part of the extensive publishing and printing worlds of London in the mid-eighteenth century. This chapter pieces together how the dictionary came to be created. The biography of the object has been undertaken in terms of both general and specific features.¹⁹⁸ It also illustrates the power of the publishing bookseller in the eighteenth century with the commission of works where the author is effectively an employee. The production of a large medical dictionary required talent, confidence and considerable literary, financial and printing resources, borne largely by one publisher, namely Thomas Osborne. No records exist to answer the question of who initiated the

¹⁹⁷ Preface, p. 99.

¹⁹⁸ Karin Dannehl, 'Object Biographies: From Production to Consumption' in, *History and Material Culture*, 2nd edn, ed. by Karen Harvey (New York: Routledge, 2018), pp. 171-186.

project, or why, but the selection of James by Osborne was likely to have been through Johnson, and Johnson himself made significant contributions in the initial stages of the dictionary. Likewise, Johnson would have witnessed at firsthand the problems and the drudgery involved in the making of a dictionary. Whereas the primary motivation for James may have been the need to earn and become established soon after arriving in London, it is uncertain whether James or Osborne benefited financially to any great extent from the venture. Osborne was a notable publisher and bookseller but was not respected by everyone. To a certain extent his achievements have been underestimated. Like James, Osborne was willing to take risks and invest his assets in experimental ventures.

Evidence on the compilation of other medical dictionaries is limited, so my review on the way in which James's encyclopaedic dictionary was initiated, compiled and printed is revealing of this genre more broadly. Osborne obviously planned a prestigious publication and had the financial resources required, including the provision of assistants. However, planning was not perfect, with the extension into three volumes and a failure to keep the proposal on length with excess entries under the letter 'A'. There is a partial use of subtitles or subarticles, though the botanical entries are well structured. The commissioning of numerous engraved copperplates is a very special feature of the dictionary, especially as Harris's *Lexicon* and Chambers's *Cyclopaedia* made rather limited use of illustrations. My study shows for the first time that Osborne's bookshop and warehouse would have been an important source of printed texts and illustrations for James's dictionary. The connection with Richard Mead and his library may well have provided another useful resource.

As was usual practice, previous dictionaries were base texts, and my study shows that James relied mostly on Blankaart and Bailey, but also on Harris, Quincy and Chambers for the headwords and a very wide variety of authors was copied for the encyclopaedic entries. Word definitions in *A Medicinal Dictionary* were distinctive, contributing original definitions and showing James's skill in French, Latin and Greek. He was adept in selecting a word list, was widely read in medical literature, and was able to organise data remarkably consistently over four years. The production team worked hard to produce the dictionary within this time with few errors and coped with the expansion from two to three volumes. Furthermore, several printing presses were used and evidence has been found for the use of at least two printers, Samuel Richardson and William Strahan. The production method and timescale gave limited opportunities for revision, cross-referencing and corrections of the text, but the dictionary is remarkably consistent and free of errors.

In hindsight, Robert James may be considered to have been irresponsibly optimistic in agreeing to the original plan for two volumes and the publisher and his advisors may have been initially ignorant of what was involved in the production of such a large encyclopaedic dictionary. Osborne, however, did not show any financial constraints, and, despite considerable production costs and indifferent sales of the dictionary, continued to be a successful and generally respected publisher in a very competitive market. As noted above, Osborne's reputation is largely, and perhaps unfairly, based on his personality and on his reputation as an ignorant trader in second-hand books. An enhanced reputation is warranted, based on his publication record, including *A Medicinal Dictionary*. Osborne's experience may have influenced the subsequent choice of a group of publishers for

Johnson's dictionary and Johnson himself will have learned many of the potential difficulties involved in the writing of a dictionary.

My study of the making of James's dictionary has put the material object at the centre of the analysis and has traced its biography. The complex social relationships around the object and with the author, Samuel Johnson, Thomas Osborne, the engravers and the printers have been described. Furthermore, my study of the making of the dictionary has illustrated the power of the publishing industry in London, including connections overseas in the mid-eighteenth century. In addition to the key people involved in the production of the dictionary, I have stressed the underlying importance of book collectors, private libraries and the sale of books, all of which contributed the necessary financial and literary resources for the dictionary. Whether the cost and the labour involved in producing the dictionary was warranted and how the dictionary contributed to the Enlightenment will be considered in the next chapter.

Chapter 4. An Enlightenment Dictionary

A Medicinal Dictionary has generated many opinions and reviews, but no scholar has assessed it in the context of the Enlightenment. This chapter will consider to what extent James's dictionary was influenced by the Enlightenment, and whether it can be judged to have made a contribution to the Enlightenment and to a medical enlightenment. In so doing, I will also assess the use of the dictionary, and whether it had any effect on Johnson's *A Dictionary of the English Language* (1755). After considering its place in the Enlightenment in general, I will then explore the idea of a medical enlightenment, how medical knowledge was disseminated, assess previous critiques of the dictionary, the use of the vernacular and the influence of the dictionary. The categories, contents and style of the dictionary will be looked at in order to consider Enlightenment features in ways that have been described for language dictionaries.¹ I have chosen specific elements of the dictionary, namely the preface, the encyclopaedic entries, the illustrations, the style of writing, the inclusion of contemporary knowledge and the approach to magic, superstition, alchemy and astrology for this more detailed analysis.

The Enlightenment may be viewed in many different ways, as it has more than one set of ideas. Overall, it was a reforming movement.² The traditional view has been that the philosophy of the Enlightenment in eighteenth-century Europe promoted freedom, democracy and reason as primary values of society, with the belief that rational thought,

¹ Carey McIntosh, 'Eighteenth-Century English Dictionaries and the Enlightenment' in, *The Yearbook of English Studies*, vol. XXVIII, *Eighteenth-Century Lexis and Lexicography* (1998), pp. 3-18, (p. 4). 'Eighteenth-Century English Dictionaries and the Enlightenment' in, *Ashgate Critical Essays on Early English Lexicographers*, vol. V, *The Eighteenth Century* (Farnham: Ashgate, 2012), pp. 4-8.

² Dorinda Outram, *The Enlightenment*, 2nd edn (Cambridge: Cambridge University Press, 2005). Ronald S. Love, *The Enlightenment* (Westport: Greenwood Press, 2008). That the Enlightenment created our modern democracies, however, has been challenged. Annelien De Dijn, 'The Politics of Enlightenment: from Peter Gray to Jonathan Israel', *The Historical Journal*, 55 (2012), 785-805.

rather than absolute monarchy or religion, led to human improvement. The Enlightenment developed a nature-centred view of the universe, rather than a God-centred view. This led to beliefs that enlightenment contained a general capacity for self-improvement and progress in society which would be assisted by science and technology.³ In comparison with other countries, Enlightenment in England was less concerned with philosophy and more with science.⁴ I will also reflect on whether a medical enlightenment is a valid concept.

Enlightenment affected many aspects of life, and Porter, in his wide sweeping review of the many changes in society associated with the Enlightenment, acknowledged that enlightened thinking in medicine shifted to temporal well-being.⁵ Astrology and various aspects of magical medicine (see below) were discredited, and it was expected that medicine would be improved through discoveries in anatomy, chemistry, physics and botany.⁶ Overall it has been described as ‘a ferment of knowledge’ and something to which James’s dictionary may be considered as having made a significant contribution.⁷ In posing the question of whether there was a medical enlightenment in eighteenth-century England, Porter noted that medicine became more rational, empirical and experimental. Anatomy and surgery were advancing and may be considered to have been enlightened. On the other

³ Guenter B. Risse, ‘Medicine in the Age of Enlightenment’ in, *Medicine in Society*, ed. by Andrew Wear (Cambridge: Cambridge University Press, 1992), pp. 149-195 (p. 149). Anthony Pagden, *The Enlightenment* (Oxford: Oxford University Press, 2013), preface and p. 162.

⁴ Led by Francis Bacon (1561-1626), Isaac Newton (1643-1727) and John Locke (1632-1704) and developed by Robert Boyle (1627-1691), David Hume (1711-1776), Adam Smith (1723-1790) and others. John Cannon, ‘Johnson and the Enlightenment’ in, *Samuel Johnson and the Politics of Hanoverian England* <DOI:10.1093/acprof:oso/9780198204527.003.0007>, [accessed 6 March 2019]. Summarised by Alexander Pope (1727) ‘Nature and Nature’s Laws lay hid in night, God said, Let Newton be! And all was light.’ This epitaph was intended for Sir Isaac Newton.

⁵ Medical men and health issues commanded heightened public attention. Roy Porter, *Bodies Politic* (London: Reaktion, 2001), p. 31.

⁶ Roy Porter, *Enlightenment* (London: Penguin Press, 2000), pp. 130-155.

⁷ George S. Rousseau, *Enlightenment Borders* (Manchester: Manchester University Press, 1991).

hand, medical diseases were waiting for the more enlightened era of pathology which was ushered in by a contemporary, Giovanni Morgagni (1682-1771).⁸ There was a greater sensitivity to suffering and an expansion in medical provision. Furthermore, there was a growing awareness of public health and hygiene and a rise in the population. Five areas were considered by Porter where enlightenment philosophy may be used as examples of a medical enlightenment.⁹ He proposed that medical philanthropy, with the development of hospitals, dispensaries and lunatic asylums, was the best example. New institutions which included hospitals for foundlings, for reformed prostitutes and for venereal diseases, helped society overcome traditional religious objections to such cases. Other examples given by Porter were the more humane treatments in psychiatry, improvements in public health and hygiene, and some therapeutic advances. A somewhat different view of a medical enlightenment was taken by Bynum who emphasised technological inadequacy (except in surgery), brutality, pompous doctors, quacks and treatments worse than the disease. However, the positive aspects of secularisation, urbanity and a worldly concern for health were admitted.¹⁰ Roger French has also considered the concept of a medical enlightenment, arguing that the doctrines of natural law, physical principles and the importance of the soul resulted in the disappearance of God from medical thinking.¹¹ Others saw disadvantages with a new secular age of control through professional bodies and the commercialisation of medicine. Progress, however, remained relatively slow and

⁸ Giovanni Morgagni, *De Sedibus et Causis Morborum per Anatomen Indagatis* (Venit: Typographia Remondiniana, 1761).

⁹ Roy Porter, 'Was There a Medical Enlightenment in Eighteenth-Century England?', *Journal for Eighteenth-Century Studies*, 5 (1982), 49-63.

¹⁰ William F. Bynum, 'Health, Disease and Medical Care' in, *The Ferment of Knowledge*, ed. by George S. Rousseau, Roy Porter (Cambridge: Cambridge University Press, 1980), pp. 211-253.

¹¹ Roger French, 'Sickness and the Soul: Stahl, Hoffmann and Sauvages on Pathology' in, *The Medical Enlightenment of the Eighteenth Century*, ed. by Andrew Cunningham and Roger French (Cambridge: Cambridge University Press, 1990), pp. 88-110 (p. 88).

improvements in health were offset to a certain extent by urbanisation and industrialisation.¹²

On a more practical level, evidence for Porter's views that medicine in this era was more experimental and humane than before is limited. Porter himself recounted numerous procedures that invaded, wounded and hurt patients.¹³ As already noted, the introduction of more humane management of mental disease in reformed asylums was a distinct feature of the Enlightenment.¹⁴ Public visiting was banned when St Luke's Hospital for Lunatics was founded in London in 1751, though was not discontinued at Bethlem until about 1770.¹⁵ The Madhouses Act of 1774 set up a rudimentary system of annual licensing in order to keep a register. Little evidence is found in James's dictionary on this more humane management of physical or mental disease. I found better indications for his views on the humane treatment of animals. The *Proposals* contain a section on medicine for animals, and a plea for ethical animal experimentation.

As cattle, horses, dogs &c. which have been hitherto either intirely neglected, or cultivated by men very little qualified to advance it. Many hints have been taken from the medicine of brutes, and very rationally applied to that of man; for the action of simples must be nearly the same, in both; and the parts of different animals have such a resemblance, that with proper cautions, an experiment made upon one, may be of great use with regard to the other. It is not therefore only for the preservation of those animals, tho' that alone is a very important consideration, that this part of the work has been compiled. It is chiefly intended as a system of comparative physic, and its great use will be that by improving the art of curing the distempers incident to horses, and other domestic animals, it will contribute to the advancement of physic in general. In order therefore to facilitate the progress of the

¹² Lester King, *The Road to Medical Enlightenment, 1650-1695* (London: Macdonald, 1970), p. 12.

¹³ Roy Porter, *Bodies Politic* (London: Reaktion, 2001), pp. 116-124.

¹⁴ Roy Porter, 'The Eighteenth Century' in, *The Western Medical Tradition 800 BC to AD 1800* (Cambridge: Cambridge University Press, 1995), pp. 371-475, pp. 426-429. Further description of private asylums, techniques of moral management and therapy and removal of physical restraints are given in Roy Porter, 'Madness and its Institutions' in, *Medicine in Society*, ed. by Andrew Wear (Cambridge: Cambridge University Press, 1992), pp. 277-301.

¹⁵ William Battie, *A Treatise on Madness* (London: J. Whiston, B. White, 1758).

art, proper hints will be given, and rational experiments will be recommended, under the particular article of each distemper.¹⁶

We hear of frequent barbarities committed on animals, without any higher motive than curiosity or wantonness; and of very few experiments, which have been made with a view of curing their diseases, tho' of much greater importance to mankind; because horses, dogs, and other animals, have distempers attended with the same symptoms as our own; Thus dogs are subject to epileptic fits, especially spaniels and pointers; and 'tis not to be doubted that if mankind had been diligent in finding out a remedy for them, the same might have been applied with success to those of men.¹⁷

The 'frequent barbarities' to which James refers may have included the public anatomy classes delivered in London by James Douglas, William Cheselden and Frank Nicholls in the first half of the eighteenth century and the experiments by Stephen Hales.¹⁸ In Chapter 2, I noted that James was a lover of animals and Samuel Johnson also spoke out forcibly against vivisection, notably in *The Idler*.¹⁹ It is of interest that James was originally from the countryside, as the rising concern for the wellbeing of animals traditionally came from cities, rather than from farmers and rural inhabitants.²⁰ The origins of the animal rights movement date from this period. Notably the views of Alexander Pope and later authors such as Richard Martin (1754-1834), and painters such as Joseph Wright of Derby (1734-1797)²¹ and Edwin Landseer (1802-1873) drawing attention to the misuse of animals.²²

¹⁶ *Proposals* paragraph 28.

¹⁷ *Proposals* paragraph 31.

¹⁸ Anita Guerrini, 'Anatomists and Entrepreneurs in Early Eighteenth-Century London', *Journal of the History of Medicine and Allied Sciences*, 59 (2004), 219-239. A. E. Clark-Kennedy, *Stephen Hales* (Cambridge: Cambridge University Press, 1929), p. 55.

¹⁹ John Wiltshire, *Samuel Johnson in the Medical World* (Cambridge: Cambridge University Press, 1991), pp. 128-139.

²⁰ James Turner, *Reckoning with the Beast: Animals, Pain and Humanity in the Victorian Mind* (Baltimore: Johns Hopkins University Press, 1980), p. 33.

²¹ Joseph Wright, *An Experiment on a Bird in the Air Pump* (1768).

²² Hadas Marcus, 'The Early Origins of the Animal Rights Movement' in, *Who's Talking Now. Multispecies Relations from Human and Animals Point of View* (Oxford: Inter-Disciplinary Press, 2015), pp. 1-16.

William Hogarth's series of engravings 'The Four Stages of Cruelty' (1751) were created to aid in 'correcting that barbarous treatment of animals'.²³

A Medical Enlightenment and Herman Boerhaave

The concept of a medical enlightenment has already been considered (p.195) which changed the view of God within medical thinking.²⁴ On the other hand, the shortcomings and disadvantages of a so-called medical enlightenment have been noted by several scholars who characterise the period as a new secular age of control through professional bodies and the commercialisation of medicine. Perhaps a more important feature of a medical enlightenment was the introduction of a more 'scientific' explanation of natural phenomena, such as the corpuscular and chemical theories of Robert Boyle (1627-1691) and his ideas about the human body being an engine.²⁵ Thomas Sydenham (1624-1689) was the first medical follower of Francis Bacon, believing that scientific progress lay through data derived from natural history, although his view of disease being due to miasmatic particles was but a theory.²⁶ A more rational view of medicine came from the iatro-chemical schools of medicine developed by Franciscus de la Boe, called Sylvius (1614-1672) whilst in Hanau, Basel, Paris and Amsterdam, and by Herman Boerhaave (1668-1738) in Leiden.

²³ Turner, *Reckoning with the Beast*, p. 9. The first official attempt to protect animals through legislation came much later, in a bill presented to the House of Commons in 1800, but statutory protection of animals did not occur until 1876, though protection societies had started to form in England in the first half of the nineteenth century. Harriet Ritvo, *The Animal Estate* (Cambridge: Cambridge University Press, 1987), pp. 125-127.

²⁴ Roger French, 'Sickness and the Soul: Stahl, Hoffmann and Sauvages on Pathology' in, *The Medical Enlightenment of the Eighteenth Century*, ed. by Andrew Cunningham and Roger French (Cambridge: Cambridge University Press, 1990), pp. 88-110 (p. 88).

²⁵ An idea developed particularly by Julien Offray de La Mettrie (1709-1751) in France.

²⁶ He became known as the English Hippocrates, probably promoted by John Locke and a small group of sympathetic physicians. Peter Anstey, 'The Creation of the English Hippocrates', *Medical History*, 55 (2011), 457-478. Bernard Mandeville (1670-1733), a physician and a radical republican originally from Nijmegen, continued the theme of the necessity of diligent observation. Israel, p. 20.

Boerhaave was an admirer of Sydenham and Isaac Newton and a friend of Richard Mead. He has been described as the ‘Dutch Hippocrates’ and the ‘Bearer of the Enlightenment Medicine’.²⁷ His enlightenment philosophy was practical knowledge from observations and not from the text alone. He was an outstanding clinician, a recognised authority in chemistry and botany, an inspiring teacher and author. He also promoted clinical bedside teaching and developed theories of disease based on chemical and mechanical principles.²⁸ His influence as a medical teacher spread throughout the continent and many medical trainees from all over Europe spent time with him in Leiden. Boerhaave kept his quick temper under control but was clearly upset by the disloyalty of his pupils who published his chemistry lecture notes in an unauthorised version, *Institutiones et Experimenta Chemiae* in 1724. This was translated into English by Peter Shaw and Ephraim Chambers in 1727. Boerhaave went on to produce his own version, *Elementa Chemiae* in 1732, which was also translated into English by Peter Shaw. The idea that a good doctor requires a thorough grasp of chemistry, botany, zoology, physics and, especially, physiology probably came from Leiden. Boerhaave inspired the founding of the Edinburgh Medical School through Alexander Monro (1697-1767), and the Medical Faculty of Göttingen through Albrecht von Haller (1708-1777), as well as strengthening the medical faculty in Vienna through Gerhard van Swieten (1700-1772) and Anton de Haen (1704-1776).²⁹ The start of the medical school in Edinburgh has been considered as the first public act of the Scottish Enlightenment and, by 1750, Edinburgh had replaced

²⁷ Anthony Scholer, Munim Khan, Aastha Tandon, Kenneth Swan, Ravi Chokski, ‘Herman Boerhaave, the Dutch Hippocrates, a forgotten father of medicine’, *The American Surgeon*, 84 (2018), 323-32.

²⁸ Gerrit A. Lindeboom, *Herman Boerhaave* (London: Methuen, 1968); J. Dankmeijer, ‘Is Boerhaave’s Fame Deserved?’ in, *Boerhaave and His Time*, ed. by Gerrit A. Lindboom (Leiden: E. J. Brill, 1970), pp. 17-30.

²⁹ Lester King, *The Medical World of the Eighteenth Century* (Chicago: Chicago University Press, 1958), p. ix.

Leiden as the medical education centre for medicine.³⁰ Here, enrolment was not based on religion, the school cut across ancient professional rivalries, and teaching methods were based on Europe's foremost medical academy, with the four founding professors all trained in Leiden.³¹ Despite the large number of people from Britain training in Leiden there is little evidence that they were perceptibly affected later in life by the prevailing free thought and materialistic atheism of the more radical Enlightenment in Holland, though John Durant (d.1684) and Richard Gilpin (1625-1700) were exceptions.³² Not only did Boerhaave contribute to the founding of medical schools, he also influenced numerous students through his clinical teaching and lectures, being named the Preceptor of all Europe.³³

The association of James and Boerhaave has been noted in Chapter 2. The subsequent influence of Boerhaave on James is evident from the extensive quotations in the dictionary and with the use of both iatro-chemical and iatro-mechanical mechanisms of disease in his arguments. Boerhaave's classification of such mechanisms is described by James as the

³⁰ Andrew Cunningham, 'Medicine to Calm the Mind; Boerhaave's Medical System, and Why it was Adopted in Edinburgh' in, *The Medical Enlightenment of the Eighteenth Century* (Cambridge: Cambridge University Press, 1990), pp. 40-66 (p. 57); Roger L. Emerson, Paul Wood, 'Science and Enlightenment in Glasgow, 1690-1802' in, *Science and Medicine in the Scottish Enlightenment* ed. by Charles W.J. Withers, Paul Wood (London: Tuckwell Press, 2002), p. 84.

³¹ Dr Andrew St-Clair, Dr John Rutherford, Dr Andrew Plummer, Dr John Innes. In a review of the Scottish Enlightenment the idea has been proposed that science and medicine gave shape and structure to the Scottish Enlightenment, aided by the crucial role of universities, clubs and societies. Paul Wood, Charles W.J. Withers, 'Introduction: Science, Medicine and the Scottish Enlightenment; an Historiographical Overview' in, *Science and Medicine in the Scottish Enlightenment*, ed. by Charles W. J. Withers, Paul Wood (London: Tuckwell Press, 2002), p. 5.

³² Peter Elmer, 'Medicine, Witchcraft and the Politics of Healing in Late-Seventeenth-Century England' in, *Medicine and Religion in Enlightenment Europe*, ed. by Ole Peter Grell, Andrew Cunningham (Aldershot: Ashgate, 2007), pp. 223-241(pp. 229-230). Boerhaave himself appears to have been generally good-natured, humble and pious. His basis was Calvinist theology in which God is the Creator and wisdom comes almost entirely in knowledge of God and ourselves. He started his days by spending an hour in meditation, apparently raised his hat every time he pronounced the name of God, and his written advice was always accompanied by a short prayer. Rina Knoeff, 'The Making of a Calvinist Chemist: Herman Boerhaave, God, Fire, and Truth', *Ambix*, 48 (2001), 102-111.

³³ Gerrit A. Lindeboom, *Herman Boerhaave: The Man and his Work* (London: Methuen, 1968). Gerrit A. Lindeboom, *Boerhaave and Great Britain* (Leiden: E.J. Brill, 1974).

best, comprising disorders of the fibres, vessels, redundance of an acid or alkali, disorders caused by a spontaneous viscosity of the juices or plethora, and defects of the circulation. Even nervous diseases were described as problems of obstructed nervous fluids.³⁴ James thus draws on these new and important ways of thinking about medicine. A letter (in Latin with an English translation) was sent by James to Boerhaave, shortly before the latter's death, on the successful use of Turpeth mineral (mercuric sulphate) in dogs, and the case of a young man bitten by a rabid dog, which was cured following the prescription of Turpeth mineral by a local apothecary.³⁵ The comprehensive textbook of medicine produced by James was a translation of Boerhaave's medical works, together with those of Friederick Hoffmann. James continued to be interested in Boerhaave, translating aphorisms, with additional material from Hoffman, some eight years after Boerhaave's death.³⁶ The preface of *A Medicinal Dictionary* contains a tribute to Boerhaave. It is also possible that Boerhaave reinforced James's interest in Hippocratic medicine as translations of lengthy passages of Boerhaave's oration on Hippocrates are included in the preface of the dictionary.³⁷ The biography of Boerhaave within the dictionary is five pages long and includes a paragraph in Latin describing Boerhaave's terminal illness in what appears to be heart failure. An interesting comment about language, suggesting first-hand experience, is

³⁴ Rina Knoeff, 'Herman Boerhaave's Neurology and the Unchanging Nature of Physiology' in, *Blood, Sweat and Tears - Changing Concepts of Physiology*, ed. by Manfred Horstmannshoff, Helen King, Claus Zittel (Leiden: Brill, 2012), pp. 193-216.

³⁵ Robert James, *A New Method of Preventing and Curing the Madness Caused by the Bite of a Mad Dog*. Paper laid before the Royal Society February 1741, 1st edn 1741, (London: Society of Booksellers for Promoting of Learning, sold by Messieurs Osborne and Smith, 1741).

³⁶ Herman Boerhaave, Friederich Hoffman, *The Modern Practice of Physic*, trans. by R. James (London: J. Hodges, 1746).

³⁷ Interestingly, a thoughtful, near contemporary publication by Barker compared the practices of Hippocrates, Galen, Sydenham and Boerhaave in dealing with acute distempers. John Barker, *An Essay on the Agreement between Ancient and Modern Physicians* (London: G. Hawkins, 1747). In view of the possibility that James came under the influence of John Floyer as a young man (see Chapter 3), it is noteworthy that Floyer's last book was on Hippocrates. John Floyer, *A Comment on Forty-Two Histories Described by Hippocrates in the First and Third Books of his Epidemics* (London: J. Isted, 1726).

made by James ‘that students going to study in Leiden from abroad may have misunderstood Boerhaave’s lectures because English people are little used to conversing in Latin (though perhaps no people in the world understand it better) or because we pronounce Latin in a different manner from all other nations’. The translator of Boerhaave’s *Treatise of the Materia Medica* (1739) remains anonymous with no indication of the author on the title page or in the preface or text in either the first or second editions.³⁸ A majority of the text comprises detailed ingredients and methods of preparation of medicines which preclude an effective analysis of style. The original text used for translation (*De materia medica, et remediorum formulis liber*) was published in Latin in 1719. It is possible that James was involved in the translation of this text before he moved to London, but I have been unable to find any evidence to support this conjecture. Another speculation is that James was the source of information about Boerhaave that was given to Johnson.

The spread and classification of knowledge

A distinct feature of the Enlightenment was the formation of scientific societies such as the Royal Society in London in 1660, and L’Académie des Sciences in Paris in 1666, in line with an increase in knowledge and specialisation in science, technology and the arts. As already noted, ideas were being spread in vernacular publications, through societies, but also through circulating libraries, reading rooms, clubs, and associations, many of which were based in coffeehouses and taverns.³⁹ The first provincial medical library started in Leeds in 1768, and the Medical Society of London followed in 1773.⁴⁰ Similarly, the

³⁸ Herman Boerhaave, *Treatise of the Materia Medica* (London: W. Innys et al., 1739).

³⁹ Started in Edinburgh in 1726; London in the 1730s.

⁴⁰ Rebecca Bowd, ‘Useful knowledge or polite learning? A reappraisal of approaches to subscription library history’, *Journal of Library and Information History*, 29 (2013), 182-195.

development of medical publishing societies occurred in the last quarter of the eighteenth century.⁴¹ Apart from his initial publication in the journal *Proceedings of the Royal Society*, James did not appear to participate in such societies though there is evidence that he made an unsuccessful application for membership to the Royal Society.⁴²

I will now consider how James benefited from and contributed to these overall beliefs of the Enlightenment with his medical publications as he did not leave any personal, political or religious views. Publishing was a distinctive feature of the Enlightenment in Britain, following the lapse of the Licensing Act in 1695, absence of prepublication censorship, introduction of a Copyright Act in 1709, and the development of a popular press with cheap reprints, newspapers, news sheets, pamphlets, periodicals and ladies' magazines. This occurred in London, in the English provinces, in Scotland and in Ireland, and was reflected in the increasingly important role of publishers throughout Britain.⁴³ The average annual output of new and reprinted books, pamphlets and smaller items in London, Edinburgh, Glasgow and Dublin rose from 1,991 (1710-1719) to 4,252 (1790-1795), and many books were translated into French and German. Books were both imported and exported and it has been estimated that 120,000 published items were exported annually to the American colonies in the early 1770s.⁴⁴ Not all printing was enlightened, but the dissemination of knowledge was clearly an important aspect of this process. James's original writings, together with his translations of European medical texts, made significant

⁴¹ David A. Kronick, 'Medical "Publishing Societies" in Eighteenth-century Britain', *Bulletin of the Medical Library Association*, 82 (1994), 277-282.

⁴² Roderick McConchie, personal communication.

⁴³ Johnson commented that 'The present age ... may be styled ... the Age of Authors' and 'Knowledge is diffused among our people by the newspapers' quoted by John Cannon, 'Johnson and Enlightenment' in, *Samuel Johnson and the Politics of Hanoverian England* (Oxford: Oxford Scholarship Online. <DOI~:10.1093/acprof:oxo/9780198204527.003.0007>), [accessed 6 March 2019]. Similarly, Outram noted that the enlightenment turned culture into a commodity and knowledge into information, Outram, p. 7.

⁴⁴ James Raven, *The Business of Books* (New Haven: Yale University Press, 2007), p. 145.

contributions to medical literature in the Enlightenment. In turn, some of James's publications were translated into French and Italian. James was an author and a man of learning who clearly wanted to share knowledge.⁴⁵ In this chapter I will propose that he was an intellectual master of all he surveyed, in the way described by Pagden.⁴⁶ In considering James's clinical practice separately from his publications, he would fit the description of a more moderate form of medical enlightenment providing for the needs of the relatively small, wealthy class, defending the existing social order, rather than for the needs of society as a whole.⁴⁷

A particular feature of the Enlightenment relevant to James was the production of scientific taxonomies (for example in botany and chemistry) and the publication of specialised dictionaries and encyclopaedias.⁴⁸ A prime example is that of Carl Linnaeus (1707-1778), Swedish physician and botanist, who was an almost exact contemporary of James and interestingly part of his training, was in Leiden under Herman Boerhaave.⁴⁹ Such publications began in the seventeenth century with an increase in the second half of the eighteenth century.⁵⁰ One hypothesis to explain this increase is the availability of funding, as eighteenth-century dictionaries exemplify the commercialisation of culture and

⁴⁵ He was also a successful businessman and part of the commercialisation of medicine in the Enlightenment.

⁴⁶ Anthony Pagden, *The Enlightenment* (Oxford: Oxford University Press, 2013), p.125.

⁴⁷ Jonathan I. Israel, 'Enlightenment, Radical Enlightenment and the "Medical Revolution" of the Late Seventeenth and Eighteenth Centuries' in, *Medicine and Religion in Enlightenment Europe* ed. by Ole Grell, Andrew Cunningham (Aldershot: Ashgate, 2007), pp. 5-28.

⁴⁸ Richard Yeo, 'Encyclopaedism and Enlightenment' in, *The Enlightenment World*, ed. by Martin Fitzpatrick, Peter Jones, Christa Knellwolf, Iain McCalman (London: Routledge, 2004), pp. 350-365. The desire to classify has a long history, dating back to the classical times of Plato, Aristotle and Pliny the Elder, as noted by Andrew Brown in, *A Brief History of Encyclopaedias* (London: Hesperus Press, 2011), pp. 13-19.

⁴⁹ Alan G. Morton, *History of Botanical Science* (London: Academic Press, 1981). Linnaeus's important publications were *Systema Naturae* (1735) and *Species Plantarum* (1753).

⁵⁰ Daniel R. Headrick, *When Information Came of Age* (Oxford: Oxford University Press, 2000).

change in the presentation of knowledge.⁵¹ Whilst pre-Enlightenment encyclopaedias were part of the world of learned elites, controlled by the church and universities, Enlightenment encyclopaedias, written in the vernacular, appealed to universal readership and fostered ideas of intellectual collaboration.⁵² Multi-volume encyclopaedias, dictionaries and lexicons, as well as large compilations in history, languages and natural history, began with Louis Moréri's *Grand Dictionnaire* (1697), Bayle's *Dictionnaire* (1697), and Ephraim Chambers's *Cyclopaedia* (1728). One of the most influential publications of the Enlightenment was the *Encyclopédie* (1751-1766) initiated by Denis Diderot.⁵³ This renowned encyclopaedic project was inspired by Francis Bacon and conceived as a revised translation of Chambers's *Cyclopaedia*.⁵⁴ Chambers's book had already been translated into Italian on two occasions. Diderot saw his work as providing rules from nature rather than from classical authors.⁵⁵ The direct link between Diderot and James is significant, as Diderot started work translating James's dictionary into French, and it is possible that James met Diderot. The writing of the *Encyclopédie* followed, being compiled by Diderot and Jean Le Rond d'Alembert, with Chevalier de Jaucourt as a major contributor on 'Médecine' and other medical essays. Jaucourt copied much material from James's preface, but avoided scriptural references.⁵⁶ However, I found a few such references. The title page of *A Medicinal Dictionary* includes a quotation from Ecclesiasticus. Page 1 of

⁵¹ Jeff Loveland, *The European Encyclopedia from 1650 to the Twenty-First Century* (Cambridge: Cambridge University Press, 2019), p. 100.

⁵² Richard Yeo, *Encyclopaedism and Enlightenment*, p. 355.

⁵³ Others being Voltaire's *Dictionnaire Philosophique* (1764), Jean-Jacques Rousseau's *Discourse on Inequality* (1754); and Adam Smith's *The Wealth of Nations* (1776).

⁵⁴ Margaret C. Jacob, *The Enlightenment; a Brief History with Documents* (Boston: Bedford/St. Martin's, 2001), p. 28. Thomas Osborne may have been inspired by Chambers's *Cyclopaedia* to consider publishing a medical dictionary – see Chapter 3.

⁵⁵ Tom Furniss 'Enlightened Critic of the Enlightenment?' in, *The Enlightenment World*, ed. by Martin Fitzpatrick, Peter Jones, Christa Knellwolf, Iain McCalman (London: Routledge, 2004), pp. 596-69.

⁵⁶ Richard N. Schwab, 'The History of Medicine in Diderot's "Encyclopédie"', *Bulletin of the History of Medicine*, 32 (1958), 216-233.

the preface contains the phrase ‘the wise institutions of the Creator’ and another biblical quotation, ‘God hath made foolish the wisdom of this world; thus the foolishness of God is wiser than men; and the weakness of God is stronger than men’. Under ‘Vinum’ there is a quotation from St Paul, 1 Timothy, chapter 5, v.23. A reference to an imaginary Pope under the article on the etymology of ‘Archiator’ suggests an anti-Roman Catholic belief. It would appear therefore that James did not link religion and medicine closely, either in his practice or in his writings.

It is perhaps not surprising that some of the illustrations found in James’s dictionary, albeit from a common source, were also used in the *Encyclopédie*. Both authors copied images from Albinus, Haller, Eustachius and Bidloo for anatomy, and Heister for surgery, but no evidence of bias occurred in the *Encyclopédie* towards Bidloo, who emphasised the deadness of the dissected body or to Albinus, who reflected Dutch Enlightenment ideas with more lively images.⁵⁷ Overall, James’s dictionary (1743-45) can be placed alongside key publications of the Enlightenment, such as John Harris’s *Lexicon Technicum* (1704), Ephraim Chambers’s *Cyclopaedia* (1728), Denis Diderot and Jean le Rond d’Alembert’s *Encyclopédie* (1751-1772), and Colin Macfarquhar, Andrew Bell and William Smellie’s *Encyclopaedia Britannica* (1768-1771). James’s publications, in particular the dictionary, made significant contributions to the Enlightenment and may be viewed as having made a significant contribution to a medical enlightenment.

⁵⁷ Rina Knoeff, ‘Moral Lessons of Perfection: A Comparison of Mennonite and Calvinist motives in the Anatomical Atlases of Bidloo and Albinus’ in, *Medicine and Religion in Enlightenment Europe*, ed. by Ole P. Grell, Andrew Cunningham (Aldershot: Ashgate, 2007), pp. 121-143.

Previous reviews of *A Medicinal Dictionary*

The views of other scholars and users of the dictionary may be instructive. I will examine eighteenth- and nineteenth-century responses to the dictionary, as well as more recent scholarly analyses, in order to determine if the full scale of the work has been appreciated, especially in Enlightenment terms. Assessments of the dictionary have varied over time, initially balanced, then rather negative and now returning to a more balanced view. In an unsigned biographical note in *Philosophical Transactions* the dictionary was described as a ‘compilation which proves that the author was well acquainted with the writings of the physicians of antiquity, as well as with the most esteemed medical publications of his own days. For whatever related to the history of the medical art and the histories of diseases, this dictionary may be consulted with advantage.’⁵⁸ However, the note continued:

Most of the articles in this compilation are discussed with too much prolixity. The work should have been less bulky, and more select [. . .] with regards to Dr James’s merits as an author, if he is not distinguished for much originality of thought or conciseness of expression; yet he has shown himself to be a faithful and industrious collector of medical information down to his own time; and it must be confessed that few have surpassed him in point of erudition.

A near contemporary view of the dictionary from the beginning of the nineteenth century by the Exeter-based medical writer Bartholomew Parr, gave another balanced analysis:

About the middle of the century, Dr James offered a vast work to the public, in three ponderous folios. The erudition which he displays is extensive, and his explanations are often satisfactory. He has collected all the learning of his predecessors, preserved their controversies, and added whatever a diligent attention to the works of the ancient physicians could contribute to the former stock.

Parr went on to say:

⁵⁸ Charles Hutton, George Shaw, Richard Pearson, *Philosophical Transactions of the Royal Society of London Abridged, 1735-1743* (London: C&R Baldwin, 1809), VIII, pp. 69-73.

In the more strictly practical part of his dictionary, he has collected, with the same care, and has copied, not always with sufficient discrimination, the opinions of different practical authors. The diffuseness of his language contributes, however, to lessen the advantages which such a work ought to possess, as a ready resource in cases of difficulty; nor, in the mass of contending opinions, is it always easy to collect those comprehensive views, which will at once lead to a decisive and discriminated practice.⁵⁹

Later assessments have been critical of both content and style. Negative comments on the dictionary have included: ‘a mass of ignorance and conservatism’,⁶⁰ ‘a majestic fossil’⁶¹ and ‘a storehouse of now dead, once living dogmas,’⁶² ‘competently written but largely derivative work’⁶³ and ‘a gargantuan compilation of 3,370 pages’.⁶⁴ Mark Twain’s essay, published approximately a hundred and fifty years after the dictionary was produced, gave some frightening therapeutic examples from its pages, but ignored the biological and medical science content. Probably referring to the content rather than to the weight of the three folios, Twain wrote: ‘If it had been sent against the Pretender’s troop there probably wouldn’t have been a survivor. In 1861 this deadly book was still working the cemeteries - down in Virginia.’⁶⁵ Some of these reviews imply that the dictionary did not make a significant contribution to the Enlightenment but fail to consider the dictionary at the time it was written. A counter-argument could be that all dictionaries are largely derivative, and the size of the dictionary should be seen as one of its strengths, even though some of the contents inevitably become outdated.

⁵⁹ Bartholomew Parr, *The London Medical Dictionary* (London: J. Johnson et al., 1809).

⁶⁰ Quoted by Allen T. Hazen, *Samuel Johnson’s Prefaces and Dedications* (Port Washington: Kennikat Press, 1973).

⁶¹ Mark Twain, ‘A Majestic Literary Fossil’, *Harper’s New Monthly Magazine*, 477 (1890), 439-444.

⁶² C.W. Burr, ‘Dr James and his Medical Dictionary’, *Annals Medical History*, 1 (1929), 180-190.

⁶³ Thomas A.B. Corley, James Robert (1703-1776) in *Oxford Dictionary of National Biography*, <<https://doi.org/10.1093/ref:odnb/14618>> [accessed 6 March 2019].

⁶⁴ Rod McConchie, *Helsinki Society for Historical Lexicography*, January 2016.

⁶⁵ Twain, *A Majestic Literary Fossil*, p. 439.

More recent assessments of the work are also mixed. For example, the dictionary has been considered competent though not brilliant, not original or even a very well synthesised contribution to knowledge, but nevertheless an impressive work.⁶⁶ Authors such as Brack and Kaminski from a linguistic point of view have been particularly concerned to explore the links between James and Samuel Johnson and considered the dictionary to be a typical large-scale compilation of its time, an assemblage of existing scholarship with a heavy reliance on the translation of other works for much of its material.⁶⁷ This does not take into consideration the medical component of the dictionary and countering some of these critical comments is the view that authors of reference works always drew heavily on their predecessors.⁶⁸ Most of these recent appraisals therefore fail to assess the dictionary as a product of the Enlightenment. Some more positive reviews have also been made, for example some sixty years after publication, ‘It was a work highly honourable to the author, and retaining its credit unimpaired, after the continued progress and improvements in medicine for several years.’⁶⁹ In the twentieth century the dictionary was reviewed as ‘the one great medical dictionary before the birth of medicine as a science, being the largest, most exhaustive and most learned medical dictionary written in

⁶⁶ Lulu Stine, ‘Dr Robert James 1705-1776’, *Bulletin of the Medical Library Association*, 29 (1941), 187-198.

⁶⁷ O.M. Brack, Thomas Kaminski, ‘Johnson, James, and the “Medicinal Dictionary”’, *Modern Philology*, 81 (1984), 378-400.

⁶⁸ Considine, for example, has described how the lexicographical work of one generation is inherited from the one before it. John Considine, *Dictionaries in Early Modern Europe* (Cambridge: Cambridge University Press, 2008), p. 8. Jack Lynch, ‘Plagiarism’ in, *You Could Look It Up* (New York: Bloomsbury Press, 2016), pp. 91-93; Hence Landau’s view that the best lexicographer was the best plagiarist, and Starnes and Noyes’s comments that dictionaries never were, and never will be new. Sidney Landau, *Dictionaries: the Art and Craft of Lexicography*, 2nd edn (Cambridge: Cambridge University Press, 2001), p. 43; and ‘The best lexicographer was often the most discriminating plagiarist’, De Witt T. Starnes, Gertrude E. Noyes, *The English Dictionary from Cawdrey to Johnson, 1604-1755*, new edn with an introduction and selected bibliography by Gabriele Stein (Amsterdam: Benjamin, 1991), p. 183.

⁶⁹ Alexander Chalmers, *The General Biographical Dictionary* (London: J. Nichols et al., 1812), XVIII, p. 456.

English in pre-scientific days'.⁷⁰ An historian of psychiatry regarded it as 'a monument to medical scholarship'.⁷¹ These more modern views support the notion that the dictionary made a significant contribution to a medical enlightenment. In summary, there has been much agreement on the comprehensive nature of the dictionary, little comment on word definitions and the medical component, and disagreement on the contemporary relevance of the information.

Contributing to a medical enlightenment

Whilst James's dictionary overall may be considered to be representative of an enlightenment publication, particular component parts of the dictionary have been chosen to evaluate the contributions made to a medical enlightenment. I will consider the preface as an enlightenment document together with the individual subjects of magic, superstition, weights and measures, alchemy and astrology. I will also discuss the problem of the encyclopaedic entries and assess the innovative illustrations, the style, and the datedness of medical information.

The preface

Overall, my research indicates that the preface to *A Medicinal Dictionary* should be considered as an enlightenment document. In assessing the preface I will emphasise women in medicine, because negative attitudes to women were beginning to change and, as noted by Porter, there were instances of girls being apprenticed as barbers and surgeons.⁷² Some of the elements that might have been included in a more conventional preface, such as the aims and purpose of the dictionary, had already been published in the

⁷⁰ Charles W. Burr, 'Dr James and his Medical Dictionary', *Annals of Medical History*, 1 (1929), 180-190

⁷¹ Germán E. Berrios, 'Retrospective Diagnosis and its Vicissitudes', *History of Psychiatry*, 24 (2013), 126-128.

⁷² Roy Porter, *England in the Eighteenth Century* (London: The Folio Society, 1998), p. 33.

Proposals. The *Proposals* stated that the dictionary would explain the terms and the science of physic; name the distempers and instruct on their cure; give the technical words of physic; describe anatomy, humours and *materia medica*, plants, minerals and animals, ancient and modern, and their medicinal use; give proper regimens on food, exercise, air and non-naturals; a body of surgery; biographies of principal authors in physic; and an accurate quotation of authors.⁷³ Although the author of the *Proposals* was given as R. James, the style and content strongly indicate several contributions by Johnson.⁷⁴

A person consulting the dictionary may not read the front matter, but the preface can establish the authority of the work and lend it prestige.⁷⁵ Ephraim Chambers gave a lot of thought to writing the thirty-page preface to his *Cyclopaedia*, covering the overall function, the subjects included, the sources used, and its deficiencies.⁷⁶ It is not difficult to see why Johnson greatly admired Chambers's preface. Johnson, similarly, gave a lot of thought to writing the introduction to his own *A Dictionary of the English Language* (1755).⁷⁷ It is of interest that the shorter six-page preface to Nathan Bailey's *Dictionarium Britannicum* (1736), a dictionary used by Johnson and possibly by James, was largely a history of the

⁷³ Robert James, *Proposals for Printing a Medicinal Dictionary* (London: Society of Booksellers for Promoting Learning, 1741).

⁷⁴ One commentator believed they were 'almost wholly of Johnson's composition. Arthur Sherbo, 'Some Observations on Johnson's Prefaces and Dedications' in, John H. Muddendoff, ed., *English Writers of the Eighteenth Century* (New York: Columbia University Press, 1971), pp. 130-132.

⁷⁵ Sandro Nielsen, 'The Evaluation of the Outside Matter in Dictionary Reviews', *Lexikos*, 19 (2009), 207-224; Arthur Sherbo has been quoted as saying that he could not 'stomach' reading the entire preface. Brack, Kaminski, p. 293; Landau, p. 148.

⁷⁶ Chambers confessed in his preface to *Cyclopaedia*: 'I have rifled a thousand flowers, prickly ones many of them, to load your hive. The book is not mine, 'tis everybody's; the mixed issue of a thousand loins.' Ephraim Chambers, *Cyclopaedia* (London: James and John Knapton et al., 1728), p. xxix.

⁷⁷ Johnson gave ten pages to the preface, twenty-seven pages to 'The History of English Language' and thirteen pages to 'A Grammar of the English Tongue'. Samuel Johnson, *A Dictionary of the English Language*, (London: A. Millar et al., 1755).

English language. Otherwise, histories were not a feature of dictionaries.⁷⁸ That James's preface is unusual is borne out by examining contemporary medical texts which I found did not generally include histories in the prefaces. William Cowper described the content and organisation of his book in a short note to the reader, followed by an eight-page introduction to the functions of the various body organs.⁷⁹ Lorenz Heister's preface (1739) gave a personal history, outlining his credentials and those of other surgical authors, and the reasons for using Latin and German in the first English edition of his work published in 1743.⁸⁰ In a relatively short preface, Samuel Sharp justified a surgical text written in English, and his selection of material.⁸¹ A notable exception was the introduction written by William Smellie (1697-1763), a contemporary of James, in his first volume of *A Treatise on the Theory and Practice of Midwifery* (1752), which began with sixty-eight pages (octavo) on the history of obstetrics.⁸²

The preface was written by James on the evidence of a manuscript written in his own hand.⁸³ Two contemporary medical historians, John Freind (1675-1728), and the Swiss physician, Daniel Le Clerc (1652-1728), were clearly influential and may have assisted James. The wide coverage of medical history in the preface may be summarised as Egyptian medicine (pp. 2-4), early Greek medicine (pp. 4-7), and druidic, Chinese, Japanese and Mexican medicine (pp. 8-10). James's fulsome praise of Hippocrates (pp. 10-33) may have followed Boerhaave, who had adopted Hippocrates as his medical hero.

⁷⁸ Robert DeMaria, 'Johnson's Extempore History and Grammar' in, *Anniversary Essays on Johnson's Dictionary*, ed. by Jack Lynch, Anne McDermott (Cambridge: Cambridge University Press, 2005), pp. 77-91, p. 87.

⁷⁹ William Cowper, *The Anatomy of Humane Bodies*, rev. by C.B. Albinus, 2nd edn (Leyden: Langerak, 1737).

⁸⁰ Lorenz Heister, *A General History of Surgery* (London: W. Innys et al., 1743).

⁸¹ Samuel Sharp, *A Treatise on the Operations of Surgery*, 3rd edn (London: J. Brotherton et al., 1740).

⁸² William Smellie, *A Treatise on the Theory and Practice of Midwifery* (London: D. Wilson, 1752).

⁸³ Stewart Marsh Ellis, *The Solitary Horseman* (Kensington: Cayme Press, 1927), p. 12.

James notes ‘his ‘extraordinary sagacity’, ‘his meridian splendour diffused a noble light which will for ever shine with distinguished lustre’, ‘the divine Hippocrates’, the ‘purity and glory of his compositions’, ‘this venerable man is to the physician what the Pole Star is to the mariner’, and ‘the greatest and most perfect master of the healing art the world has ever seen’.⁸⁴ James uses lengthy passages of Boerhaave’s first oration on Hippocrates, and these passages were used again by Diderot in the article on medicine in the *Encyclopédie*.⁸⁵ Other Greek physicians, including Galen, and sects including the Empiric, Dogmatic, Eclectic and Episynthetic, are described in the preface. As might be expected, James respected Galen, particularly on prognostic and diagnostic signs, but is critical of his medicine. The remainder of James’s preface covers Arabian medicine (pp. 75-78), Jewish medicine (p. 79), Paracelsus (pp. 80-87), chemistry (pp. 87-88), the circulation, fluids, solids and mechanics (pp. 88-96), what the young student needs to know (p. 96) and modern medicine (pp. 96-99).

Along with many medical practitioners in the eighteenth century, James honours Boerhaave (see above) and the ‘illustrious’ Hoffman.⁸⁶ Daniel Le Clerc (1652-1728) is the most commonly quoted author in James’s preface and, on page 11, James states:

⁸⁴ Rina Knoeff, ‘Herman Boerhaave’s Neurology’ in, *Blood, Sweat and Tears - Changing Concepts of Physiology*, ed. by Manfred Horstmannshoff, Helen King, Claus Zittel (Leiden: Brill, 2012), pp. 193-216, p. 201. Hippocrates was not referred to in my survey of some contemporary books on health. George Cheyne, *An Essay of Health and Long Life* (London, G. Strahan, J. Leak, 1724); George Cheyne, *The Natural Method of Curing the Diseases of the Body* (London: G. Strahan, J. & P. Knapton, 1742); Peter Shaw, *A New Practice of Physic*, 3rd edn (London: J. Osborn, T. Longman, 1730). Boerhaave used Paracelsus in his iatrochemical theories of disease, but was also critical of the one-sidedness and extravagancies of his arguments. Gerrit A. Lindeboom, *Herman Boerhaave* (London: Methuen, 1968), p. 327.

⁸⁵ Rina Knoeff, *Herman Boerhaave’s Neurology*, p. 211.

⁸⁶ Friedrich Hoffmann (1660-1742), German physician and chemist. James refers to other authors in the preface, both British and European, including Mr Le Clerc and Dr Freind (pp. 44, 75) for historical details; Samuel Sharp (1709-1778), a surgeon at Guy’s Hospital (p. 54) for surgery; Abbé Renaudaut for details of Arabian physicians (p. 76); Johannes Leo Africanus (c.1494-c.1554), who wrote an Arabic-Hebrew-Latin medical vocabulary for the Jewish physician, Jacob Mantino (p. 77); J. Leo Aser for details of Jewish physicians (p. 79) and Boerhaave and Shaw on Paracelsus (p. 82); Peter Shaw (1694-1763) was another Lichfield boy, but nothing of his education has been recorded.

In the following detail of his [Hippocrates's] philosophy and physiology, I must acknowledge my obligations to Mr. Le Clerc, who has with great judgment and accuracy extracted them from his works, and given them so complete, that very little can be added to what he has said.

Le Clerc, a Genevan physician who is credited with the first account of medical history, could have assisted James personally, particularly if James had started writing his history of medicine whilst a student in Oxford, or soon after qualifying in medicine. However, I was unable to find any evidence that Le Clerc visited Oxford. James modifies some of Le Clerc's text on Hippocrates, listing the drugs used in Hippocratic medicine as well as employing a Greek alphabetical order of diseases. James copies several other entries directly from Le Clerc, including those on druids, gymnosphists, dogmatics and on Galen.⁸⁷ James's text is different from Le Clerc's on Chinese medicine, Deocritus, and the Empirics, and Le Clerc does not refer to Japanese medicine. The other main source used by James is John Freind but, unlike Le Clerc, extensive copies of text are not made.⁸⁸ Instead, James inserts shorter quotations from Freind under individual biographies within the dictionary, for example under 'Albucasis', 'Aegineta (Paulus)' and 'Oribasius'.

Two pages in the preface are devoted to contributions made to medical knowledge by 'ladies' in their writings and in midwifery.⁸⁹ Cleopatra, Queen of Egypt and Artemisia, Queen of Caria, were known to have probably been involved in medicine.⁹⁰ James gives an account of a change in Athenian law which allowed women and slaves to be involved in

⁸⁷ Examples of identity: James pp. 42-43 same as Le Clerc pp. 348-353; James pp. 68-72 same as Le Clerc pp. 687-69.

⁸⁸ John Freind, *The History of Physick* (London: J. Walthoe, 1725). This was a well-established text, conceived during his imprisonment in the Tower of London. Friend's colleague, Richard Mead, had given him a copy of Le Clerc's *Histoire de la Medicine*, 1696 (Richard Meade, *In the Sunshine of Life* (Philadelphia: Dorrance & Company, 1974), p. 31.

⁸⁹ Preface to *A Medicinal Dictionary*, pp. 50-51.

⁹⁰ Artemisia gave her name to the herb artemisia (mugwort). Artemis, the Greek counterpart of the Roman goddess Diana, was a fourth-century Queen of Caria, being responsible for the Mausoleum of Halicarnassus, one of the Seven Wonders of the World.

medicine, including childbirth. The change came about when Agnodice, who had learned medicine and the art of delivery from one Herophilus, disguised herself in the habit of a man in order to assist others. The change in this law permitted free women to learn medicine. James argues that it was possible that all midwives in Greece and Italy not only delivered babies, but also practised medicine, although not all female physicians were midwives. A number of women authors are mentioned by James, many of whom were associated with specific therapies for diarrhoea, colic etc., as well as in the traditional role of dealing with women's disorders. Trota of Salerno is included, but without giving details of her important publications on practical medicine and on treatments for women, dating from the twelfth century.⁹¹

The *Proposals* for the dictionary contained an interesting comment on diseases of women.

There are no cases, in which more frequent, and more fatal errors are committed, than in those peculiar to women, because they usually commit themselves to the care of such as are equally ignorant of medicine with themselves, and whose skill consists in a few vulgar prejudices, which they religiously adhere to. For this reason, particular instructions are given for the cure of those disorders, to which women are exposed in every part of their lives.⁹²

The rise of the man-midwife was a feature of the first part of the eighteenth century.⁹³ As described by Lovett and Tomkins childbirth changed from a sociable, female event to a male masculine one, driven by the medical use of forceps and other obstetrical instruments

⁹¹ Also remembered as Dame Trot in the nursery rhyme '*Old Dame Trot*': 'Some cold fish had got, Which for pussy, She kept in Store, When she looked there was none, The cold fish had gone, For puss had been there before.'

⁹² *Proposals*, paragraph 21.

⁹³ Adrian Wilson, 'The Politics of Medical Improvement in Early Hanovarian London' in, *The Medical Enlightenment of the Eighteenth Century*, ed. by Andrew Cunningham, Roger French (Cambridge: Cambridge University Press, 1990), pp. 34-37; Adrian Wilson, *The Making of Man-Midwifery: Childbirth in England, 1660-1770* (London: UCL Press, 1995).

and also by patients selecting the practitioner perceived to be the best for the task.⁹⁴

Specialists in London such as William Smellie and William Hunter were contemporaries of James.⁹⁵ However, man-midwives were not welcomed universally.⁹⁶ The term ‘man-midwife’ is not used by James in the twenty-seven page entry ‘Obstetricato’ in the dictionary, but he refers rather to the roles of both midwives and physicians and ‘the operator’ attending women in labour. Physicians were considered by James to be more likely to adjust management for an individual case, and somewhat dismissively noted ‘distinguish himself from the common herd of midwives, who often tread a beaten path, and practise always in one manner, without distinction, and without knowing the consequences it may produce’.⁹⁷ In the dictionary, James’s entry on obstetrics is largely based on Guillaume La Motte (1655-1737) from France and Henrick van Deventer (1651-1724) from Holland.⁹⁸ I was unable to find any personal views from James about women in medicine, although in the dictionary a specific headword, ‘Acestoris’, as a female physician and midwife, is included. It has been suggested that more women may have practised medicine than is usually acknowledged, by joining their husbands in medicine and in bone-setting.⁹⁹ There is no entry for nurse in the dictionary, as indeed there are no

⁹⁴ Lisetta Lovett, Alannah Tomkins, *Medical History Education for Health Practitioners* (London: Radcliffe Publishing, 2013), pp. 70-71.

⁹⁵ Lisa F. Cody, ‘Breeding Scottish Obstetrics in Dr Smellie’s London’ in, *Birthing the Nation* (Oxford: Oxford University Press, 2005), pp. 152-197.

⁹⁶ The Company of Surgeons in 1745 prohibited man-midwives from election to its governing body, and it was not until 1783 that the College of Physicians of London granted them a physician’s licence in midwifery.

⁹⁷ He did not balance this view by referring to the skilled midwife, Sarah Stone. Sarah Stone, *A Complete Practice of Midwifery* (London: T. Cooper, 1737); Isobel Grundy, ‘Sarah Stone: Enlightenment Midwife’ in, *Medicine in the Enlightenment*, ed. Roy Porter (Amsterdam: Rodopi, 1995), pp. 128-144.

⁹⁸ Guillaume Mauquest de la Motte was a French surgeon and man-midwife. Guillaume Mauquest de la Motte, *Traité Complet des Accouchements Naturels, Non-naturels, et Contre Nature* (Leiden: Jean, Arnold, Langerak, 1729). Similarly, Hendrik van Deventer from Holland was a man-midwife, but not opposed to midwives and specifically stated his book was not ‘writ for men-midwives’. Hendrik van Deventer, *The Art of Midwifery Improved*, 3rd edn (London: A. Bettesworth, W. Innys, J. Pemberton, 1728).

⁹⁹ Monica Green, ‘Documenting Medieval Women’s Medical Practice’ in, *Practical Medicine from Salerno to the Black Death*, ed. by Luis García-Ballester, Roger French, Jon Arrizabalaga, Andrew Cunningham,

entries for doctor, physician or surgeon. A ‘Medicus’ is a physician and an ‘Apothecarius’ a preparer of medicines.

In summary, the impressively comprehensive preface thus brings together considerable detail of the history of medicine, largely based on biographical information, and includes an historical account of women in medicine. James was aided by quotations and perhaps by personal contacts, and demonstrated an excellent grasp of historical facts, weaving them into a convincing narrative. As such, the preface can be considered as an example of a medical enlightenment text, ensuring solid background information to any study of medicine.

Style, word definitions and the vernacular

I will now move to consideration of the style, categories and a selection of the contents of the dictionary, in order to assess the enlightened (or not) character of the work. I will also return briefly to the use of the vernacular. The categories and headwords, the encyclopaedic entries, the biographies, illustrations and the writing style will be assessed using some of the techniques adopted by McIntosh who noted there was a retreat from magic and superstition, a gradual disappearance of local weights and measures, definitions were in a more ‘written’ than ‘oral’ style, and polysemy became more precise.¹⁰⁰ McIntosh has argued that not only did the Enlightenment facilitate the distribution of information and ideas, but it also changed the way ideas were expressed. Dictionary entries reflected and

(Cambridge: Cambridge University Press, 1994), p. 329. Fissell, in *Patients, Power, and the Poor in Eighteenth-Century Bristol*, (1991), p. 59 also noted the secondary capacity in which women functioned in medicine in various ways.

¹⁰⁰ Carey McIntosh, ‘Eighteenth-Century English Dictionaries and the Enlightenment’ in, *The Yearbook of English Studies*, vol. XXVIII, Eighteenth-Century Lexis and Lexicography (Modern Humanities Research Association, 1998), pp. 3-19; Carey McIntosh, ‘Eighteenth-Century English Dictionaries and the Enlightenment’ in, *Ashgate Critical Essays on Early English Lexicographers*, vol. V, *The Eighteenth Century* (Aldershot: Ashgate, 2012), pp. 3-18, p. 4; Peter Elmer, ‘Medicine, Witchcraft and the Politics of Healing in Late-Seventeenth-Century England’ in, *Medicine and Religion in Enlightenment Europe*, ed. by Ole Grell, Andrew Cunningham (Aldershot: Ashgate, 2007), pp. 223-241 (p. 237).

promoted what have come to be recognised as Enlightenment values of scientism and clarity.¹⁰¹ Critical comments in the past on James's style have referred mainly to the preface and the biographies. The language used has been evaluated as 'labyrinthine mazes of interruptive and digressive clauses' with 'failure to accumulate meaning or logical force; by repeated favourite words, phrases, and clauses, often vague, empty, or even superfluous careless syntax and inattention to sentence emphasis or variation.'¹⁰² Furthermore, 'conditional clauses and the subjunctive mood, often found in these translations, encourage vague and wordy diction . . . one is struck by the uncertainty of many passages on a variety of subjects . . . syntax is typically interrupted by short, broken intruders set between commas, with the main clause disguised and fragmented . . . ' More specifically, 'Nothing in "Aetius" is remarkable (or Johnsonian), long wandering sentences sloppily glued together with short phrases and clauses, weak verb phrases featuring "to have", "having", and the familiar "I mean", "appears", and "last-mentioned" mark this life as the work of the Le Clerc translator.'¹⁰³

The style James adopted is formal, but often personal rather than colloquial. He is fond of using personal pronouns, such as 'I' and 'we', and expressing his own views and emphasising his own experience. The use of personal pronouns was not uncommon in scientific texts of the eighteenth century. Many individual comments are inserted by James. A typical example with an acerbic undertone is found under 'Elasticitas'.

Whoever is more inclined to inquire into the cause of elasticity, than to cure diseases, may find a great deal upon this subject in the writings of Cartesian and

¹⁰¹ Carey McIntosh, 'Eighteenth-Century English Dictionaries and the Enlightenment' in, *Ashgate Critical Essays on Early English Lexicographers*, ed. by Anne C. McDermott (Farnham: Ashgate, 2012), pp. 3-18.

¹⁰² O. M. Brack, Thomas Kaminski, 'Johnson, James, and the Medicinal Dictionary' in, *Ashgate Critical Essays on Early English Lexicographers*, vol. V, *The Eighteenth Century*, ed. by Anne McDermott (Farnham: Ashgate, 2012), pp. 289-311 (p. 294).

¹⁰³ Brack & Kaminski, 'Johnson, James, and the Medicinal Dictionary', p. 301.

Newtonian philosophers; in which, however, they will find little satisfaction, without a sufficient share of philosophical enthusiasm.

Throughout the dictionary the use of capital letters and italics reflects an older style of printing which was already changing in the eighteenth century. Capital letters are used by James (see figures 3.6-3.11), despite efforts to abandon them by Alexander Pope from 1717, by *The Gentleman's Magazine* from 1733, and by Ephraim Chambers in the second edition of *Cyclopaedia* in 1738.¹⁰⁴ Favourite authors of James include the 'divine' Hippocrates, the 'excellent' author, Celsus, the 'incomparable', 'famous', 'memorable' and 'celebrated' physician, William Harvey, and the 'celebrated' Sylvaticus, Heister and anatomist Du Verney, the 'illustrious' Hoffman, Boyle and Boerhaave, and the 'accurate' Malpighi and Ruysch.

'The diffuseness of his language' is probably a fair criticism by the standards of today. The difficulty James has in sorting out a mass of 'contending opinions' is certainly a feature of his diffuseness. As noted by Mugglestone, dictionary-making is a process of interpreting as well as gathering information.¹⁰⁵ On the other hand, word definitions are given confidently, and with authority, something on which Johnson expressed a strong opinion.¹⁰⁶ James avoids being prescriptive. Like many specialists, James commonly believes the concept underlying a word to be more important than the word itself and then

¹⁰⁴ Richard Wendorf, 'Abandoning the Capital in Eighteenth-Century London' in, *Reading, Society and Politics in Early Modern England*, ed. by Kevin Sharpe, Steve Zwicker (Cambridge: Cambridge University Press, 2003), pp. 72-98.

¹⁰⁵ Lynda Mugglestone, 'Description and Prescription in Doictionaries', in, *The Oxford Handbook of Lexicography*, ed. by Philip Durkin (Oxford: Oxford University Press, 2016), p. 549.

¹⁰⁶ 'Why', says Boswell, 'every man who writes a dictionary must borrow.' 'No Sir.' says Johnson, 'that is not necessary.' 'Why' says Boswell, 'have not you a great deal in common with those who wrote before you.' 'Yes, sir' says Johnson, 'I have the words, but my business was not to make words but to explain them.'

omits a definition.¹⁰⁷ I assessed this by analysing ninety-one medical terms between ‘La’ and ‘Leaena’ in *A Medicinal Dictionary*. Sixty-five of the headwords are defined (thirty-nine of these with an explanation), and twenty-six are not defined but are given a synonym and often a cross-reference. Like Chambers, James employs cross-referencing to address the problem of integration of knowledge and the restrictions imposed by an alphabetical order.¹⁰⁸ A preferred variant is indicated by James by cross-referencing if multiple headwords had the same meaning. I assessed the frequency of cross-referencing between the headwords ‘La’ and ‘Leaena’, where as many as 26 out of 99 (26%) of the medical entries were cross-referenced. Most of the alternative headwords are correctly referenced back; for example ‘Antilyssus’, ‘Hydrophobia’, ‘Lyssa’ and ‘Lyssodectos’ for rabies (see ‘Hydrophobia’). Circulatory definitions are generally avoided by James, though I found occasional examples, such as ‘Cerion’ which James notes ‘also signifies that disorder which the Latins called Favus’ and under ‘Favus’ James records ‘the same as Cerion, which see’. Words with multiple meanings do not appear to pose problems for James.¹⁰⁹ Numbering is restricted to different plant varieties, and occasionally ‘Firstly’, ‘Secondly’ introduce text paragraphs. Etymology is given for words of Greek but not of Latin origin, James probably assuming readers would be familiar with the latter.¹¹⁰ Pronunciation is not covered and no guidance is given on how to use the dictionary.

¹⁰⁷ Sidney Landau, *Dictionaries: the Art and Craft of Lexicography*, 2nd edn (Cambridge: Cambridge University Press, 2001), p.163.

¹⁰⁸ The tension between integrated knowledge and efficient information retrieval, outlined by Chambers, persists today. Headrick, p. 150; pp. 160-167.

¹⁰⁹ Johnson’s attention to polysemy has been considered unusual, if not original. Allen Reddick, ‘Johnson and Richardson’ in, *The Oxford History of English Lexicography*, vol. I, ed. by Anthony P. Cowie (Oxford: Clarendon Press, 2008), p. 158.

¹¹⁰ Today etymology is one of the least important reasons (19%) for using a dictionary; students accessing meanings most commonly (85%). James, for example, in the 195 headwords ‘Ma’ to ‘Meatus’, 59 (30%) had Greek etymologies.

I have discussed the use of the vernacular, or living language, in medical dictionaries in Chapter 1. This marked a significant change in medical publishing in the eighteenth century and may be considered to be a feature of the Enlightenment. The vernacular was an important component of the spread of contemporary in contrast to classical knowledge. The use of the vernacular in other medical publications in Britain was well established in the eighteenth century, having been notoriously pioneered by Nicholas Culpepper with a translation of the pharmacopoeia of the Royal College of Physicians.¹¹¹ Lay readership of medical literature was also encouraged, resulting in an informed body of public opinion, and the educated becoming involved in what today is known as science.¹¹² Whether sickness was avoidable was debated, but conservation of health was certainly promoted.¹¹³ James's dictionary brought together a wide range of medical literature and contributed to such public education, even though it was priced at the elite end of the market.¹¹⁴ It must be admitted that the use of the vernacular by James is to some extent limited with omission of many simple words such as back, barren, death, ear, eye, fat, hip, health, heel, jaw, nose and tongue which are found under their Latin equivalents. This is helped by an extensive index at the end of volume 3 of the dictionary. Generally, the style used by James is largely formal but occasionally personal and so does not contribute specifically to a medical

¹¹¹ Clair J. Fowler, *Pharmacopoeia Londinensis 1618 and Its Descendants* (London: Royal College of Physicians, 2018).

¹¹² By such publications as George Cheyne's *An Essay of Health and Long Life* (1724), John Hill's *The Old Man's Guide to Health and Longer Life* (1750), John Wesley's *Primitive Physic* (1747), William Buchan's *Domestic Medicine* (1769), Francis Fuller's *Medicina Gymnastica* (1777), Joseph Fisher, *The Practice of Medicine Made Easy* (Booksellers in Great Britain & Ireland, 1785), William Samson, *Rational Physic* (London: J. Fisher, R. Davies, W. Crutwell, 1765), John Theobald, *Everyman his own Physician* 2nd edn (London: W. Griffin, 1764).

¹¹³ Larry Stewart, 'Science and the Eighteenth-Century Public' in, *The Enlightenment World*, ed. by Martin Fitzpatrick, Peter Jones, Christa Knellwolf, Iain McCalman (London: Routledge, 2004), pp. 234-246. Health conservation was based on air, food, drink, exercise, sleep, evacuations, retention of nutritive elements and psychological factors as discussed by Guenter B. Risse, 'Medicine in the Age of Enlightenment' in, *Medicine in Society*, ed. by Andrew Wear (Cambridge: Cambridge University Press, 1992), p. 150.

¹¹⁴ As noted by D'Alembert, co-author of *Encyclopédie*, 'The task of human sciences is to connect the pieces of thread into a single chain of truths'. Pagden, p. 125.

enlightenment. The clarity of word definitions, on the other hand, contributes to our understanding of eighteenth-century medicine.

Number of headwords and an example of an encyclopaedic entry

The distinctive number of headwords in James's dictionary has already been noted.¹¹⁵ More than a five-fold increase in the number of headwords occurs in the dictionary compared with previous medical dictionaries and this set a standard for the remainder of the century. The overall categories are conventional for a medical dictionary: 'Physic, surgery, anatomy, chemistry and botany in all their branches relative to medicine, together with a history of drugs; an account of their various preparations, combinations, and uses; and an introductory preface, tracing the progress of physic, and explaining the theories which have principally prevailed in all ages of the world.' These categories are comparable to the two previous medical dictionaries published in English by Blankaart and Quincy.¹¹⁶ Blankaart included 'the terms of anatomy, the names and causes of diseases, chirurgical instruments, and their use' and 'the names and virtues of medicinal plants, minerals, stones, gums, salts, earths etc., the method of choosing the best drugs, the terms of chemistry, and of the apothecary's art, the various forms of medicines, and the ways of compounding them'. Quincy was more restrained and was in line with the hard-word tradition.¹¹⁷ As might be expected, little difference was found in the overall categories chosen for inclusion by Blankaart and James. Counting the number of headwords fails to

¹¹⁵ After Harris's *Lexicon Technicum* (vol. 1, 1704; vol. 2, 1710) medical terms were published separately from other scientific terms, except in general language dictionaries. The evolution of medical dictionaries is considered in Chapter 1. An estimate of current medical terms, excluding chemical compounds and obsolete terms, is about 200,000 words.

¹¹⁶ Stephen Blankaart, *The Physical Dictionary* (London: J. Gellibrand, 1684); John Quincy, *Lexicon Physico-Medicum*, 1st edn (London: A. Bell, W. Taylor, J. Osborne, 1719)

¹¹⁷ '... the difficult terms used in the several branches of the profession, and in such parts of natural philosophy as are introductory thereto with an account of the things signified by such terms. Collected from the most eminent authors; and particularly those who have wrote upon mechanical principles.'

indicate the space occupied by these categories because of the long entries. Furthermore, non-medical aspects of plants, animals and inorganic materials may be considered unnecessary in a medical dictionary. Less than half of the entries for trees, shrubs and plants contain evidence of medical use, making the dictionary more a summary of all aspects of natural philosophy rather than those aspects limited to medicine.

The encyclopaedic entries in James's dictionary are another distinctive Enlightenment feature which I reviewed in Chapter 3. Encyclopaedic entries were common in most general and specialised dictionaries in the eighteenth century, including those of Blankaart and Quincy, not to mention Johnson's *A Dictionary of the English Language*.¹¹⁸ In order to illustrate how James constructed an encyclopaedic entry, I selected the headword 'Auris' as a representative example. For comparison, Blankaart gave a simple definition of the ear, defining the individual parts in nine lines; Quincy (under the headword 'ear') gave a detailed description of its anatomy in just over three pages (8vo). James's entry consists of nineteen folio pages of text and one plate. Like many entries in the dictionary, determining what James writes himself is not easy. The overall structure of the ear concludes with the anatomy of eighteen component parts. Up to this point, no authority is quoted. It would be reasonable for the reader to assume that James was referring to himself as the investigator when he wrote: 'In all the subjects which I have ever examined, I have found the semi-circular canals simply lined by a periosteum adhering to their inner surfaces, without any particular membranous bands.'¹¹⁹ It is not until the fifteenth page (Vol. 1 8X 2^v) that James

¹¹⁸ Jack Lynch, 'Johnson's Encyclopedia' in, *Anniversary Essays on Johnson's Dictionary*, ed. by Jack Lynch, Anne McDermott (Cambridge: Cambridge University Press, 2005), pp. 129-146.

¹¹⁹ *A Medicinal Dictionary*, Volume 1, (8U 2^r).

fully acknowledges Du Verney (1648-1730).¹²⁰ French surgery was respected at this time,¹²¹ and during the reign of Louis XIV (1643-1715), anatomical demonstrations became a public attraction in Paris.¹²² At the Jardin du Roi, the star performer was Joseph-Guichard Du Verney, who attracted hundreds to his anatomy lectures.¹²³ Du Verney's dramatic, rhetorical and anatomical skills made him the best-known man of science in Louis XIV's Paris. Du Verney's book has been credited as the first scientific account of the ear, containing sixteen copperplates.¹²⁴ Plates 5, 7, 9 and 10 in Du Verney (engraved by B. Cole) reappear as Figures 1-22 in Plate 18 of James's dictionary (re-engraved by Basire). After the anatomy of the ear, James comments 'As Winslow has not given the uses of the different parts of the ear already described, I shall supply this defect from Du Verney.' Unlike Quincy, James expands on the management of disorders of the ear with Du Verney's account of opening of abscesses, extraction of foreign bodies, wax or other obstructions, dealing with wounds of the external ear, and descriptions of ear lobe piercing and hearing aids. All these aspects have an amazingly modern resonance. However, James could not resist being critical of Du Verney in one respect, adding a personal comment: 'Though what Du Verney says of the distempers of the ear merits attention, I must appraise the reader, that a great deal of what he says with regard to fevers, is not to be depended on,

¹²⁰ Guichard J. Du Verney, *Traité de l'Organe de l'Ouïe* (A treatise of the Organ of Hearing), trans. by J. Marshall (London: S. Baker, 1737).

¹²¹ Philip Wilson, 'An Enlightenment Science? Surgery and the Royal Society' in, *Medicine in the Enlightenment*, ed. by Roy Porter (Amsterdam: Rodopi, 1995), p. 377.

¹²² Anita Guerrini, 'Theatrical Anatomy: Duverney in Paris, 1670-1720', *Endeavour*, 33 (2009), 7-11; Anita Guerrini, *The Courtiers' Anatomists: Animals and Humans in Louis XIV's Paris* (Chicago: Chicago University Press, 2015).

¹²³ One of the visitors in 1743-4 was William Hunter, who subsequently followed the model for his own anatomy course in London. John Wiltshire, *Samuel Johnson in the Medical World* (Cambridge: Cambridge University Press, 1991), p. 203.

¹²⁴ E. F. Stewart, 'J.G. Du Verney (1648-1730): Author of the First Scientific Account of the Ear', *Proceedings of the Royal Society of Medicine*, 58 (1965), 753-755.

being mere jargon'.¹²⁵ Nevertheless, James chose a good modern author for his main reference on the ear, using his skill in French unless he used Marshall's translation, and perhaps was attracted to a showman. It is an effective article on the subject and demonstrates James's commitment to 'modern' knowledge.

Biographies

The innovative biographies in the work may also be considered to be another encyclopaedic component. They were included as an item in the *Proposals for Printing a Medical Dictionary*. Biographies were not included in previous medical dictionaries or in Chambers's *Cyclopaedia*. They were not included in subsequent medical dictionaries of Quincy, Barrow and Hooper. The inclusion of biographies was continued in the medical dictionary by George Motherby (first edition 1775), who selected forty short biographies for his medical dictionary.¹²⁶ The *Encyclopédie* was initially planned without biographies but Louise de Jaucourt began inserting them in volume VI.¹²⁷ Yeo has suggested that the absence of biographies in dictionaries and encyclopaedias may have been due to alternative publications such as the 'historical' dictionary.¹²⁸ The majority of the biographies are found in the first volume of James's dictionary. A relative lack of biographies later in the dictionary, with only five in the third volume, has already been noted in Chapter 3. These biographies have received considerable attention in attempts to identify Johnson's

¹²⁵ The word 'jargon' was probably being used in the sense of talking unintelligently.

¹²⁶ George Motherby, *A New Medical Dictionary* (London: J. Johnson, 1775).

¹²⁷ Loveland, p.133; William Smellie, editor of the first edition of *Encyclopaedia Britannica*, refused to be editor of the second edition (1777-1784) because biographical articles were included. Today, biographical entries in medical dictionaries are generally limited to a name and a date.

¹²⁸ Richard Yeo, *Encyclopaedic Visions* (Cambridge: Cambridge University Press, 2001), pp. 17-18. Richard Yeo, 'Alphabetical Lives; Scientific Biography in Historical Dictionaries and Encyclopaedias' in, *Telling Lives in Science; Essays on Scientific Biography*, ed. by Michael Shortland, Richard Yeo (Cambridge: Cambridge University Press, 1996), pp. 139-170.

contributions.¹²⁹ I have already commented on the biography of Boerhaave which was based on Johnson's text published serially in *The Gentleman's Magazine* in 1739.

Johnson's other contributions are the lives of Alexander, Actuarius and Aegineta. These items are early examples of Johnson's interest in biography, something which he continued to develop. It is likely that Johnson and James influenced each other in this area. Detailed biographies of approximately sixty ancient Greek and Roman, Spanish/Arabian and Dutch physicians are included as headwords in the main text. It has not hitherto been recognised that at least 335 additional biographies are included within the texts of other headwords, especially under botany and chemistry (more than fifty each), and anatomy (175). Many of these are also mentioned in the preface, where the writings and teachings of the individuals are emphasised. Despite these numerous biographies there is a striking absence of biographical details of two respected seventeenth-century physicians, Thomas Sydenham (1624-1689) and Thomas Willis (1621-1689). These two physicians were also omitted by Motherby. I could find no obvious explanation for these omissions, especially as Johnson wrote a biography of Sydenham anonymously in *The Gentleman's Magazine* in 1742.¹³⁰ Furthermore, I was unable to find a biography of Sydenham under appropriate headwords in James's dictionary, such as 'Variolae'. Sydenham is mentioned twice in the preface, and quoted on twenty other occasions in the dictionary. One possible explanation is that

¹²⁹ Hazen attributed ten biographies, together with the biographical section contained in the 'Botany' section, to Johnson. Allen T. Hazen, *Samuel Johnson's Prefaces & Dedications* (Port Washington: Kennikat Press, 1973); Brack and Kaminski, in a detailed analysis of style and origins, suggested that Le Clerc's *Histoire*, John Freind's *History of Physic*, Fabricius's *Bibliotheca Graeca* and Joseph Pitton de Tournefort's *Institutiones Rei Herbariae* (for botany), provided most of the biographical information employed by James. Brack and Kaminski, pp. 378-40.

¹³⁰ Lawrence McHenry, 'Samuel Johnson's "The Life of Dr Sydenham"', *Medical History*, 8 (1964), pp. 181-186.

pressure on space in the third volume may have been critical, strictly curtailing the number of biographies and illustrating alphabetical discrimination.

Illustrations

The inclusion of illustrations is another Enlightenment feature of *A Medicinal Dictionary*. While the making of the plates is discussed in Chapter 3, the significance of the illustrations has not been assessed in detail previously. The Enlightenment was associated with an increase in technical words and objects, and illustrations became an essential part of the text. This was exemplified by Harris's *Lexicon Technicum*.¹³¹ Harris's use of illustrations probably provided a model for Chambers's *Cyclopaedia* (1728). Surprisingly, the first edition of Chambers was not lavishly illustrated, and of its twenty plates, there was one crowded plate each for the sections on natural history and on anatomy. Rees's expanded later edition contained 148 illustrations.¹³² Visualising knowledge stood at the center of the *Encyclopédie* project, which included the *Recueil de Planches* (1762-72), eleven volumes of plates with thousands of drawings that described trades and technology ranging from agriculture and mining to building and manufacturing.¹³³ Unlike Chambers, the plates were less crowded, and form a more attractive part of the text.¹³⁴ There were thirty-three plates on anatomy in the first volume of the *Encyclopédie*, thirty-nine plates on surgery in the third volume and an additional

¹³¹ Harris's engravings included illustrations of an air pump, a barometer, a double microscope and a Savery machine; under 'Hydrostatics' there were twenty diagrams of apparatus and navigational instruments, and many small drawings were incorporated within the text. The first successful steam pump was patented by Thomas Savery in 1698.

¹³² Ephraim Chambers, *Cyclopaedia*, rev. by Abraham Rees (London: James and John Knapton et al., 1788); Richard Yeo, *Encyclopaedic Visions* (Cambridge: Cambridge University Press, 2001), pp. 153-154.

¹³³ Charles Kostelnick, 'Visualizing Technology and Practical Knowledge in the *Encyclopédie*'s Plates: Rhetoric, Drawing Conventions, and Enlightenment Values', *History and Technology*, 28 (2012), 443-454.

¹³⁴ Stephen Werner, *Blueprint: A Study of Diderot and the Encyclopédie Plates* (Birmingham, Alabama: Summa, 1993), p. 71.

eight plates on surgery in a supplement.¹³⁵ Illustrations not only aid definitions, but also enhance retention of information. This is particularly true for anatomical subjects, that may be drawn using either an active posture or in a passive form in what has been described as interpretative illustrations.¹³⁶ Vesalius inspired active poses for many of his illustrations of the skeleton. The static portrayal of surgical instruments, however, can be a vivid reminder of surgical procedures, and the power behind instruments can either be imagined, or can be portrayed actively as a surgical procedure. Illustrated objects act as mediators in medicine between reader and author, with the operator and the patient involved in the operation.¹³⁷ This is well demonstrated in the section on amputations and in the way that James chooses to depict minor operations and bandaging (Figure 3.5). Some surgical instruments and operations which were copied from the publication by Lorenz Heister are shown in Figure 4.1.

¹³⁵ John Lough, 'Inventory of the Plates, With a Study of the Contributors to the *Encyclopédie*' in, *Inventory of Diderot's Encyclopédie*, ed. by Richard N. Schwab, Walter E. Rex (Oxford: Voltaire Foundation, 1984).

¹³⁶ Geoffrey Lapage, *Art and the Scientist* (Bristol: J. Wright & Sons, 1961), p. 3.

¹³⁷ Ludmilla Jordanova, *The Look of the Past: Visual and Material Evidence in Historical Practice* (Cambridge: Cambridge University Press, 2012), p. 5.

Figure 4.1: Surgery and Surgical Instruments



Consequently, illustrations have the ability to shock, but what shocked contemporary audiences may be very different from what makes modern audiences uneasy. Nevertheless I have taken the precaution of choosing some of the less graphic illustrations for the purpose of this thesis.

In comparison with other medical publications, some, but not all, eighteenth-century surgical texts were illustrated, and the example of Du Verney's book has already been discussed. Lorenz Heister's notable publication depicts not only instruments, but also their

uses.¹³⁸ Others, such as those by Samuel Sharp, Henri-François Le Dran and de la Vauguion depict instruments and appliances, but not surgical procedures.¹³⁹ Although William Smellie's midwifery book¹⁴⁰ did not initially contain illustrations, a set of anatomical tables were subsequently published in 1754. Surgical texts were illustrated by John Hunter,¹⁴¹ and his brother, William, produced the most famous illustrated obstetric book of the eighteenth century.¹⁴² In the preface Hunter noted that the art of engraving 'conveys clearer ideas of most natural objects, than word can express; makes stronger impressions upon the mind; and to every person conversant with the subject, gives an immediate comprehension of what it represents'. Hunter also issued a cautionary note that depictions could be misleading and 'do more mischief'. Although today some of these images may shock the reader with a sense of violation and mutilation, contemporary and subsequent comments were complimentary.¹⁴³ One of the practical purposes for including anatomical illustrations was to assist surgery and midwifery. Another purpose was knowledge of the venous system to indicate blood-letting points. Generally, non-surgical texts remained without illustrations until the twentieth century, and it has been argued that,

¹³⁸ Lorenz Heister, *A General System of Surgery*, 8th edn (London: Whiston et al., 1768).

¹³⁹ Samuel Sharp, *A Treatise on the Operations of Surgery* (London: Brotherton et al., 1740); Henri-François Le Dran, *Observations in Surgery*, trans. by J. S. Surgeon (London: J. Hodges, 1739); M. de la Vauguion, *A Compleat Body of Chirurgical Operations* (London: Bonwick et al., 1707).

¹⁴⁰ William Smellie, *A Treatise on the Theory and Practice of Midwifery* (London: D. Wilson, T. Durham, 1752-1766).

¹⁴¹ John Hunter, *A Natural History of the Human Teeth* (London: J. Johnson, 1778); *A Treatise on the Blood, Inflammation and Gun-Shot Wounds* (London: J. Richardson for G. Nicol, 1794).

¹⁴² William Hunter, *Anatomy of the Human Gravid Uterus Exhibited in Figures* (Birmingham: Baskerville, 1774).

¹⁴³ Ludmilla Jordanova, 'Gender, Generation and Science' in, *William Hunter and the Eighteenth-Century Medical World*, ed. by W.F. Bynum, Roy Porter (Cambridge: Cambridge University Press, 1985), pp. 385-412 (p. 386). The effect of Johan Zoffany's portrait of Dr William Hunter at the Royal Academy has been described as literally providing enlightenment in the Age of Enlightenment. Wendy Moore, 'The Anatomy Professors', *Lancet*, 303 (2019), 867. Samuel F. Simmons, *An Account of the Life and Writings of the Late William Hunter* (London: W. Richardson, 1783): 'The plates are not all of them equally interesting or beautiful, but I believe their accuracy has never been disputed.' R. Hingston Fox, *William Hunter* (London: H. K. Lewis, 1901), p. 43: 'The delicacy and softness . . . bespeak a labour of love, in which neither time nor cost were an object . . .'

for the lay person, the last two centuries of Western modern medicine have been more verbal and textual than visual, in contrast to the more remote past.¹⁴⁴

The illustrations in eighteenth-century medical dictionaries published in London, together with Chambers's *Cyclopaedia*, are shown in my Table 4.1, demonstrating how much James's dictionary differs from the others. Also, for comparison, Bailey's general language dictionary, *Dictionarium Britannicum* (2nd edn 1736), contained 500 woodcuts within the text and one plate.

Table 4.1: Medical dictionaries published in London in the eighteenth century

Author	Date published	No. headwords (approximately)	Book size	Illustrations
Blankaart	1 st edn 1684	2,500	8vo	none
Blankaart	7 th edn 1726	6,200	8vo	one table of symbols
Quincy	1 st edn 1719	3,010	8vo	33 woodcut diagrams; 11 tables; tailpieces at end of each letter; initial woodcut
Quincy	5th edn 1736	3,270	8vo	32 woodcut diagrams; tables; tailpieces at end of each letter; initial woodcut
Chambers	1 st edn 1728	20,000	folio	20 plates near key headword
James	1743-45	14,330	folio	36 plates at end of vols. 1&2
Barrow	1749	15,500	8vo	none
Motherby	1775	14,000	folio	32 plates at end
Hooper	1798	2,400	12vo	none

This table shows that James breaks new ground by including a generous number of copperplate engravings, the production of which I have analysed in Chapter 3. For comparison with James's dictionary, Quincy included thirty-three simple woodcuts in his

¹⁴⁴ Ann G. Carmichael, Richard M. Ratzan, eds., *Medicine; a Treasury of Art and Literature* (New York: Hugh Lauter Levin Associates, 1991), p. 12.

medical dictionary, which were diagrams relating to physical properties. The diagrams in the second and fifth editions of Quincy were the same; the only difference noted was the insertion of a woodcut of a rural scene with two figures at the beginning of the fifth edition. Of the total number of thirty-six plates in *A Medicinal Dictionary*, seven are single folio pages and twenty-nine double folio page sizes and folded into the book. None of the illustrations are coloured. The majority of the illustrations relate to anatomy, surgery, surgical instruments, dressings and appliances, obstetrics, fractures and dislocations, weights and measures and some findings from microscopes. The one botanical illustration shows the leaves, seeds and whole plant of *Asa foetida*.¹⁴⁵ Illustrations of *materia medica* and chemistry are not included and there are no engraved ornaments or tailpieces in the dictionary. Medical conditions such as, for example, rashes, tuberculosis, Hippocratic facies and arthritis, are not illustrated, a common phenomenon in those contemporary texts describing non-surgical conditions. This is somewhat surprising considering the wide range of medical conditions and therapies portrayed in medieval manuscripts, such as remedies for headache and insomnia, cautery points and cauterizing, venesection, cupping and leeching, taking the pulse, treatments of scrophula, ointment for arthritis, antidotes for poison, and the cure of lunacy.¹⁴⁶ Even 150 years later, William Osler's *The Principles and Practice of Medicine* contained few diagrams and charts, and no disease illustrations.

Illustrations of gender-neutral topics are depicted through male subjects. For example, amputations, surgical dressings, the athletic poses for the musculature, and one illustration of an open abdomen, are all using male subjects. Medical procedures are mostly portrayed

¹⁴⁵ This plant has many medical uses dating back to Avicenna and Dioscorides and remains in use in traditional medicines. The reason why this plant was chosen for illustration may have been because of a dispute outlined by James about whether *Asa foetida* was the same as *silphium*.

¹⁴⁶ Loren MacKinney, *Medical Illustrations in Medieval Manuscripts* (London: Wellcome Historical Medical Library, 1965).

taking place by male surgeons on male patients, characteristic of the time.¹⁴⁷ The illustrations in the dictionary, however, also include children, breast operations and the female genital tract. Active fetuses in-utero and methods of clinical examination by the midwife are copied from Lorenz Heister.¹⁴⁸ The contents of the illustrations and the many sources used are listed by James in a section entitled ‘Explications’ in the pages immediately preceding the illustrations (eleven pages of ‘explication’ in both volumes 1 and 3). Cross-referencing to the relevant headword in the dictionary is not used within the ‘Explications’. Hence the importance in having descriptions of figures contained within the text.¹⁴⁹ In summary, the illustrations have not been fully appreciated in the past by lexicographers even though medical illustrations have been noted to be worth a thousand words.¹⁵⁰ The inclusion of many high quality illustrations in the dictionary may be regarded as a significant aspect of a medical enlightenment and James’s dictionary influenced subsequent dictionaries and encyclopaedias.

Magic, superstition, weights and measures, alchemy and astrology

I will now consider other aspects of the enlightenment. The ways in which topics such as magic, superstition, weights and measures, alchemy and astrology are discussed has often been taken as an index of enlightened features. Putting this in a social context, it should be noted that in Britain it was not until 1736 that more humane legislation on witchcraft was passed, though clearly still recognised with a maximum sentence of one

¹⁴⁷ Ludmilla Jordanova, *Sexual Visions* (New York: Harvester Wheatsheaf, 1989), p. 580.

¹⁴⁸ Lorenz Heister, *A General System of Surgery* (London: W. Innys et al., 1743).

¹⁴⁹ Ludmilla Jordanova, *The Look of the Past* (Cambridge: Cambridge University Press, 2012), p. 19.

¹⁵⁰ Elizabeth L.Furdell, *Publishing and Medicine in Early Modern England* (Rochester: University of Rochester Press, 2002), pp. 155-187.

year imprisonment.¹⁵¹ In general, James appears to dismiss magic and superstitious beliefs, as might be expected in an educated physician and the *Proposals* for James's dictionary clearly reflect his concerns.

That almost every family is furnished with general axioms of physic, to which every case proves an exception; and with universal remedies, by which no distemper was ever cured; that superstition, prejudice, ignorance and mistake, have assigned to every plant, and every medicine, qualities widely different from those which nature has allotted them; and that credulity, obstinancy and folly, are hourly making havock to the world; is obvious to the slightest observation.

'Cabala/Calbala' is defined as mysteries or magical knowledge, to which James adds a comment: 'In this Paracelsus seems to repose a great deal of faith'. Again, 'Litteristum', an obscure word used by Paracelsus, 'which seems to import a magical cure or charm for a particular fever'.¹⁵² Similarly, 'Caballi/Cabales' is defined as incorporeal beings of astral bodies of men, with a similar dismissive comment: 'As these probably only exist in the imaginations of the mad and the whimsical and as the doctrine which depends upon a superstition of their existence is highly extravagant, a father [sic] account of them would be superfluous.' Some word definitions are based on superstitions, such as 'Lunaticus', a madness governed by the moon but without any comment on validity. Another example is 'Amuleta' which James described 'ridiculous attempts to prevent diseases and restore health', and 'illicit methods of procuring health, which were founded on a false religion, and supported by the credulity of a giddy and unthinking multitude'. 'Austromantia' is described as 'a pretending to foretell events from superstitious observation of the winds'. James doubts the existence of 'Bufonites' (toad-stone) and comments 'I cannot forbear

¹⁵¹ Interestingly, the 1736 legislation was itself repealed in the 1950/1 session of Parliament with the intention of preventing possible prosecutions of well-meaning spiritualists. Ian Bostridge, *Witchcraft and Its Transformations, c. 1650-c.1750* (Oxford: clarendon Press, 1997).

¹⁵² The complex nature of Paracelsus and his teaching has been reviewed. Peter Elmer, 'Sanitising Paracelsus: the Paracelsian Revival in Europe, 1560-1640' in Peter Elmer and Ole Peter Grell, eds. *Health, Disease and Society in Europe 1500-1800* (Manchester: Manchester University Press, 2004), pp. 113-118.

looking at these accounts as to many lies too palpable and glaring to deserve our attention, much less our assent'. Similarly, in describing 'Catharmos' as 'a cure of a disorder by superstitious ceremonies or sacrifices', James gives an example: 'The cure of the King's Evil by the Royal Touch, if there was such a thing, might be said to be performed by a catharmos.' The last Royal Touch in London was in 1712 and Johnson was one of the many brought to Queen Anne. 'Devotatus' is impotence by witchcraft. These personal comments made by James may be considered enlightened, but, as noted by Hester Thrale in 1790, in real life there was no such thing as superstition being driven out of the world, it was only driven out of books and talk.¹⁵³

Older weights and measures were at this time disappearing from general dictionaries. James lists over sixty headwords describing weights and measures in his dictionary.¹⁵⁴ These entries are representative of enlightenment works in that James, like Quincy, does not include old terms such as 'cark', or 'geld', but many old historical terms from classic literature are found in the dictionary. The primary purpose of these entries, and the accompanying illustrations, was probably to help understand classical medical literature, and provide guidance for *materia medica*. For example, under the headword 'Pondo', James wrote

As it is necessary to be acquainted with the weights used by different nations, at different times, in order to understand their practice, I have given tables of the principal antient [sic] and modern weights; and, after these, a table of their measures.

¹⁵³ Roy Porter, *Enlightenment; Britain and the Creation of the Modern World* (London: Allen Lane, 2000), p. 229.

¹⁵⁴ Surprisingly, Quincy, an apothecary, gave similar, rather limited, definitions of weights and measures in his medical dictionary.

Pounds and ounces are described under ‘Libra’. James relies heavily on Arbuthnot for information on weights and measures, but also notes other authors.¹⁵⁵ The majority of the weights and measures are simple definitions.¹⁵⁶ At the end of volume 3, there are three finely-engraved plates. Table LX gives the subdivisions of the Roman pound and the Attick measures of capacity for things liquid and things dry. Table LXI gives the Roman-English measures of capacity of things liquid and things dry, and an explanation of some of the more usual symbols for weights and measures used by Greek and Roman authors. For example, ‘V’ stood for Septunx, i.e. seven twelfths of a libra.¹⁵⁷ Table LXII gives the most ancient and less ancient Greek and Roman weights, the ancient Arabian weights, and French weights in terms of English Troy weights (ounces, penny weights and grains). The discussion of weights and measures by James suggests he remained concerned about the interpretation of classic literature and so their inclusion in the dictionary need not be considered to be unenlightened.

Alchemy was largely ignored, rather than attacked, in the eighteenth century, and its reputation may have faded for being associated with illusion and deceit.¹⁵⁸ The dictionary shows that James was firmly against alchemy, but admits it has contributed to knowledge, again suggesting that the Enlightenment was shaping his work. Under ‘Chemia’, James writes that the conversion of one metal into another is attended ‘with as much difficulty as the converting a thistle into a cedar’. Similarly, in the preface

¹⁵⁵ John Arbuthnot, *Tables of Ancient Coins, Weights and Measures* (London: J. Tonson, 1727).

¹⁵⁶ Under ‘Denarius’, James quoted many authors and their interpretations of its weight (one seventh of a Roman Avoirdupois ounce), depending on the definition of an ounce.

¹⁵⁷ The word Septunx does not occur in *A Medicinal Dictionary*; today the word remains in use in the description of an insect, *Prodigiaspis septunx*.

¹⁵⁸ Maurice Crosland, ‘The Chemical Revolution of the Eighteenth Century and the Eclipse of Alchemy in the “Age of Enlightenment”’ in, *Alchemy Revisited*, ed. Z.R.W.M. von Martels (Leiden: E.J. Brill, 1990), pp. 67-70.

Many medicinal discoveries may have been brought about by inspiration . . . the most important remedies have been discovered by savages and madmen . . . by the latter I mean the alchemists who in their pursuits after the transmutation of metals, have blundered upon some medicines of efficacy.

In the dictionary, I found that the headwords defining terms used in alchemy are mostly accompanied by an adverse comment such as under ‘Adjustio’ he writes ‘explained by Avicena with the usual obscurity of the alchemists, Castellus has taken no care to render it more intelligible’, and under ‘Aniadon’ he writes ‘in the jargon of the alchemists’, and under ‘Uredines’ he writes ‘in the alchemistical cant, are the virtues of metals communicated to them from the sun’. At least seven headwords are descriptions of a philosopher’s stone.

Astrology was another subject that was losing ground in the Enlightenment, despite having a long association with herbals and active promotion by Nicholas Culpepper (1616-1654), together with the continuing popularity of almanacs.¹⁵⁹ More copies of almanacs were sold during the eighteenth century than all other types of publications put together.¹⁶⁰ Earlier in the eighteenth century, John Harris had commented on astrology as a ‘ridiculous piece of foolery’.¹⁶¹ Under ‘Astronomia’ James admits that the stars are ‘removed at such an immense distance from our globe, that the very light they diffuse can have no influence upon it, much less that they themselves can produce and effects upon such bodies as are contained in it.’ ‘Those trifling mortals, who apply their minds to this diminutive study, lose their labour in an egregious manner, since they cultivate and adore a science (pardon

¹⁵⁹ Louise H. Curth, *English Almanac, Astrology and Popular Medicine, 1550-1700* (Manchester: Manchester University Press, 2007).

¹⁶⁰ James Raven, *Publishing Business in Eighteenth-Century England* (Woodbridge: Boydell Press, 2014), pp. 201-203.

¹⁶¹ Lael E. Bradshaw, ‘John Harris’s “*Lexicon Technicum*” ’ in, *Ashgate Critical Essays on Early English Lexicographers*, vol. V, *The Eighteenth Century*, ed. by Anne C. McDermott (Farnham: Ashgate, 2012), p. 237.

the name) which has neither speculative truth, nor use in human life, to recommend it.'

Furthermore, he writes 'No less intolerable is the insolence of those who distinguish days into lucky and unlucky, and with that now compose annual calendars.'

However, some importance is given by James to astrology through variations in the weather. In the eighteenth century, it was believed that the British climate affected human health, emotions and welfare, but its unpredictability made it difficult to define the relationship precisely. The British national character was considered to have benefited from the stimulus of frequent atmospheric changes, and Arbuthnot, for example, believed that rapid changes in air temperature and pressure provided people with a 'stimulatory sort of exercise'.¹⁶² Good or bad weather was not regarded as a personal sign of divine intervention, but rather evidence of general providence, perhaps influenced by the stars.¹⁶³ Depression and melancholy were thought to be caused by the effects of the atmosphere on the body, and good health came from the right balance of air quality, exercise, sleep, nutrition, evacuation and passions. James is ambivalent about this as he believed that stars influenced the air and atmosphere, and hence our bodies and minds, 'a point so clear and undeniable, that it stands in need of no proof'. It is acknowledged by James that 'many distempers are said to be exasperated, as madness, the epilepsy, and disorders arising from worms' by a full moon.¹⁶⁴ However, he was equally dogmatic in noting that in urgent medical cases neither the position of the stars, nor the state of the atmosphere should be regarded. He attempts to summarise his own opinions in two whole pages on astrology, ending with an attribution to Hoffmann.

¹⁶² John Arbuthnot, *An Essay Concerning the Effects of Air on Human Bodies* (London: J. & R. Tonson, S. Draper, 1751), p. 151.

¹⁶³ Jan Golinski, *British Weather and the Climate of Enlightenment* (Chicago: University of Chicago Press, 2007).

¹⁶⁴ Under 'Plenilunum' which is defined as the full moon.

Having thus given an account of the sentiments of some of the most learned of the ancient physicians, with regard to the influence of the stars on the human body, it now remains, that I give my own opinion in this point. And, to be as brief as possible, I declare at once, that I am for keeping a due and proper medium; I neither attribute too much to the stars, nor absolutely deny their influence and operations, but am for making a due and just distinction between rational and well-founded astronomy, and that which is superstitious, fabulous and empirical.

The entry on air in *A Medicinal Dictionary* is twenty-two pages long with little on medical matters in the first half.¹⁶⁵ The quotations appear to be from Boerhaave, on the importance of air for fire, vitality, growth, vigour and action. The reference by James to Hippocrates's *Airs, Waters and Places* in the preface stresses his belief in the importance of environmental factors and lifestyle in causing disease.

His work, *De Aere, Locis et Aquis*, is such a masterpiece, that it may be said not only to have laid the foundation, but to have carried physic almost to the same degree of perfection with which it now shines. Here we have the venerable old man accurately describing epidemical disorders, and sagaciously informing us, that we are not only to have a regard to the differences of age, sex, and constitution, but also to the exercise, the customs, and the method of life, used by the patient; and that an account of the state of the air alone is not sufficient for accounting why some should be more remarkably affected with epidemical disorders than others.

Health and sickness are likewise influenced by regimen, and all the several accidents which occur during the whole course of a man's life. As it is so, we must readily perceive, that health and diseases depend in general on the following causes; the air, what we eat, what we drink, sleep and watching, exercise and rest, retention and excretion, and, last of all, on the passions of the mind.

Interestingly, despite this affirmation, James rarely quotes contemporary authors such as John Arbuthnot (1667-1735) and George Cheyne (1672-1743) who were very much concerned with the impact of the environment on health.¹⁶⁶ The particular value of horse-riding for obtaining exercise is, however, stressed by James and has been referred to in Chapter 2. In *A Medicinal Dictionary* references to exercise are broad, with general advice

¹⁶⁵ 'Aer' (aerologie, the science of the air).

¹⁶⁶ John Arbuthnot, *An Essay Concerning the Nature of Aliments* (London: J. Tonson, 1731); George Cheyne, *An Essay of Health and Long Life* (London: G. Strahan, J. Leaks, 1724) and other publications.

following Francis Fuller (1670-1706)¹⁶⁷ and Cheyne.¹⁶⁸ Exercise, both maintaining health and assisting recovery from illness, are well described. A common theme in the dictionary is the importance of increasing the motion of solids and fluids by ‘frictions and gestations’. James also considers fresh air as best for exercise and that air on high mountains and in hilly countries when no wind stirs is more wholesome and good for asthmatic and consumptive people.

One detailed quotation from Cheyne, unrelated to the environment, is of interest. This occurs under ‘Spiritus’, with a discussion of the functions of the brain, where James describes the brain as a collection of extremely minute glands with fluid connections. The views of Cheyne about ‘animal spirits being the most active and volatile kind of fluid imaginable’ are accepted by James, and he notes ‘may not the sentient principle have its seat in the same place in the brain, where the nerves terminate, like the musician shut up in his organ room?’ The headword ‘Spiritus’ concludes:

It should seem that whatever lays any stress upon the precarious doctrines of animal spirits in accounting for distempers, or investigating remedies, is either weak enough to be imposed upon himself, or malicious enough to amuse others.

There was no hint of the idea of electrical transmission of information to account for the speed of transfer of information from the brain. James complimented Cheyne as ‘a gentleman who had candour enough to own the errors of his profession, and spirit enough to think for himself . . .’

In summary, my detailed assessment of those parts of James’s dictionary in respect of understandings of astrology, health and wellbeing shows evidence of a clear impact of Enlightenment thought, particularly in terms of the effects of environmental factors in

¹⁶⁷ Francis Fuller, *Medicina Gymnastica* (London: R. Knaplock, 1704), 9th edn (1777).

¹⁶⁸ George Cheyne, *Essay of Health and Long Life* (London and Bath: George Strahan and J. Leake, 1724).

preventing and managing disease. However, in keeping with a broader eighteenth-century context, James shows continued, if limited, reliance on classical (especially Hippocrates) and Renaissance authors. He combined faithfulness to some of the older Galenic, as well as newer iatro-mechanical, medicine. His work reflects the increasingly questioned ideas based on magic and the supernatural. In these ways his work shows the range of respectable, enlightened eighteenth-century medical knowledge.

Contemporary knowledge

I will now consider whether the dictionary includes contemporary knowledge which may be considered a feature of the Enlightenment, bearing in mind that James started to compile the dictionary in 1741. The various critiques of James mention his scholarliness and the inclusion of many references to older texts, so it is important to consider whether James also incorporates modern ideas. Carey McIntosh has summarised the working methods of dictionary writers, cautioning that ‘eighteenth-century lexicographers were still learning their trade, and perhaps we should not expect them to have been acutely sensitive to current intellectual trends. The commercial advantages of keeping very much abreast of new words and idioms were slight’.¹⁶⁹ The *Proposals* for the dictionary claim it would be comprehensive, rather than up to date.

The diligence with which we have consulted and compared them [previous writers], will probably make them less necessary to future students, as we have not only transfused all their collections into our work, but added many terms hitherto omitted; so that what is not to be found in this dictionary, it will be generally in vain to seek in any other; but what is wanting in others, may be more successfully inquired for in this.

¹⁶⁹ Carey McIntosh, ‘Eighteenth-Century English Dictionaries and the Enlightenment’ in, *The Yearbook of English Studies*, vol. XXVIII, *Eighteenth-Century Lexis and Lexicography* (1998), pp. 3-18, (p. 4). ‘Eighteenth-Century English Dictionaries and the Enlightenment’ in, *Ashgate Critical Essays on Early English Lexicographers*, vol. V, *The Eighteenth Century* (Farnham: Ashgate, 2012), pp. 4-8.

The main references within the dictionary are to seventeenth- and eighteenth-century authors from Britain and continental Europe. The more recent references are to Albinus (1741) and Dale (1739). An impressive list of 653 surgical authors and 1,130 publications appears under the headword ‘Chirurgia’.¹⁷⁰ The list is taken principally from Lorenz Heister.¹⁷¹ The latest references are to Samuel Sharp (1739) and William Cheselden (1740), suggesting that James added to Heister’s list. James also added a few editorial comments. Publications are not included in the English edition of Heister’s work in 1757, in which a list of authors is given with their subjects, but not with specific publications.¹⁷² In James’s list, 297 of the authors have 549 publications dating to the eighteenth century and reference is made to many of them.¹⁷³ Under the headword ‘Anatome’, I found that twenty-eight of his cited authors were published in the eighteenth century, with references as recent as Albinus (1741), Cheselden (1740), Hovius (1740) and Petite (1741). Likewise, under ‘Chemia’ a similar number of eighteenth-century publications are listed, with several references as recent as 1736. Under ‘Botany’ I have already noted that James relies chiefly on Joseph Pitton de Tournefort (1656-1708) and his classification of plants based on flowers and fruits, which was different from that of John Ray (1627-1705) and Carl Linnaeus (1707-1758). It is of interest that James refers to Linnaeus under ‘Botany’.

¹⁷⁰ This did not include classical authors, for whom cross-references are given to their biographical note within the dictionary.

¹⁷¹ Lorenz Heister (1683-1758), a German anatomist, surgeon and botanist, was used extensively by James for modern surgical information. See fig. 4.1.

¹⁷² Laurence Heister, *A General System of Surgery* (London: W. Innys et al., 1757), pp. 6-10.

¹⁷³ For example, British authors such as Cheselden, Douglas, Sharp, Wiseman and Woolhouse; French authors such as Belloste, Brisseau, Dionis, Le Dran, Garengot, Mauriceau, De La Motte, Petite and Yves; Italian authors such as Alpinus and Severinus; German authors such as Hoffmann and Heister; Swiss such as Le Clerc and Swedish such as Hoorn.

Articles from the *Edinburgh Medical Essays and Observations* (1733-38) are often quoted by James.¹⁷⁴ Many journal references are used, in particular from *Mémoires de l'Académie Royale des Sciences* up to 1736, and *Philosophical Transactions* (not usually dated). The dates of authors quoted under the entry 'Botany' are similar, showing 21 from the sixteenth century, 81 from the seventeenth, and 35 from the eighteenth. The dates of publication within the eighteenth century are mostly before 1729, but include eight later publications, one of the latest being Samuel Dale (1737). Electricity was a new topic that was beginning to be discussed at the time of the writing of the dictionary and its discovery and development was a feature of the Enlightenment.¹⁷⁵ The concept of 'subtle fluids' to include heat, light and electricity was developed.¹⁷⁶ James refers to electrum under 'Ambra', but not to electricity. At the end of the preface, James notes a missing reference to Jannes Rieger (1742) which I have already noted in Chapter 3. Some new words are introduced by James and he has been credited with the literal usage of the phrase 'hair of the dog' in his *A Treatise on Canine Madness*, 1760. The first recorded use of a term is noted in eight of the 31 citations from the dictionary.¹⁷⁷ In summary, my analysis shows that James strove to include a wide range of modern authors and ideas, and was well conversant with current literature.

¹⁷⁴ The Society for the Improvement of Medical Knowledge published five volumes of medical essays 1733-1744, which were translated into several languages.

¹⁷⁵ John T. Desaguliers, *A Dissertation Concerning Electricity* (London: W. Inny, T. Longman, 1742).

¹⁷⁶ Thomas L. Hankins, *Science and the Enlightenment* (Cambridge: Cambridge University Press, 1985), pp. 46-80.

¹⁷⁷ Of these first citations, acne, ankyloglossia, conceptus, stasis and (epi)staxis remain in use today. As James was compiling from existing literature it would be expected that some new words would be introduced.

Use and influence of *A Medicinal Dictionary*

I will consider the use and influence of the dictionary within the context of a medical enlightenment although records of actual use of James's dictionary in the eighteenth century are difficult to find. Mark Twain's comments indicate that it was still an active text at the time of the American Civil War (1861-1865). *A Medicinal Dictionary* 'up to its last free day was trusted and believed in, and its devastating advice taken, as was shown by notes inserted between its leaves. But our troops captured it and brought it home and it has been out of business since'.¹⁷⁸ Public medical libraries were not established in James's lifetime and the dictionary may have been too expensive for a coffeehouse library.¹⁷⁹ On the other hand, personal ownership may give some indication of use.¹⁸⁰ Richard Mead, to whom the dictionary was dedicated, possessed at least volume 1 of the dictionary, which was offered for sale in 1755, item 639, for £1.-5s.¹⁸¹ Dr Robert Watt, a physician and teacher in Glasgow, developed an extensive library and published a catalogue of the best authors that could be borrowed by students.¹⁸² The catalogue, published in 1812, contained James's *Modern Practice of Physic* by Boerhaave and Hoffman (1746) and *On the Pressages of Life and Death in Diseases* (1746), but not his dictionary. The only medical dictionary listed was that more recently published by Robert Hooper (1801).

Another approach which I have pursued in considering the use of the dictionary is to study catalogues of book sales issued by booksellers in the eighteenth century. These

¹⁷⁸ Twain, *A Majestic Fossil*, p. 439.

¹⁷⁹ Markman Ellis, 'Coffee House Libraries', *The Library*, 10 (2009), 3-40.

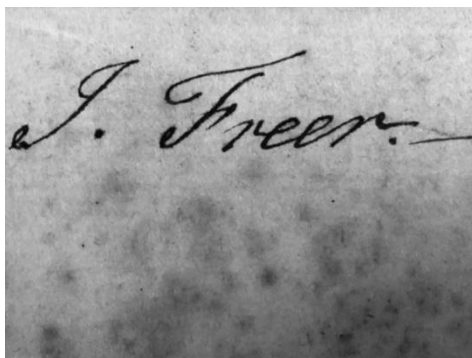
¹⁸⁰ Copies are owned by the Royal Colleges of Physicians of London and Edinburgh, the Royal College of Surgeons of London, and the Hunterian Collection in Glasgow, but no information given when these copies were obtained. The Hunterian copy could have been purchased by William Hunter (1718-1783), a contemporary of James in London and a keen book collector.

¹⁸¹ Samuel Baker, *Bibliotheca Meadiana* (London: 1755).

¹⁸² Francesco Cordasco, *A Bibliography of Robert Watt, MD* (New York: W.F. Kelleher, 1950), pp. 14-16.

first. He was one of the first surgeons to be appointed to The General Hospital, Birmingham, newly opened in 1779.

Figure 4.2: Signature of John Freer

A black and white photograph of a handwritten signature in cursive script. The signature reads "J. Freer." and is written on a piece of aged, slightly textured paper.

Personal copy of *A Medicinal Dictionary*

The coat of arms of George Freer (1770-1823) appears next. George succeeded his brother, John, as a surgeon at the same hospital.¹⁸⁵

Figure 4.3: Coat of arms of George Freer

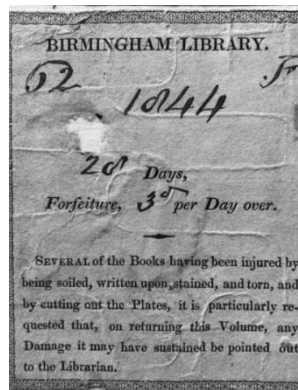


Personal copy of *A Medicinal Dictionary*

At some later date, the three volumes of the dictionary came into the Birmingham Library where it could be borrowed for up to twenty days with a forfeiture of 3d. per day over.

¹⁸⁵ George Freer developed a national reputation for work on aneurysms, was the first British surgeon to construct an intestinal stoma, and noted for the founding of the Orthopaedic Hospital in Birmingham. Jonathan Reinartz, *Health Care in Birmingham* (Woodbridge: Boydell Press, 2009), p. 34.

Figure 4.4: Birmingham Library Notice



Personal copy of *A Medicinal Dictionary*

Subsequent ownership passed to the Birmingham Medical Institute, founded in 1875 on the initiative of another local surgeon, Sampson Gamgee (1828-1886).¹⁸⁶ The Institute provided an important medical library in the West Midlands, based on an original benefaction of Dr Fabian Evans, physician to The General Hospital, with books from the Birmingham Library and the Midland Medical Society. Reduced activities of the Birmingham Medical Institute led to the sale of its library by public auction in 2012. My copy has no marginalia to help indicate its use.

Influence of *A Medicinal Dictionary* on other dictionaries

Considering the influence of the dictionary on other publications allows us to measure the enlightened or ‘modern’ features of the work, despite the cautionary comment that dictionaries ‘never were and never will be’ new.¹⁸⁷ The use that James made of Blankaart’s and other dictionaries to compile a list of headwords has been analysed in Chapter 3. As might be expected, James’s dictionary affected subsequent dictionaries and encyclopaedias

¹⁸⁶ Gamgee is best known for pioneering the use of dry, adsorbent dressing consisting of a sandwich of absorbent cotton wool between absorbent gauze.

¹⁸⁷ Sidney Landau, *Dictionaries: the Art and Craft of Lexicography*, 2nd edn (Cambridge: Cambridge University Press, 2001), p. 43.

in the Enlightenment, although authors in the eighteenth century did not always acknowledge their debt to previous publications. A notable exception was Blankaart, who included a ‘catalogue of the authors which have been consulted and made use of in this dictionary’, with 170 authors named.¹⁸⁸ The preface to Barrow’s *Dictionarium Medicum Universale* (1749) included one reference to James. ‘Though there are several Medicinal Dictionaries already extant, yet as none of them (except that elaborate work published by Dr. James in three volumes folio) have explained the terms used by both the ancients and moderns . . .’. Little is known about John Barrow (fl.1735-1774) who is a shadowy author who taught mathematics, and is best remembered for a practical handbook of navigation and an anonymous geographical dictionary. The title page of his medical dictionary stated he was a chymist [sic]. He was not a medical person and it is not known where he lived and worked, or if he had any contact with James. Barrow’s dictionary may be considered to be a shortened version of James’s, but no acknowledgement was given and a different publisher used. Such a significant reduction in length by a different author could have given grounds for accusations of plagiarism, and questions as to whether the publication was a separate book under the Copyright Act of 1710.

I examined the effect of James’s dictionary on other medical dictionaries in the eighteenth century, by comparing the first thirty headwords occurring in the letters ‘A’ to ‘E’ in the three dictionaries written after James’s (Barrow¹⁸⁹, Motherby¹⁹⁰ and Hooper¹⁹¹). The number of headwords in Barrow and Motherby are similar to James, whereas in Hooper the numbers are significantly fewer, and not comparable. Barrow’s encyclopaedic

¹⁸⁸ Stephen Blankaart, *A Physical Dictionary* (London: John Gellibrand, 1684), p. 159.

¹⁸⁹ John Barrow, *Dictionarium Medicum Universale* (London: T. Longman, A. Millar, 1749).

¹⁹⁰ George Motherby, *A New Medical Dictionary* (London: J. Johnson, 1775).

¹⁹¹ Robert Hooper, *A Compendious Medical Dictionary* (London: Murray & Highley, 1798).

entries are short, and only exceptionally extend beyond two pages. Motherby's encyclopaedic entries are generally less than four pages long and Hooper's are only up to a page in length. The text used by Hooper is largely based on Quincy and therefore different from James. As many as 64% of the entries in Barrow are derived from James compared with 27% of the entries in Motherby. Although not strictly comparable, William Turton's glossary may have used James's list of headwords as under the letter 'F' as many as 147 of the 259 entries (56.7%) were common to James, though Turton himself claimed that his authorities were 'chiefly derived from Blanchard, Castellus, Minshew, Schindler and Golius'.¹⁹² Similarities could have arisen either by simply copying James's distinctive definitions or, less likely, by reference to a common source. Motherby's dictionary was the natural successor to *A Medicinal Dictionary*.¹⁹³ Motherby addressed his work to non-professionals, a feature of a medical enlightenment, and, like James, appended an English-Latin index to the work.¹⁹⁴ Analysis of Motherby's references showed a similar distribution of dates of publication as cited by James, but with the addition of later authors such as John Hunter, William Lewis, William Smellie, William Pitcairn and others. Motherby made no mention of James, except under the headword 'Hydrophobia', a subject on which James had published.¹⁹⁵ Thus the limited impact of James's work on subsequent medical dictionaries suggests that, whilst it was comprehensive and contained relatively

¹⁹² William Turton, *A Medical Glossary* (London: J. Johnson, 1797). Turton (1762-1835) was a physician/conchologist.

¹⁹³ George Motherby (bap.1731-1793) qualified from King's College, Aberdeen and practised in Königsberg.

¹⁹⁴ Rod McConchie, 'Converting "This Uncertain Science Into an Art": Innovation and Tradition in George Motherby's "A New Medical Dictionary", or a General Repository of Physic, 1775' in, *Adventuring in Dictionaries*, ed. by John Considine (Newcastle upon Tyne: Cambridge Scholars Publishing, 2010), pp. 126-148.

¹⁹⁵ William Turton, preface.

up-to-date medical knowledge, it may have been the leading authority for only about twenty-five years.

The possibility that Johnson used *A Medicinal Dictionary* for the medical entries in *A Dictionary of the English Language* (1755) is an important question, given the strong links between the two authors, and provides another way to assess its place in a broader, enlightened, mid-eighteenth-century context. In a detailed assessment of the relationship of Johnson with James's dictionary, Brack and Kaminski concentrated on the preface and the biographical details, rather than the medical headwords. Their conclusions on Johnson's contributions to James's dictionary were that Johnson certainly wrote the dedication, some of the biographies and sections of the *Proposals*.¹⁹⁶ A review of medical terms in Johnson's dictionary showed medical and scientific quotations from 31 scientists, physicians, pharmacologists and surgeons.¹⁹⁷ The common authors quoted are Samuel Sharp, *A Treatise of the Operations of Surgery* (1739), Richard Wiseman, *Several Chirurgicall Treatises* (1676), John Quincy, *Lexicon Physico-Medicum* (1719, 6th edn 1747), John Hill, *A History of the Materia Medica* (1751) and John Arbuthnot, *An Essay Concerning the Nature of Aliments* (1734).¹⁹⁸ I could find no reference to James. This may be simply explained because Johnson did not possess a copy of *A Medicinal Dictionary* at the time he was writing. At some time, Johnson did own a copy that was auctioned after

¹⁹⁶ Brack & Kaminski, 'Johnson, James, and the Medicinal Dictionary', p. 310.

¹⁹⁷ Om P. Sharma, 'Medicine in Dr Samuel Johnson's Dictionary of the English Language', *Journal of Medical Biography*, 10 (2011), 171-176.

¹⁹⁸ J.T. Scanlon, 'Johnson's Dictionary and Legal Dictionaries' in, *Ashgate Critical Essays on Early English Lexicographers*, vol. V: *The Eighteenth Century*, ed. by Anne C. McDermott (Farnham: Ashgate, 2012), p. 152.

his death, as noted above. The absence of any evidence of Johnson using *A Medicinal Dictionary* directly is a similar finding to a study of Johnson's entries on law.¹⁹⁹

My more detailed analysis of thirty headwords with medical meanings (ten each from the letters 'A', 'G' and 'S') was undertaken in separate parts of the alphabet from the first edition of Johnson's dictionary (1755).²⁰⁰ The definitions given by James and Johnson are distinctly different (examples are given in Appendix 4). Neither James nor Johnson could define what Helmont meant when he coined the word 'Gas'. Both defined gas negatively, James as 'a spirit incapable of coagulation' and Johnson as 'a spirit not capable of being coagulated', using Harris as a source. Similarly, in an analysis of the illustrative quotations for medical terms under the letter 'F', Johnson used Arbuthnot (48 quotes, mainly on aliments/diet), Quincy (20 quotes), Wiseman's surgery (24 quotes), Sharp's surgery (10 quotes), Harvey (six quotes), Cheyne (four quotes), Hill (five quotes on *materia medica*), Floyer (three quotes), but not James. The question of whether the writing of *A Medicinal Dictionary* had an effect on Johnson has been discussed in Chapter 3. But from the discussion here it should be clear that there is no evidence that James's work was directly drawn upon by Johnson. This does not preclude an influence of James's medical knowledge on Johnson's dictionary.

A Medicinal Dictionary certainly influenced James's subsequent publications and his literary career. I have already considered the unusual position of his first substantial publication, *The Rational Farmer*, in Chapter 2.²⁰¹ Comparison of five subjects in this publication, acid, air, nitre, oils and water, showed no textual similarities to the dictionary.

¹⁹⁹ Johnson sought out 'authorities' and used Cowell's *Interpreter* and not Thomas Blount's formidable *Nomo-Lexicon*. J.T. Scanlon, p. 145.

²⁰⁰ Samuel Johnson, *A Dictionary of the English Language* (London: W. Strahan et al., 1755).

²⁰¹ *The Rational Farmer and Practical Husbandman* (London: Booksellers of London and Westminster, 1743).

In *The Rational Farmer* there are descriptions of light and of static electricity, neither of which have significant entries in *A Medicinal Dictionary*. Overall, *The Rational Farmer* both from the title and from the innovative contents, should be considered an Enlightenment text but, unfortunately, was not completed. Soon after publishing *A Medicinal Dictionary*, James published a translation of the pioneering book on occupational diseases *De Morbis Artificum Diatriba* by Bernardino Ramazzini (1633-1714).²⁰² This book was in two sections; the first *On the diseases of artificers* by Ramazzini, and the second *On those distempers which arise from particular climates, situations and methods of life* by Frederick Hoffman. James's preface states that the following sheets were intended for *A Medicinal Dictionary*, 'but the desires of the publick to see that work completed, and the impatience of the booksellers to have it finished, obliged me to omit it, though of importance sufficient to deserve the notice of the publick'. Hoffman's work comes first (pp. 1-34), followed by Ramazzini's important treatise on the diseases of tradesmen (pp. 35-296), and then by an index and a supplement.²⁰³ The supplement was a significant addition on the occupational diseases of printers, writers and amanuenses, and many other trades. The history of this publication is rather more complicated than a simple translation. The first edition of Ramazzini's *De Morbis Artificum Diatriba* was published in Modena in 1700 and an English translation by an anonymous author was published in 1705. Ramazzini revised and enlarged the book with twelve new chapters as a supplement which was published in Padua in 1713. This revised edition was not used by James. Instead, the anonymous 1705 English translation was used,

²⁰² Bernardino Ramazzini, *A Dissertation on Endemical Diseases*, trans. by R. James, 1st edn (London and York: T. Osborne, J. Hildyard, 1746). *Health Preserved in Two Treatises* (London: J. Whiston, J. Woodyer, 1750). A second edition was published four years later.

²⁰³ It appears that the supplement was written by James, as stated in Thomas Osborne's catalogue.

without acknowledgement, and James appended his own, original translation of the twelve chapters of Ramazzini's supplement. It has been considered that the two editions of this treatise published by James did much to preserve the memory of Ramazzini's treatise among English readers.²⁰⁴ Thus James had an important impact on this exceptional book, and his translation became the starting point for a growing number of investigations into occupational diseases.²⁰⁵ In this context, and building on his inclusion of new ideas such as iatro-mechanical medicine, we can again position James in the full context of the Enlightenment and in transforming medical knowledge.

Furthermore, in 1746, James published a translation of Boerhaave's textbook on medicine, together with Paulli's treatise on tobacco, tea, coffee and chocolate, and an update on Moffet's *Health Improvements*. Another substantial work by James was *Pharmacopoeia Universalis*, first published in 1747, which I refer to in Chapter 2.²⁰⁶ Three editions of the pharmacopoeia were published, and it was translated into Italian, thus making it one of James's most successful books. As with his other publications, this work demonstrates that as a writer James was keen to promote enlightened medical knowledge and, apart from *The Rational Farmer*, he did not write outside the medical field.²⁰⁷

Summary

In summary, *A Medicinal Dictionary* is the largest and most comprehensive medical dictionary published in the eighteenth century and dominated the second half of the

²⁰⁴ Bernardin Ramazzini, *Diatriba*. The Latin Text of 1713 revised, with translation and notes by Wilmer C. Wright (Chicago: University of Chicago Press, 1940).

²⁰⁵ Michael Harris, 'Printers' Diseases: the Human Cost of a Mechanical Process' in, *Medicine, Mortality and the Book Trade*, ed. by Robin Myers, Michael Harris (Folkestone: St Paul's Biographies, 1998), p. 6.

²⁰⁶ Robert James, *Pharmacopoeia Universalis or a New Universal English Dispensatory*, 1st edn 1747, 2nd edn 1752, 3rd edn 1764 (London: J. Hodges, J. Wood). Italian translation, *Nuovo Farmapea Universale* (Niccolo below Pezzana, 1758).

²⁰⁷ As did for example, Samuel Garth, Richard Blackmore, Mark Akenside, Erasmus Darwin, Tobias Smollett and Oliver Goldsmith.

century. It was influenced by the Enlightenment and made an important contribution to the Enlightenment in general and to a medical enlightenment specifically. The dictionary illustrates enlightenment in terms of style and form and, to some extent, content. James's publication is a paradigm shift in medical dictionaries, both in breadth and depth. His grasp of all branches of medicine, natural history, chemistry and therapeutics is encyclopaedic. He quotes extensively from medical literature, both classical and modern, and from his own clinical experience. My analysis of significant areas of medical and medically-related subjects shows that modern eighteenth-century literature is quoted extensively in the dictionary, and authors from continental Europe are well represented. Many previous medical practitioners are respected, especially Herman Boerhaave, who was a key representative of a medical enlightenment in Europe. At the same time James reflects the continuing power of classical knowledge and earlier authorities, and older but enduring ways of understanding the body. The dictionary is intended for both reading and for reference, and should now be considered to be an important part of the spread and sharing of ideas that were key elements of the Enlightenment.

Many aspects of the dictionary illustrate the Enlightenment and a medical enlightenment and include the commercialisation of culture and cosmopolitanism. I have chosen some specific features in this chapter for being especially relevant, particularly the distinctive preface, the inclusion of biographies, the encyclopaedic entries and the numerous illustrations. In terms of content, and in line with many other respectable and expert medical texts, Enlightenment thought did not account for all medical knowledge, and a complete break from tradition cannot be expected. The contents of the dictionary show the influence of enlightenment thought with a trend away from magic, alchemy and

astrology, towards what is now termed science. Although weights and measures in a general dictionary can be analysed in terms of the Enlightenment, in a medical dictionary they serve the different purpose of interpreting classical literature. Thus the categories and contents of the dictionary are enlightened and reflect mid-eighteenth-century medical knowledge. The text of the dictionary can be considered to be enlightened, as word definitions, in contrast to the encyclopaedic entries, are concise and given with confidence. James uses a scholarly style that must particularly have appealed to the educated elite and to eighteenth-century physicians, as I have demonstrated in the catalogues of second-hand book sales. Demonstrating his wide linguistic abilities, James takes delight in noting the ‘mistakes’ in translations by others.

Ephraim Chambers pointed out that the encyclopaedic element of a dictionary made the writer an author rather than a compiler, and he felt that dictionaries should be read over carefully, and not just consulted as alphabetical works.²⁰⁸ It is difficult to decide if the length of the encyclopaedic articles in James’s dictionary is justified. These entries are not easy to use today, and may also have been difficult for some eighteenth-century readers. The combination of ancient and more modern ideas from multiple sources makes it difficult to assess their relative importance.²⁰⁹ A co-author, or a second edition, might have helped condense some of the entries, avoid repetition, provide more cross-referencing and, in some instances, reach a conclusion about a topic, but this did not happen. *A Medicinal Dictionary*, however, influenced the way that Enlightenment thought was packaged and circulated, and impacted on subsequent medical dictionaries, such as those by Barrow and

²⁰⁸ Richard Yeo, *Encyclopaedic Visions* (Cambridge: Cambridge University Press, 2001), p. 122; Richard Yeo, ‘A Solution to the Multitude of Books: Ephraim Chambers’s “Cyclopaedia” (1728) as “The Best Book in the Universe”’, *Journal of the History of Ideas*, 64 (2003), 61-72.

²⁰⁹ Failure to relate the length of the articles to their importance was admitted by the authors and critics of *Encyclopédie*. John Lough, *The Encyclopédie* (London: Longman, 1971).

Motherby. I have obtained little information on whether it was useful as a medical dictionary or as an encyclopaedia, but ownership was clearly enjoyed by both medical and non-medical professionals. It had little direct impact on Johnson's *A Dictionary of the English Language* but its indirect impact may have been much greater, as Johnson's first experience in lexicography came from working with James. Equally important is the role of the dictionary in the development of the *Encyclopédie*, a key publication of the Enlightenment. Furthermore, the substantial publications by James, some of which were derived from the dictionary, made significant contributions to a medical enlightenment of the eighteenth century. James himself was a physician who benefited from the Enlightenment and embraced new ideas. Perhaps he was not a fully enlightened physician in that he retained a great respect for the past, and was probably committed to the preservation of the existing social order within his medical practice.²¹⁰ Indeed, much eighteenth-century physician-related work remained unenlightened. However, James demonstrates a very wide knowledge of all aspects of medicine and natural philosophy. His medical dictionary is innovative in some principal ways, and forms part of a medical enlightenment of the mid-eighteenth century.

²¹⁰ An eighteenth-century practitioner advanced his career by prescribing cures for symptoms rather than by discovering the causes of disease. Nicholas D. Jewson, 'Medical Knowledge and the Patronage System in 18th -Century England', *Sociology*, 8 (1974), pp. 369-383.

Conclusions

One object at the heart of this thesis weighs seventeen kilograms (*A Medicinal Dictionary*) and the other approximately thirty grams (a box of fever powders). Both were created by an enterprising physician who worked with different, but equally distinctive, publishers in London within the thriving medical and publishing marketplace of the eighteenth century. Both objects illustrate the strong links with the publishing industry that were required. Both objects had their origins in Lichfield and Birmingham but were developed in London and spread widely and internationally. Both demonstrate the emerging power of the publishing business in eighteenth-century London. Both objects were aimed at very different customers and served different functions. One could elevate a practitioner's reputation considerably but the other could result in charges of peddling and bring it down. The creation of these two objects resulted from a courageous move from Birmingham to London by two school friends, Robert James and Samuel Johnson.

The basis of my thesis has been a thorough assessment of *A Medicinal Dictionary* within medicine and within the world of publishing. This assessment has been set within a detailed examination of the author and the publisher. I have sought to situate the dictionary in its wider intellectual, social and biographical context. I have explored the status of the dictionary within the history of medical dictionaries and its place within the Enlightenment. The dictionary itself can be considered to be an important element of the encyclopaedic ambitions of the eighteenth century, reflecting the growth and spread of medical knowledge. The dictionary may be viewed as having made a substantial contribution to the Enlightenment, both in Britain and in continental Europe. The dictionary was intended to be an inclusive reference book in contrast to previous medical

dictionaries by Blankaart (an alternative to Latin/Greek dictionaries), Quincy (promoting Newtonian ideas) and to a subsequent dictionary by Motherby (a short cut to old and new ideas and for use in an emergency).

My study on the making of the dictionary provides a biography of its production with details of the timetable, the *Proposals*, the dedication, the preface and the contents, including the illustrations. The resources required have been highlighted with an examination of the literary, printing and financial resources of such a major publication. My thesis explores how James's dictionary came to be written, its strengths and weaknesses, its impact, and its value as a source for the history and practice of eighteenth-century medicine. I note that the goals of both the author and the publisher were similar, aiming to produce a publication that was both prestigious and profitable. The underlying influence of Samuel Johnson in James's dictionary is evident from its initiation, the publishing of the *Proposals*, the writing of the dedication and some of the biographies. The innovative idea of including biographies could have come from Johnson. My thesis confirms that whilst James's dictionary did not influence Johnson's directly, it was likely they were working alongside each other for part of the time when both were employed by Thomas Osborne. This provided Johnson with first-hand experience in lexicography. My study shows that the first English medical dictionary, which was a translation of Blankaart's, was an important source of headwords but other sources were used. In my research on the compiling of the headwords by James, I discovered that a significant proportion may have been obtained from Bailey's dictionary which was subsequently used by Johnson. Not surprisingly, James's dictionary also influenced subsequent medical dictionaries produced by Barrow and Motherby.

I was unable to establish if Osborne was the sole publisher of *A Medicinal Dictionary*, as no details have been uncovered about the involvement of the Society of Booksellers for Promoting Learning, to whom applications for subscriptions to the dictionary were requested. Source material for lexicographers of this period is not usually specified, but is clearly relevant for a large dictionary. Not only did Osborne provide the financial backing for this extensive publication but, in the thesis, I suggest that through the purchase of libraries, Osborne's bookshop was an important source of medical texts. I also suggested that the library of Richard Mead, to whom the dictionary is dedicated, could have been another useful resource. Osborne must have been well pleased with his choice of James as the dictionary's author. James's writing skills are ably demonstrated in the dictionary, with the use of a scholarly style that would have appealed to the educated elite, in particular to eighteenth-century physicians. James took delight in demonstrating his linguistic abilities, noting the 'mistakes' in translations by others. Not only is James keen to quote ancient authors, but also the authors of important contemporary books and articles.

The resources used by Osborne for the printing of the dictionary have not previously been examined and I identified at least three printers and a greater number of printing presses. I obtained evidence of a change in plan which extended the dictionary from two to three volumes and moved the illustrations from within the dictionary to the end of the first and third volumes. Thomas Osborne may have regretted his decision to publish such a major work which had no subsequent editions, especially when sales did not go well. However, he must have been proud of the effect of the dictionary on continental Europe with translations into French and Italian, and his career continued to thrive.

My study confirms that James's dictionary was the largest and most exhaustive medical dictionary published prior to the early nineteenth century. The sheer size of the dictionary may have inhibited comprehensive studies of its contents previously. It is large due to both the number of headwords and the extensive, often lengthy, encyclopaedic entries. These two features have different functions which I have considered separately. Why the author or the publisher chose to include so many detailed encyclopaedic entries can only be surmised, but the initial purpose of the dictionary was to be an all-inclusive, prestigious publication. This makes any assessment of the dictionary difficult, as the lexical aspects are very different from the medical treatises. I have taken three different approaches to these encyclopaedic entries, namely a study of selected individual topics, a consideration of the role of the dictionary in medical education and an assessment on whether the dictionary contributed to the Enlightenment and to a medical enlightenment. In my thesis, I suggest their value in contributing to the spread of medical knowledge displays what scholars identify as key features of Enlightenment works. Continuing medical education in the mid-eighteenth century has received much less attention than primary medical training.

My detailed study of the contents has revealed several other distinct features that have not hitherto been emphasised but which add to the overall importance of the dictionary. These include the preface, the inclusion of biographies and illustrations, and the comprehensive botanical entries. The numerous botanical entries may be considered a legacy of the long-established tradition of herbals which I discussed in the history of medical dictionaries in Chapter 1. In the course of my study I examined a number of individual topics including fevers, antimony, alchemy, astrology, the ear, fractures and Hippocrates's *Air, Waters and Places*, several details of which I have included in the

thesis. I note that *A Medicinal Dictionary* reflects changes in beliefs such as the reduced importance of alchemy and the influence of charms and magic. Belief in astrology, however, remained an important influence on health. The value of the encyclopaedic entries may be viewed as contributing to the spread of medical knowledge and, as such, the dictionary shows features of the Enlightenment. Furthermore, the continuing use of the vernacular is another contribution to the Enlightenment, though the use of the vernacular was reflected in medical publications from the beginning of the eighteenth century despite medical terminology remaining rooted in Latin and Greek. James's literary achievements, with much of the cloak of Latin removed, helped to make knowledge of medicine more widely available.

Previous critiques of the dictionary have largely concentrated on style, and have not generally considered its distinctive features or its educational value. All dictionaries and encyclopaedias are derivative and will inevitably include some old words and ideas. The dictionary reflects the prevailing depth of knowledge in anatomy, surgery, natural history, medicine, chemistry, physics and pathology. Much of the knowledge of anatomy and natural history remains accurate today, but therapeutics and physiology were advancing more slowly and so appear to be distinctly less modern. Although James uses up-to-date references, he appears to have been more concerned about comprehensiveness. Up-to-date medical knowledge is sometimes submerged in the dictionary and not given the prominence it deserves. James's dictionary reflects the culture and medicine of his time. Subsequent interest in the dictionary has not been proportionate to its size, being restricted to the role of Samuel Johnson, the style of writing and other lexicographical issues, and to a limited number of specific medical conditions.

In considering the origins of the *Oxford English Dictionary* Simon Winchester noted that the achievements of the great dictionary-makers of England's seventeenth and eighteenth centuries were prodigious, with unrivalled learning and scholarship, but posed the question – who now really remembers their dictionaries?¹ Several reasons may have contributed to the relative neglect of James's dictionary. The author is better known for his invention of a successful patented fever powder, than for his publications. Furthermore, dictionaries have been of limited interest to medical historians, who may have been deterred by the intimidating size of James's dictionary, not so much by the number of headwords but, as already noted, by the comprehensiveness of the encyclopaedic entries, some over twenty pages in length. The preface itself filled ninety-nine pages. Although today these long entries appear diffuse and information sometimes difficult to retrieve, the eighteenth-century reader probably had less difficulty. Perhaps Johnson's wise comment on lexicographers remains true that they 'can never hope for actual praise; the most they can hope for is "to escape reproach" but even this negative recompense has been granted to very few.'²

Despite its length and size, *A Medicinal Dictionary* is easy to use today as a dictionary with good, simple explanations and definitions of words, with Greek etymology often included. The reader is assumed to have knowledge of Latin for the origin of many words, but help to overcome some of the difficulties with Latin terms is given in the index at the end of the third volume. Cross-referencing was used to a considerable extent in *A Medicinal Dictionary*. Words not in common use and based on classical authors are included and these would have been of historical interest at the time, and remain so today.

¹ Simon Winchester, *The Surgeon of Crowthorne* (London: Penguin Books, 1999), p. 89-90.

² Jack Lynch, *You Could Look It Up* (New York: Bloomsbury Press, 2016), p. 134.

James is liberal in his choice of terms as the strictly medical terms occupy about half the dictionary, the other half being biological, chemical and historical. It may be that there is too much natural history, and the botanical and animal entries could have been limited to those of medical interest only. The considerable detail of prescriptions, herbs and plants arise from James's background and the legacy of herbals. The case histories that are included in the dictionary are of interest, but examples from James's own experience are not always clearly separated from those quoted from the literature.

Thus, *A Medicinal Dictionary* is a substantial mono-lingual dictionary, compiled by a single author, whose primary purpose may have been financial, but whose secondary purpose was educational. For medical information it could indeed be considered 'an oracle of the age and a legislator of science'.³ The dictionary can be viewed in the same way as Johnson's, illustrating 'the struggle with language, with culture, with the record of written English and with books (and their texts) themselves'.⁴ James's grasp of all branches of medicine, natural history, chemistry and therapeutics is remarkably deep and wide. I have demonstrated through my investigation of the dictionary that James largely quotes from medical literature, with supplements from his own clinical experiences. The dictionary remains traditional in terms of style and arrangement of information. On the other hand, it is original, bearing little resemblance to previous medical dictionaries, and was influential throughout the second half of the eighteenth century. Though it had little direct impact on Johnson's *Dictionary of the English Language*, it played an important part in the development of the *Encyclopédie* in France. As such, James may be considered as having made significant contributions to the Enlightenment.

³ Samuel Johnson, *Rambler*, 106, 23 March 1751.

⁴ Allen Reddick, *The Making of Johnson's Dictionary* (Cambridge: Cambridge University Press, 1990), p.xii.

Dictionaries are made and shaped by people, the author and the publisher being key contributors.⁵ Samuel Johnson and the publisher Thomas Osborne were the two key people involved in the *Proposals for A Medicinal Dictionary* and for inviting James to be the author. These three all had distinctive personalities, strengths and weaknesses and their friendships lasted long enough to be highly productive. They were all amazingly industrious and full of initiative. I have considered them as having some of the characteristics of a ‘rough diamond’, as described by Whyman, with their comparatively humble backgrounds and personalities that were quick to realise opportunities.⁶ In some respects, James’s career followed a similar course to that of Richard Mead and of Hans Sloane who both came from relatively unprivileged backgrounds. Much has been recorded and published about Johnson but less about Osborne and even less about James, unlike other significant medical figures of the eighteenth century. I have brought together much of the known background information. I have found no surviving personal papers or business details about Thomas Osborne, but he clearly planned the dictionary to be an important publication. The connections of other authors with Osborne have left numerous comments about him as a person, and ‘to assess Osborne’s character properly is difficult’.⁷ My study of the making of the dictionary also led to research on James’s background and shows that early in life he revealed an independent character. In searching for other information of this early period, I found no definite evidence, but I have suggested that Sir John Floyer in Lichfield and training in Oxford were important influences, as was Leiden where Professor Herman Boerhaave played a critical role. My thesis shows considerable circumstantial

⁵ John Considine, Giovanni Iamartino, *Words and Dictionaries from the British Isles in Historical Perspective* (Newcastle upon Tyne: Cambridge Scholars, 2007), p. xvii.

⁶ Susan Whyman, *The Useful Knowledge of William Hutton* (Oxford: Oxford University Press, 2018), p. 38.

⁷ O.M. Brack, *Oxford Dictionary of National Biography* [accessed 16 Aug 2019].

evidence in support of these connections. In 1759, Oliver Goldsmith assessed medical training in Leiden and Edinburgh as giving the best likelihood of a living, with that ‘of our own universities’ giving the best chance of becoming great.⁸ Both these outcomes were successfully achieved by James. The evidence obtained in my study is consistent with the idea that Johnson and James were not particularly successful in Birmingham. However, I have shown that James started to write and to experiment with mercury for rabies and with antimony for fevers before he moved to London.

The arrival of Johnson in London in 1737 and James in 1740 transformed their lives. James’s life in London illustrates several aspects of the career of an average, independent, hard-working, eighteenth-century physician in the very open marketplace found in London. Unlike his contemporaries, such as John and William Hunter, James did not have any academic appointments and he left no teaching legacy except his writings. Unlike Mead and Sloane, James did not appear to support or contribute to the Royal Society, the Royal College of Physicians or any charities, and he did not appear to have a botanical garden or to patronise the arts. Differences in networking skills resulted in different outcomes.⁹ James’s substantial writings in mid-career were noteworthy and certainly showed how he strived for knowledge and reputation. He had to use his own talents as he could not rely on significant patronage, or wealth, or position through marriage. But more than that, he was an entrepreneur and made contributions to the Enlightenment in England at a time when there was a growth of print culture, greater literacy, expansion of the educated classes and

⁸ Lester S. King, *The Medical World of the Eighteenth Century* (Chicago: University of Chicago Press, 1958), p. 29.

⁹ Lisa Wynne-Smith, ‘Remembering Dr Sloane: Masculinity and the Making of an Eighteenth-Century Physician’, *Journal for Eighteenth-Century Studies*, 42 (2019), 433-453.

increased commercialism of medicine. In his life time, James was recognised as a hard-working scholar, an excellent linguist, a chemist and a competent physician.

The London medical marketplace clearly suited James's entrepreneurial character. In my thesis, I have compared James's social background to that of other physicians moving to London around this time. This study shows that there were many similarities, but his farming background and his interest in chemistry were somewhat unusual. The only known portrait of him illustrates how he and his friends would have liked him to be remembered, and, interestingly, it is the dictionary, and not the fever powders, which is displayed. Little that James wrote after 1748 was original, as this is when his medical practice was established and the production, marketing and defence of the patent of the fever powders became a dominant concern. In examining the dictionary, I found that James clearly stated his objection to secret remedies but gave many references to antimony, the essential ingredient of the powders. No direct connection could be established with Peter Shaw, a notable contemporary physician, also originally from Lichfield, who had a similar strong interest in chemistry. Little is known of Shaw's early background and training but it is possible that he influenced James in his decision to move to London, and evidence that they met in London is given in the posthumous 1778 edition of James's dissertation on fevers. A review of antimony based on the dictionary shows that the 'discovery' of the effects of antimony by James was not original, though his preparation was generally well tolerated. James worked within the customs of the times, and other physicians sold comparable remedies. Indeed, medical practice and the selling of drugs and remedies were largely unregulated and the positive reputation of the fever powders no doubt outweighed any negative effects, even if his reputation was tainted by them after his death. Direct

evidence about James's medical practice and his medical skills in my study is limited to personal testimonies, which were largely favourable. Any negative views of James were mainly recorded by others towards the end of his life, or after his death, and were not always independent. Some fifty-seven years after his death, a biography was written about James alongside other eminent doctors such as Richard Mead, Edward Jenner, William and John Hunter, William Cullen and William Heberden, summarising that, despite powerful impediments to his advance, 'his scientific and literary powers procured him a high reputation, and great practice'.¹⁰

The comment in *Philosophical Transactions* on James was a balanced opinion as a faithful and industrious collector of medical information down to his own time. A 'majestic fossil' was a description of the therapeutic contents of *A Medicinal Dictionary* written one hundred and fifty years after its publication, but it also suggests that the dictionary was still in use at that time, which is a good record. Indeed, 'much of the learning is useless, and now forgotten, lore' would be a fair analysis of much of eighteenth-century medical writing when reviewed today. It is a dictionary of medical and related scientific terms aimed for reference, together with a medical encyclopaedia aimed for reading and instruction. The value of *A Medicinal Dictionary* today is a source book for the history of medicine, and for the theories and practice of medicine in the social and cultural context of the eighteenth century. James fulfils the duties of a lexicographer as outlined by Mugglestone and others - as an impartial historian and providing as complete a record as possible.¹¹ James was fortunate in not being unduly constrained by the size and cost of the publication. A good summary of James's philosophy on medical practice and teaching was

¹⁰ *The Georgian Era*, vol. II (London: Vizetelly, Branston, 1833), pp.380-381.

¹¹ Lynda Mugglestone, *Lost for Words* (New Haven: Yale University Press, 2005), pp. 70-109

written, perhaps by Johnson, in the *Proposals for A Medicinal Dictionary*: ‘It is doubtless of importance to the happiness of mankind, that whatever is generally useful should be generally known; and he therefore that diffuses science, may with justice claim, among the benefactors to the public, the next rank to him that improves it.’ This is an appropriate epitaph for James, whose aim in writing the dictionary was primarily educational, an aim which he certainly achieved.

In answering my initial research questions, I show that James’s background was highly relevant, as clearly he was a well-trained physician with competent language skills, well-read and hard-working. His interest in chemistry served him well in the production of the fever powders. His background was comparable to the authors of other medical dictionaries in the eighteenth century and similar to other medical migrants to London. I found no firm evidence to explain James’s move to London in mid-career, but I am convinced it involved his friends, Samuel Johnson, Peter and David Garrick and perhaps the publisher, Edward Cave. Whilst James’s character is complex, with evidence of a strong personality and a short temper, which may not have been compatible with dominant notions of manly politeness, he retained these friendships. Thomas Osborne has been underestimated as a publisher and deserves considerable respect in seeing through the completion of the dictionary in addition to many other substantial publications. On the basis of my thesis, medical historians will now be able to extend their understanding of the eighteenth-century world. This includes how medical knowledge was collected and marketed, how medical words became established in English, how the personal and financial resources needed to support the production of a medical dictionary were obtained, and how the value of an illustrated, encyclopaedic dictionary remains important today.

It is hoped that some of the gaps in my study will be filled with the finding of personal papers relating to both James and Osborne. Thomas Osborne deserves a more detailed study as a successful publisher as well as a secondhand bookseller than has been possible in my thesis. The very early life of Peter Shaw continues to be shrouded in mystery but he may have been another Lichfield contemporary who became an influential figure in eighteenth century medicine and chemistry. In the meantime, *A Medicinal Dictionary* should be recognised as a useful and comprehensive resource for medicine of the eighteenth century and command great respect as an innovative publication. The dictionary was the result of unrivalled learning and scholarship and so contributed to the Enlightenment and to a medical enlightenment.

Appendices

Appendix 1: Conditions from Robert James, *Proposals for Printing of a Medicinal*

Dictionary (London: The Society of Booksellers for Promoting Learning, 1741)

1. That the whole work will make about four hundred sheets in two volumes, *Folio*; to be printed in the same letter as the *General Account of the Work* hereunto annex'd, and on the same paper with these proposals.
2. That for the better accommodation of the purchasers, five sheets will be delivered to the subscribers every fortnight, stitch'd in a cover. Price one shilling.

It is admitted that some present publications give a sheet more for the same price; but when it is observed, that the proprietors of those have already been reimbursed the copy-money, and all other expenses, with a considerable profit, from the sale of many editions, it is presumed, a wide difference will be discerned, and this article will be thought a very reasonable one; especially when the great quantity of matter contained in every sheet is duly considered.

3. That every folio cut shall be reckoned as one sheet of print, without any additional expense to the subscribers.
4. The first number shall be published on the first of January next, and the following numbers regularly every fourteen days after, without any intermission, until the whole is finished.

That the publication may not be interrupted by any accidental difficulty, the Booksellers will take care, that several numbers shall be printed before the appearance of the first.

Appendix 2: Sources used by James for the letter ‘F’ in the dictionary

The possible copy-texts used by James were sought in a study of the headwords under the letter ‘F’. This letter was chosen as a representative letter from the middle of the dictionary. James’s entries were compared with those in two medical dictionaries, Blankaart (1726), Quincy (1736), one technical dictionary, Harris (1736), one general English dictionary, Bailey (1736) and one encyclopaedia, Chambers (1741). Not all of these terms were included by Dyche and Pardon. The editions chosen were those published as close to James’s dictionary as possible. Also for comparison, W. Johnson, Castellus and Rulandus (for chemistry) and Tournefort (for botany), which were used by James, have been included. The list of James’s headwords illustrates the very broad inclusion of terms.



James's sources for
letter F.xlsx

Appendix 3: Headwords in *A Medicinal Dictionary*

Spread sheet of 14,330 headwords as defined in *A Medicinal Dictionary*, and then categorised as medical, therapy including *materia medica*, botany, animal, chemistry with geology, alchemy, superstition, named people, food and drink, cross-referenced, other, and unknown. Where categories overlapped, priority was given to ‘medical’ and ‘therapy’. ‘Medical’ included anatomy, symptoms and signs of disease, individual diseases and operations. Where meaning has been amplified this has been put in italics. The spreadsheet

is printed as an addendum to the thesis to allow scholars to scan the contents for specific words, synonyms or categories. This technique has been used in my thesis for search such subjects as fevers, astrology and alchemy.



Work sheet Medicinal
Dictionary categorise

Appendix 4

- A. Comparison of word definitions in five medical medical dictionaries - one medical dictionary published before James's dictionary (John Quincy, *Lexicon Physico-Medicum*, 5th edn, 1736 and three different medical dictionaries published after James's dictionary namely Barrow, 1749 Motherby, 1775 and Hooper, 1798) - and two general dictionaries (Bailey, 1736 and Dyche and Pardon, 1740)

‘Abarticulatio’ or ‘Abarticulation’

Quincy: The same with Diarthrosis, which see.

Bailey: In anatomy, a good and apt construction of the bones by which they move strongly and easily, or that species of articulation that has manifest motion.

Dyche and Pardon: In anatomy is that natural and curious construction of the bones, whereby they readily and easily perform their several functions by a due motion of the whole system, or its particular parts, as in the hand, leg etc.

James: A species of articulation of the bones admitting of a manifest motion, called by anatomists ‘Diarthrosis’ and ‘Dearticulatio’, to distinguish it from another sort of articulation, which admits of a very obscure motion, or none at all, which is called ‘Synarthrosis’.

Barrow (1749): A species of articulation of the bones that has manifest motion.

See diarthrosis.

Motherby: A species of articulation admitting of a manifest motion, called also diarthrosis, dearticulatio, coarticulatio to distinguish it from that sort of articulation which admits of a very obscure motion, and is called synarthrosis.

Hooper (1798): not included.

‘Bacchus’

Quincy: no entry.

Bailey; no entry.

Dyche and Pardon: no entry.

James: Wine. It also signifies a sort of fish, the same as *Mugil*, the mullet (*Castellus*).

Barrow: Wine. It also signifies a sort of fish, the same as *Mugil*, the mullet (*Castellus*).

Motherby: Wine, also a fish called mugil or mullet.

Hooper: not included.

‘Cabala’ (and other spellings)

Quincy: A term that hath been anciently used in a very mysterious sense amongst divines and since some enthusiastic philophers and chemists have transplanted it into medicine, importing by it somewhat magical; but such unmeaning terms are now justly rejected.

Bailey: several meanings relating to invocation of spirirts.

Dyche and Pardon: a traditional or mysterious doctrine among the ancient Jews . . . by Christians taken for the use or rather abuse, which magicians made of some parts of the passages of scripture, and all the words, magic figures, letters, numbers, charms etc., and also the Hermetical science, are comprised or understood under this name.

James: This is derived from a *Hebrew* word, which signifies *to receive by tradition*. It signifies a Science which consists in the mysterious explication of the scripture, either received by tradition, communicated by angels, or learned from some imaginary import of words or letters. This is the *Jewish cabala*; but the word, from this original, has been applied to any sort of mysterious or magical knowledge or explication of things. Thus the medicinal or hermetical *Cabala* is a science which discovers the most concealed knowledge of bodies, and mysteries of nature, either by a communication with incorporeal beings more knowing than ourselves, or by their mystical characters. In this *Paracelsus* seems to repose a great deal of faith.

Barrow: This properly signifies a mysterious doctrine among the Jews, received by oral tradition from their fathers. But some enthusiastic philosophers and chymists have introduced it to medicine, to signify science which discovers the most concealed knowledge of bodies, and mysteries of nature, either by communication with incorporeal beings more knowing than ourselves, or by their mystical characters.

Motherby: It is derived from the Hebrew word, signifying to receive by tradition. It is a science which consists in a mysterious explication of the scriptures, however

they were received. This is the Jewish cabala, but, from this original, the word is applied to any sort of mysterious or magical explication of things.

Hooper: not included.

‘Dealbatio’

Quincy: hath been used by the chemists and refiners for rendering things white which were not so before, but is now almost grown into disuse.

Bailey: no entry

Dyche and Pardon: no entry

James: A whitening. It is a part of cosmetics, as when we say a whitening, or dealbation of the teeth, cicatrices, or the like. It is also a term in use among some professors of the spagirical art, for the third operation of the process of the philosopher’s stone. *Paracelsus*, in his *Manual*, teaches artificial ways of whitening metals; and *Junker*, in his *Lexicon Chymicum* shews two ways of whitening copper (*Castellus*).

Barrow: 1. A whitening, as of the teeth, etc. 2. In the spagirical art, the third operation of the process of the philosopher’s stone.

Motherby and Hooper: no entry.

‘Ecbolica’

Quincy: no entry.

Bailey: medicines that facilitate delivery to women in hard labour; also those that

cause abortion,

Dyche and Pardon: no entry.

James: Forcing medicines, which forward delivery; or medicines which cause abortion.

Barrow: Forcing medicines, or such as cause abortion.

Motherby: Medicines which cause abortion.

Hooper: no entry.

Many of the entries in Barrow were clearly derived from James and a significant proportion of the entries in Motherby. Similarities could have arisen either by simple copying as James's distinctive definitions, or, less likely, by reference to a common source. Hooper, writing at the end of the century and based on Quincy, was considerably different. These few examples demonstrate that James's definitions were generally short and precise but the explanations tended to be longer and fuller. James's entries are not obviously copied from Quincy or from Bailey or Dyche and Pardon.

B. Definitions in *A Medicinal Dictionary* compared with Johnson's *A Dictionary of the English Language* (1755).

Thirty headwords with medical meanings (ten each from the letters 'A', 'G' and 'S' representing separate parts of the alphabet) were taken from the first edition of Johnson's dictionary (1755).¹² Ten of these words are not included in James, for example 'Ablepsy',

¹² Samuel Johnson, *A Dictionary of the English Language* (London: W. Strahan et al, 1755).

‘Garbage’, ‘Garglion’, ‘Sanity’ and ‘Sapid’. The definitions given by James and Johnson were different, for example:

‘Abstergentia’. James gives no definition, but describes abstergents as ‘of a saponaceous nature, and capable of dissolving concretions formed of the earth and oil, of the nature of a resin, which cannot be dissolved by simple abluments, or of a watery menstruum.’ For comparison, Johnson’s defines ‘absterge’ as to cleanse by wiping; to wipe, adj cleansing.

‘Ganglion’. James’s definition of ‘Ganglion’ is a nodous and renitent induration of a nerve of a natural colour, void of pain, proceeding from a concretion of the nervous juice, through some disturbance of the order of fibres from an external cause, as a stroke, or too great a compression of the nerve.’ Johnson: ‘an exudation of nervous juice from a bruise, or the like, which indurates into a hard immovable tumour (Quincy)’. All authors considered a ganglion was pathological rather than physiological.

‘Sarcoma’. James’s definition of ‘sarcoma’ is ‘a fleshy tumour arising from any part of the body, from some effusion of the nutritive juices and of their tubuli, as happens in constitutions and by some other accidents.’ Johnson: ‘a fleshy excrescence or lump growing in any part of the body, especially the nostrils (Bailey)’.

Neither James nor Johnson could define what Helmont meant when he coined the word ‘Gas’. Both defined gas negatively, James as ‘a spirit incapable of coagulation’ and Johnson as ‘a spirit not capable of being coagulated’ using Harris as a source. James did not always provide succinct definitions. For example, for ‘Abductor’ James launched into a

series of individual abductor muscles whereas Johnson gave a broad definition: 'The name given by anatomists to the muscles which serve to draw back the several members'.

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