A DYNAMIC EQUILIBRIUM:
DOCTORS AND PATIENTS IN SEVENTEENTH-
CENTURY ENGLAND

by

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A thesis submitted in fulfillment of the requirements
for the degree of Doctor of Philosophy.

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February 2017
Declaration

I certify that this work contains no material which has been accepted for the award of any other degree or diploma in my name, in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text. In addition, I certify that no part of this work will, in the future, be used in a submission in my name, for any other degree or diploma in any university without the prior approval of the University of Adelaide.

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I acknowledge the support I have received for my research through the provision of an Australian Government Research Training Program Scholarship.

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Acknowledgements

First and foremost, I would like to thank my thesis supervisor Dr. Claire Walker who has been my friend and mentor throughout my candidature. I sincerely thank her for her time, patience and encouragement, and for sharing some of her vast reservoir of historical acuity. I also heartily thank Professor Han Baltussen for his understated support and incisive observations. I have fond memories and a great appreciation for my fellow students who underwent this journey with me. I would particularly like to thank Steven Anderson, Clare Parker, Mark Neuendorf, Elsa Reuter, Philip Ritson, Guy Richardson, Jill Mackenzie, Jenny Haag and Erin Zimmerman. Finally, I would like to thank my family. Jerome, Geraldine, Patrick, Bridgid, Oliver, Catherine, Frank, Maeve and Fergal. They have been exceptional in every possible way. Along with Michael, Denise and Peter, and my mother, Dorothy, they have been interested in my research, offered valuable advice and support, and wholeheartedly encouraged me in my endeavours.
Abstract

Throughout the social history of medicine, explorations of the doctor-patient relationship have often utilised the framework of power relations. Consequently, early modern patients tend to be depicted as more powerful than their modern counterparts. This was because early modern patients were seen to choose their doctors from a conceptual medical marketplace, subjugate them through an entrenched system of patronage, and argue over treatments within a medical culture that barely distinguished between lay and professional medicine. The language of power, however, has served to place early modern doctors and patients in an oppositional stance, thus portraying the relationship as competitive and adversarial. Rather than interpreting patient agency as a signifier of individual power, this thesis uses research in the field of power relations to develop a new conceptualisation of power, to better understand the behaviour of actors within the early modern medical setting. Doctors and patients were both subject to multiplex, multilayered and often hidden socio-relational forces that determined the processes of medical decision-making. Understanding how networks of power operated can reveal the existence of alliances, collaborations, friendships and mutual reciprocity between doctors and patients. The contribution the thesis makes to the scholarly field, therefore, is to offer the guiding principle of a medical dynamic-equilibrium. This terminology more aptly conveys the complexities of early modern medical relationships, in which socio-relational forces constantly influenced participants and shifted power in unexpected ways that delivered dynamic outcomes. The thesis explores early modern attitudes towards illness and cure, and considers the role of the doctor at the deathbed and the management of chronic disease.
The Annals of the Royal College of Physicians were mainly accessed via microfiche (Reading: Adam Matthew Publications, 1991) at the Barr-Smith Library, University of Adelaide. Accordingly, they are cited using microfiche card and image number, and original date of entry.

Contemporary spellings in quotations have been preserved.

For the sake of clarity, dates have been altered to begin the new year on 1 January.
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