

Book Reviews

Mark Harrison, *Medicine and victory: British military medicine in the Second World War*, Oxford University Press, 2004, pp. xiii, 320, illus., £45.00 (hardback 0-19-926859-2).

Historians of military medicine have paid far more attention, albeit uneven, to the First World War than to the Second. Mark Harrison's *Medicine and victory* is a landmark text. It is the first work, official histories aside, to provide a comprehensive survey of British military medicine in all the major allied campaigns of the Second World War in which the British had sole or a significant military involvement. Further it attempts assessments of the place of various sorts of medicine in these campaigns (on death rates, morale, etc.) as well making an overall appraisal of its contribution to the war as a whole. Harrison's book is rigorously devoted to battle. There is no home front here or history of the treatment of soldiers at home or, indeed, very far away from the battlefield if it comes to that, except in the case of soldiers in the camps in Singapore and Hong Kong. The main chapter titles speak Harrison's faithful shadowing of wartime action. After some general orientation come the campaigns: 'Medicine in Retreat 1940–1942', 'The Western Desert, 1940–1943'; 'North Africa, Sicily and Italy; Burma and North-East India', and finally, 'Medicine Victorious: North-West Europe, 1944–1945'. In the last chapter Harrison sums up and conjectures.

Overall, Harrison considers British medicine had a good war, certainly in contrast to that of the Germans and the Japanese. By 1944, he writes, "most casualties were receiving treatment within hours of wounding" (p. 275). Medical technologies, notably immunization and penicillin, saved lives. After 1944 penicillin's effect on returning men to combat, not only by preventing sepsis but also by curing VD is staggering. Yet, we knew these things. Harrison just tells this old tale well with new examples and statistics. What repeatedly shines through this book, however, is the triumph of British military

medicine's organizational power. The British seem to have understood far more readily than did the Axis powers the medical problems of the rapidly moving fronts of the Second World War. This is particularly well seen in the use of aircraft to evacuate troops, the organization of blood transfusion services and in the deployment of front line surgical teams, notably those treating head wounds. What is more striking, and perhaps less well recognized, is that, when facing a new, critical, situation and coping poorly, British medical administrators adapted quickly. Burma, in spite of its being one of the less successful medical campaigns, was a good case in point. The generally good relations between medical officers and their combatant colleagues seem to have been pivotal here. Lieutenant-General William Slim, who commanded the British forces in Burma, echoing an Enlightenment sentiment, put it in a nutshell: "Good doctors are no use without good discipline . . . More than half the battle against disease is fought not by doctors but by regimental officers" (p. 194). In some quarters in the German forces, masculine, military values eclipsed all others to the point that sickness was regarded as weakness. In spite of legendary Germanic efficiency, these values sometimes showed through. Brilliant commander though he was, Rommel was not closely attendant to the medical and hygienic needs of an army. Montgomery was. This factor was possibly enough to turn the tide in the Western desert. As to the Japanese, Harrison seems nonplussed as he catalogues their unexplained bayoneting of medical officers, nurses and civilian orderlies. An important point that Harrison repeatedly, and in my view rightly, makes, is that like medical officers in the First War, those of the Second, bullied, ordered and patronized the troops but, unlike their predecessors, they also appealed to ideals of citizenship. There is much here for the historian of democracy and the fate of the Enlightenment.

Historians need not fear that Harrison has conquered the field of military medicine in the

Second World War. There is extensive research here but Harrison shows there is much to be done. This is a relatively short book for such a massive topic. It reads well, is challenging and much like a good, long essay is a call to historical arms. There are a few illustrations but surely fans of the BBC television series *Dad's Army* will recognize in the picture on p. 171 that the bank manager Captain Mainwaring (a.k.a. Mannering) did see active service, but under the nom-de-plume of "Two-gun Pete".

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John Farley, *To cast out disease: a history of the International Health Division of the Rockefeller Foundation (1913–1951)*, Oxford and New York, Oxford University Press, 2004, pp. x, 323, illus. £39.50 (hardback 0-19-516631-0).

Although it was one of the most influential public health agencies of the twentieth century and the best-endowed branch of the Rockefeller Foundation, the history of the International Health Division (IHD) has never been told so far. From his forays into the records of the Division, John Farley gives a fairly detailed account of the transnational disease campaigns that it conceptualized for the first time under the rubric of eradication. A "tribute" to the malariologist Lewis Hackett (p. 300), *To cast out disease* is at its best in the central chapters on hookworm, yellow fever and malaria. Farley makes no mystery of it; he believed from the start that the IHD was "more or less the American equivalent of the British Colonial Medical Service" (p. vii). This is understandable, coming as it does from the author of *Bilharzia: a history of imperial tropical medicine* (1991), but this perspective is somewhat misleading.

The picture given of the Division is one of an organization "uncomfortably" divided between the two ideas which were more or less personified by its first directors, Wickliffe Rose

(1913–23) and Frederick Russell (1923–35): the one focused on education and public health, the other on disease control and eradication *per se*. Tramping through swamps and killing mosquitoes, this alone merits the "admiration" of a historian (p. 298) who is indifferent to the problematic nature of the concept of eradication in the 1920s and 1930s when the paradigm of reductionist biomedicine (bacteriology) was undergoing reform. The "medical barons"—Frederick Russell, Lewis Hackett, Paul Russell and "the General Patton of entomology", Fred Soper—were the only true heroes. True, Farley remembers his own professional training in parasitology so clearly that he seems close to espousing a "culture-free model" in which all could be blamed on a few microparasites. It is, however, giving too much credence to his prejudices to suddenly conclude: "What the Health Division archives indicate to me is an organization with its sights fixed on narrow medical concerns" (p. 294). For Rose, the struggle against parasites was no more than a means to an end, namely the health education of populations and their representatives, and we are told that with Rose's failure, comes a farewell to states and governments, a subject on which it seems the author is much more at ease. However, it should be pointed out that the IHD did not spare its efforts later in encouraging state and local initiatives on the five continents to develop permanent public health agencies.

With attention focused on the tropics, continental Europe looks like a poor relation in this picture. With the exception of malarial Italy, the subject is rapidly dealt with: a chapter on tuberculosis in France, followed by a few pages on those European schools of hygiene which, apparently, "predated" the Health Division's endowments of London and Toronto. Those pages do not always demonstrate sound judgment. For instance, great emphasis is put on Prague and Rome, whereas Zagreb and Budapest were considered by the Division itself as "the better Institutes in Europe". And there is nothing on the vision conjured up by Rose and Selskar Gunn of the political stabilization of Central and Eastern Europe, and nothing either