Book Reviews

Library, but it is unlikely that this would have fundamentally altered the narrative of the war as a social and medical event which has been established for the best part of a decade.

Anne Summers, Department of Manuscripts, The British Library

ELIZABETH FEE and ROY M. ACHESON (eds), A history of education in public health: health that mocks the doctors' rules, Oxford University Press, 1991, pp. xi, 349, £35.00 (0-19-261757-5).

Education is vital to the successful living of lives within society; public health, as the authors of one of the essays in this book state, is a "vital collective function". Put the two together and you should get a significant and relevant volume, of considerable interest to all socially-concerned persons. Unfortunately, however, the history of education has never managed to free itself from the stigma of dullness, for however important the process it often happens that the events which make a life interesting have nothing to do with what was learned in the classroom, while public health has always been the Cinderella of medical specialities. Yet if the title of this book (let alone the silly subtitle) is not encouraging, the book's intention is admirable: "to provoke and inform policy decisions about the future directions of medical education in all countries interested in building stronger and more effective health systems", by comparing and contrasting the development of public health education in Britain and the United States since the mid nineteenth century.

In the main, the story revealed is a sad one, of limited perspectives, confused aims and uncertain philosophies, dispersed responsibilities, poor recognition, under-funding, and lack of interest from the bulk of the medical profession. There are nine essays: three on the United States, four on Britain, and two, the first and last, which span the experience of both countries. The country-specific essays are interleaved, as it were, in chronological order, presumably to make on-going comparisons easier; wise readers will circumvent the confusion and disorientation which this arrangement causes by treating the essays devoted to each country as one unit. Read in this way, the American essays are considerably more satisfactory than the English: they tell a continuous story and, no doubt because of Elizabeth Fee's extensive authorial involvement, share a consistency of style and interpretation which is absent from the chapters about Britain.

The chapters organised by Fee give a comprehensive history of the professional education of public health workers in the United States, from the emergence of the early educational programmes in the universities in the later nineteenth century to the fresh perspectives on the health system dictated by the AIDS epidemic. In addition, we are given insights into the events which shaped the development of the profession: wars, the bacteriological revolution, the epidemiological transition, the introduction of Medicare and Medicaid. The English chapters are less comprehensive: contributions by Dorothy Porter, on the origins of the English medical officers' failure to gain significant power over the development of the public health system, and by Jane Lewis, on the problems of finding a practical philosophy for public health in the twentieth century, outclass Roy Acheson's pedestrian two-part, blow-by-blow, account of the Diploma in Public Health, a qualification which achieved its peak of relevance in 1900.

Differences in emphasis and coverage between the two sets of essays are partly compensated for by the first and last chapters, but also by the identity of themes which run insistently through them both. In neither Britain nor the USA, for example, has public health ever been attractive to medical students as a career, yet schools of public health have continued to court them, since a high degree of involvement of medically qualified personnel is the key to the financial and political recognition of the discipline. The central focus of all the essays is the education of medically qualified public health personnel, its associated problems, and its implications for the function and standing of the discipline in the wider world. Popular health education, a prerequisite for the success of any public health system, is mentioned but not explored: it is peripheral, explains Acheson, to the main theme of the book. At bottom, this

Book Reviews

theme is the search for "a realistic theoretical basis" for the structures and practices of the public health profession: the end of the rainbow, readers of the book may say.

Anne Hardy, Wellcome Institute

FRIDOLF KUDLIEN and RICHARD J. DURLING (eds), *Galen's method of healing*, Proceedings of the 1982 Galen Symposium, Studies in Ancient Medicine series, Leiden, E. J. Brill, 1991, pp. viii, 205, DFl. 110.00 (90-04-09272-2).

This book is bizarre in several ways. First of all, it has been an unbelievably long time arriving, even for an academic book. Secondly, of the eleven contributions it contains, at least four were not delivered at the Symposium. Thirdly, although the volume was conceived according to a definite plan, the whole has a curiously piecemeal feel to it. Finally, the contributions vary enormously in style, scope, and length.

Nevertheless, most scholars will agree that a study of Galen's masterpiece *On the Therapeutic Method (MM)* is long overdue. The conference dealt with five distinct areas of research: (a) the text's uniqueness; (b) Galen's attitude to surgery; (c) Galen and philosophy; (d) *endeixis*; and (e) the text's later influence. These are all important: but they do not exhaust the interest which *MM* exhibits.

Under (a), Vivian Nutton contributes a typically scholarly article on 'Style and context in the *Method of Healing*'. The composition of *MM* was interrupted for twenty years or more: Nutton analyses the discrepancies between the two halves of the work, but finds them on the whole relatively harmonious. However, his main concern is with the role of the illustrative stories with which Galen here, as elsewhere, peppers his narrative. Galen is often accused of bad faith and misrepresentation—but Nutton sets out, largely successfully, to acquit Galen of the worst of the indictments.

As for (b), Galen never wrote his projected *On Surgery*; and as such his attitudes to the matter must be gleaned from scattered indications throughout the corpus. Nikolaus Mani ('Die wissenschaftlichen Grundlagen der Chirurgie bei Galen') acknowledges this fact; but he rightly notes the importance of the subject in Galen's work. Surgery should be treated, Mani thinks, as an integral part of Galen's general medical theory: and as such one should seek to disinter its theoretical basis from his practical recommendations.

Topic (c) is represented by Jonathan Barnes's 'Galen on logic and therapy', by some distance the longest contribution in the volume, and one which has already been much discussed in samizdat. Galen thought that the best doctor needed to be a philosopher: indeed he wrote a pamphlet of that name. Barnes shows just why Galen arrived at that currently unfashionable view. Doctors who know no logic make fallacious inferences—and fallacious inferences, at least in the worst cases, cost lives. Barnes treats the various aspects of Galenic proof, and its application to practical therapy, lucidly and illuminatingly. This overlaps with Mani's article: both consider Galen's derivation of the appropriate therapy in the case of extruded intestines—but nothing, disappointingly, is made of this.

Topic (d), that of *endeixis*, is served by three pieces, from the editors, of differing scope and size. Two are of limited philological interest; Kudlien's contribution is rather more substantial—but it is extremely circumspect, and as the author himself says, "brief and sketchy". Kudlien finds little evidence of a systematic technical use of the term before Galen, either in medicine or philosophy, although in philosophy he willingly defers to the expert views of others.

Subject (e), Galen's "afterlife", is dealt with by a variety of distinct and unrelated pieces, of varying length and interest. The most substantial is Jerome Bylebyl's learned and interesting discussion of the way in which Renaissance teachers of medicine attempted to integrate MM into their courses. Most of them simply made reverent genuflections to the figure of the Master; The exception, and the hero of Bylebyl's article, was the Paduan professor Giovanni Battista da Monte.