

imprecations and making negative and ineffectual gestures at the dog. Afterwards he explained that you could not be too careful where dogs were concerned, however harmless they might appear. They might bite, and their bite could give you a horrible disease.

Rabies is enzootic in China, but its incidence is negligible in the north where we lived (and the dog was hardly behaving strangely). Reading *Mad dogs and Englishmen* reminded me of the incident; despite what sometimes seems the authors' view, it is not just the English who are subject to phobias about this disease (and I remain to be convinced that they are peculiarly attached to dogs). Rabies has always understandably attracted universal horror. While consensus on the need for control and the desirability of eradication can readily be achieved, its variability and uncertainty over the incubation, symptoms and transmission have always resulted in uncertainty and arguments over its incidence and how to meet it.

These features figure largely in the excellent overview provided by Pemberton and Worboys of the history of rabies, and of human attitudes to rabies, in England during the past two centuries. They set out to address four main themes: changes in the medical understanding of rabies (primarily in the nineteenth century), the differences between professional and lay understanding, the role of the state in meeting the disease and aspects of the history of dogs in Britain. Their account is particularly good on the manner in which, before the first Reform Act, fears of lower-class upheaval ran parallel with concern over the rabid dogs of the latter. As befits social historians, they are careful not to be judgemental—although some aspects could warrant rather more comment. Thus, late-nineteenth-century control measures exempted foxhounds from muzzling—but not sheep-dogs and other farm dogs.

Mad dogs and Englishmen is social rather than medical or veterinary history. Modern findings on the aetiology and pathology of rabies are revealed only near the end, while

epidemiology is hardly touched upon (a short article by Henry Carter on 'The history of rabies' in volume 9 of *Veterinary History*, can be recommended in this respect). The authors argue that this allows the reader to "better appreciate past ideas and actions in context" (p. 3), and this may be so. At the same time, it can be frustrating. According to Carter, rabies was always epizootic rather than enzootic in Britain; Pemberton and Worboys offer no opinion, although, if it was so, it represents a critically important context to their story.

They do offer a judgement on the efficacy of "muzzling" dogs in eradicating rabies at the turn of the century. It was unlikely to have been as great as claimed by contemporary bureaucrats and politicians: "the muzzle was a cumbersome piece of technology. It was of little use as a restraint on a rabid dog" (p. 162). Further, although the authors do not stress this, eradication was made relatively easy because rabies was not enzootic in Britain, and port controls were likely to be more effective than border controls in continental Europe. Finally, rabies never became enzootic in British foxes, as it did on the continent (that would have posed an interesting conundrum for foxhunting politicians). Strict quarantine may now seem outmoded, but it had its value in the recent past against this zoonosis.

A final point: at £45, the publishers should have been able to include a bibliography and avoid the abundance of typographical errors in this book.

John Fisher,

University of Newcastle, NSW

Roberta Bivins, *Alternative medicine?*

A history, Oxford University Press, 2007, pp. xvii, 238, illus., £14.99 (hardback 978-0-19-921887-5).

The history of medicine has for some time lacked an accessible historical overview of so-called alternative medicine. Robert Jütte's *Geschichte der alternativen Medizin* (Munich, 1996) is a notable exception; alas it remains

untranslated. Roberta Bivins' book is therefore a welcome attempt to fill this gap, its compact size belying the extensive nature of its content.

The reader is introduced to the basics and history of western, traditional Chinese and Indian Ayurvedic medicine, highlighting the surprising similarities in the different cultures' medical cosmologies. In examining Chinese moxibustion and acupuncture, Bivins then illustrates the intercultural exchange of medical knowledge through lay and medical networks and its adaptation to prevalent western beliefs. Moxibustion against gout was enthusiastically taken up by eighteenth-century westerners, but suitably adjusted to eliminate "disturbingly foreign elements" and conform to western medico-theoretical frameworks. This would also be its downfall when the latter altered. Acupuncture resembled no existing procedure and was long ignored, re-emerging in 1820s orthodox practice as a pragmatic "trial-by-error needling *in locus dolenti*". While it too fell out of favour, Bivins suggests that its popularity may have influenced the rise and acceptance of the needle as a medical instrument. Western alternatives are represented in the guise of homoeopathy and mesmerism. Unlike their "foreign" counterparts, both originated as reform movements within orthodox medicine, only gradually relocated outside the mainstream by a profession hostile not only to the therapies, but to some of the social changes these practices advocated. Moving beyond western spheres, a most interesting contrast is given by examining the impact of both orthodox and alternative western medicine in colonial India. Orthodoxy, with all its claims of superiority and intrinsic opposition to existing Indian medicine, as well as its close ties to colonial administration, was mistrusted. Western scientific medicine, and germ theory's supposed novelty and superiority in particular, were contested in light of existing Ayurvedic concepts and arguments for Indian medicine already being "scientific". Homoeopathy and mesmerism meanwhile were more readily accepted, as

they were not tainted by association with the colonial elite and could often be accommodated within local cultural and medical understanding.

Overall, Bivins shows that alternative practices and an interest in heterodoxy have been permanent features in the medical world. As the rise of biomedicine diminished the patient's power to influence orthodox medical practice, increasing consumer dissatisfaction made alternative, complementary and cross-cultural medicine a more attractive proposition, thus ensuring that the medical marketplace remained as varied as ever. The Indian example reminds us that our understanding of *mainstream* and *alternative* must be questioned, something already hinted at in the use of a question mark in the book's title, as even the bastion of orthodoxy can be the mistrusted "outsider" when introduced into a different cultural context. Bivins' own positive experiences with both alternative and mainstream healing clearly inform her judgement throughout this book, resulting in an unbiased analysis that should give pause for thought even to the more obstinate members of the western medical profession.

The task of fitting the breadth of topics covered into a small tome could have become the book's Achilles' heel, as the author tackles classical and modern, western and eastern themes over four centuries. Happily, Bivins' already remarkably compendious account is complemented with a list of recommended further readings, thereby ensuring that interested readers can go beyond the provided text, following up themes in greater depth if they so wish. Combined with a lucid and engaging writing style, the resulting book is as accessible and entertaining to the layman as it is informative to scholars of the history of medicine seeking to familiarize themselves with alternative and cross-cultural perspectives.

Felix S von Reiszitz,

The Wellcome Trust Centre for the
History of Medicine at UCL