

victory of clear terminology based on familiar English words over Wright's commitment to a technical vocabulary of teeming neologisms that seem as barbarous to us as to his contemporaries.

Edwards does not succeed in showing that "control" was meaningless, though he does illustrate a fundamental shift of sense over the three decades covered by this study. The MRC in the 1920s did not demand control groups, but rather wanted as much as possible to hold all variables constant apart from the one under investigation. His charge depends on their failure to articulate a definition in the (predominantly) very short articles that make up their side of the disputation, and he does not look for an explicit doctrine in other sources such as textbooks. Advocates of (controlled) randomized trials, especially Hill, were at pains to expound their methodology. Edwards draws on a generation of scholarship, including several well-known but unpublished dissertations, to show how much these rationales ignored, and how differently the "gold standard" methodology functions in real life from the ideal. He also gives many examples of incoherent journalistic invocations of "control", offering little beyond admiration for those modern types who know how to take charge and leave nothing to chance but randomization itself.

Theodore M Porter,
University of California, Los Angeles

Mark Harrison, Margaret Jones,
and **Helen Sweet** (eds), *From western medicine to global medicine: the hospital beyond the west*, Hyderabad, Orient BlackSwan, 2009, pp. x, 489, Rs 795.00 (hardback 978-81-250-3702-6).

In order to understand how western medicine "came to be the dominant form of medicine around the world", Mark Harrison remarks in his introduction to this timely set

of essays, it is necessary to examine "the institution which has, more than any other, come to symbolize Western medicine—the modern hospital" (p. 1). Although neither this observation nor Harrison's remark that in most extra-European countries the hospital "has become the main focus for the dissemination of Western medicine" (ibid.) is strenuously put to the test (as by considering the relative impact of disease-eradication programmes), it is undeniable that hospitals were highly influential in the spread of western medical ideas and practices and in the creation of new medical institutions and structures around the globe. Nor is there reason to doubt that the neglected study of the hospital in Asia, Africa and beyond can provide fresh insight into how western medicine was propagated and perceived. Although Harrison's introduction presents a wide overview, tracing the history of the western hospital back to the early phases of European expansion, the fourteen essays in this volume focus almost entirely on the period from the 1840s to the present. Among the region-specific studies, five—Julie Parle on a Natal mental institution, Walter Bruchhausen on missions in Tanzania, Anne Digby on Victoria Hospital, Lovedale, Helen Sweet on missionary medicine in Zululand and Simonne Horwitz on a Soweto hospital—relate to southern or eastern Africa, while one other, by Guillaume Lachenal, rather oddly looks not at a hospital but at the Pasteur Institute in the Cameroons after 1945. A similar number of essays encompass colonial and post-colonial South Asia—India, Ceylon, Nepal and Bangladesh (by Seán Lang, Margaret Jones, Ian Harper and Shahaduz Zaman respectively)—while David Hardiman's widely ranging essay on mission hospitals draws extensively on Indian material. The three remaining pieces—Robert John Perrins on Manchuria, Hormoz Ebrahimnejad on nineteenth-century Iran, and Philippe Bourmaud on late Ottoman Palestine—further add to the regional mix.

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Although the nature of the hospital is broadly understood—dispensaries, maternal and plantation hospitals and mental asylums all receive consideration—there are other kinds of hospitals, such as the lock-hospital and military hospital (critical to sustaining the imperial presence and the extension of western medical control), which might usefully have been included. Only Zaman's anthropological take on a contemporary Bangladeshi hospital really gives insight into what happens in a hospital ward and offers illustrative evidence of the interconnectedness between life inside and outside the hospital (and more than any other contributor highlights the hospital's gendered problematic). While the essays explore diverse sources and themes, two topics emerge as being of paramount interest. One is the trans-regional role of the missionary hospital as a pioneering site of medical intervention and of the "clinical Christianity" that inspired so much western medical endeavour, formed the frontline of interaction with indigenous healing practices and beliefs (a relationship, often explicitly confrontational, that could be tacitly accommodating too), and in some instances was instrumental in stimulating the creation of rival, non-Christian institutions. The fate of the mission hospital (and those who served it) in a post-colonial world is interestingly explored in several essays. The other major theme is race—most extensively examined in the African cases taken up by Digby, Horwitz, Parle and Sweet—where hospitals and asylums became the exemplars of racial difference and ideas of western superiority or articulated the gross inequalities and political paradoxes of the Apartheid years. But the volume as a whole brings out the complexity even of these seminal issues in showing how hospitals (again especially mission hospitals) might constitute the leading edge of rivalries between political powers (as in Palestine) or foreground the conflicts inherent within colonial regimes (as between planters and government in nineteenth-century Ceylon). The quality of the essays in this volume is uneven (the editing sadly still more so), but

the overall impression created is that, while the empirical material is enormously rich and varied, and the mission hospital had a particularly influential and emblematic role, only an interim statement can be made as to what the extra-European history of the hospital might truly represent.

David Arnold,
University of Warwick

Ayesha Nathoo, *Hearts exposed: transplants and the media in 1960s Britain*, Science, Technology and Medicine in Modern History Series, Basingstoke, Palgrave Macmillan, 2009, pp. xv, 262, illus., £52.00 (hardback 978-1-4039-8730-3).

This is a timely and well-crafted contribution to current media debates over the moral and ethical responsibilities of the medical profession. Given today's furore over organ donation, it provides a much-needed historical dimension to the anxieties facing physicians, surgeons and patients about the limitations and responsibilities of medical know-how. Through analyses of much previously un-theorized newspaper and magazine articles, medical association records and correspondence, Nathoo has situated the transplanted heart not only in terms of practical expertise, but also in the context of what we would now term the "trial by media" debates of the 1960s: *should* we transplant organs, even if it is mechanically possible to do so? What is the exact point of death? What is the status (and responsibility) of the cardiac surgeon? This latter question was asked again and again as Christian Barnaard, the cardiac surgeon responsible for the first "successful" heart transplant, was alternately sanctified and vilified by the media, and by a public that was more informed (and judgemental) about the role of the medical profession than ever before.

Nathoo provides a rich account of a process of increasing public intervention in the practice of medicine in general, and