homoeopathy also continued to enjoy élite support in America from 1900–40 according to Naomi Rogers, such not declining with the discoveries of Pasteur and Koch. This overturns Kaufman's "medical heresy" thesis, Rogers claiming homoeopathy declined rather through educational reforms and marginalization by the Rockefeller Foundation.

Despite some "Hahnemann bashing" borne of inadequate contextualization, this is a useful volume revising stereotypes surrounding homoeopathy and showing how patient motivation varies with social, national and historical context. Homoeopathy's versatility, perhaps its universality, comes across clearly, suggesting its future survival is assured.

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Howard Phillips and David Killingray (eds), *The Spanish influenza pandemic of 1918–19:* new perspectives, Routledge Studies in the Social History of Medicine, London and New York, Routledge, 2003, pp. xxii, 357, £65.00 (hardback 0-415-23445-X).

Like volcanic eruptions, we are told that another large influenza pandemic is expected soon. However, unlike seismic activity readings there are few warning signs which virologists can exploit. This volume illustrates that history can, and should be, a key component in the bureaucratic toolboxes of states and international organizations with responsibility for disease control. There are some excellent papers here which illustrate the potential for this type of expertise. Their focus is a pandemic which is still (just) within living memory, and which claimed the lives of over 30 million worldwide in less than six months.

It was interesting to see how the SARS outbreak in 2003 drew for historical comparison on the nineteenth-century cholera crises rather than on this more recent and much more devastating influenza pandemic. Indeed, several of the papers in this volume examine the anomaly of this forgotten crisis. Myron Echenberg's study of Senegal and James

Ellison's anthropological investigation of tribal memory in Tanzania pick up oral history which is skewed towards parallel, but equally devastating events of famine and plague. The 1919 influenza pandemic in Africa persists in the margins of colonial history, variously identified by its focus (administrative) and its style (paternalistic). For other geographical regions the pandemic and its historical analysis are coloured by the other destructor of the early twentieth century—the First World War. Indeed the transmission of influenza outwards from the European epicentre of the conflict by troops returning home to Canada, Australia and other far-flung colonies serves to highlight the truly global impact of the war.

It was the Canadian troops returning home in 1919 who took influenza with them, "its tentacles reaching into smaller communities along trade and transportation routes". The paper by Ann Herring and Lisa Sattenspiel which models the impact of infectious disease on the community/family level, and that by Jeffery Taubenberger on the exhumation of victims buried in the arctic permafrost in an attempt to identify the genetic characterization of the 1918 virus, are two of the most innovative responses to the problem of how to mine this brief but devastating event for information that might prove useful to future virologists.

Howard Phillips and David Killingray as editors have had a tricky job in bringing these papers together into a coherent structure. They have selected papers from the 1998 international conference to address key headings: virological and pathological perspectives; contemporary medical and nursing responses; contemporary responses by governments; the demographic impact; long-term consequences and memories; and epidemiological lessons learnt from the pandemic. These are all exemplary themes, and there are some fine papers here which use the pandemic as an effective magnifier for some fascinating wider debates (Andrew Noymer and Michel Garenne on the impact on sex-specific mortality differentials in the USA, to name but one). The editiors have striven to achieve a global coverage to match that of the pandemic, but several of the papers are disappointingly thin,

both in terms of length and their ability to provide the "new perspectives" which the title promises. We are little wiser about the extent of the pandemic in Asia or in Africa from this volume; there is nothing on Latin America. It is, of course, almost impossible when the raw data is limited or unreliable, yet the editors do not attempt to draw out the comparative perspectives on what they do have to work with, apart from a short introductory essay. However, these papers, which would have benefited from some cross-infection, provide a very useful introduction to a neglected episode of global significance, and raise many more interesting questions than they are currently able to answer.

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Anna Lundberg, Care and coercion: medical knowledge, social policy and patients with venereal disease in Sweden 1785–1903, Report no. 14 from the Demographic Data Base, Umeå University, 1999, pp. 309 (91-7191-675-X).

Anna Lundberg's book covers a number of topics related to venereal disease in nineteenthcentury Sweden such as political ideas, legislation, medical knowledge and practice, social characteristics of patients treated at hospitals, and the social and health consequences of being hospitalized for a venereal disease. Lundberg has undertaken a huge task in analysing a wide variety of material in order to tell the story of venereal disease in Sweden. The sources studied include transcripts of parliamentary debates, laws, medical journals, patient records, records from parish meetings, etc. The reader is presented with many interesting stories about both doctors and patients. It sometimes seems as if the author wants to share with us most of what she has gathered together. The amount of information sometimes overshadows important findings, such as the change from the view of venereal disease as connected with poverty to that of its being connected with immoral behaviour.

The most interesting findings result from Lundberg's analysis of the demographic lifecourse of patients from one hospital during 1814-44 and from another during the following forty-five years. She shows that the majority of patients with a venereal disease did not suffer serious social or health consequences from being hospitalized. That is to say, they got married like others. One important exception is that mortality among the patients discharged from the first hospital was higher than that among the control group. Children born to former female patients also had a high mortality rate at the first hospital. Patients discharged from the second hospital investigated had hardly any excess mortality as compared to the control group and the difference in infant mortality was smaller than among patients from the first hospital.

There are some problems with the study. The patients are compared to a control group, described as "similar men and women". This, however, is not a satisfactory description of the control group sampling. There was no infant mortality at all in the offspring of the control group of the first hospital. This gives the impression that the control group was neither representative in terms of the rest of the population nor comparable to the patient group, because the general level of infant mortality was so high (around 15 per cent) at the time that one would expect at least some mortality also in the control group. When the geographical distribution of patients is studied, it is not calculated in relation to the population, hence we do not know if the high numbers are due to a big population in the area or a high frequency of venereal disease and therefore if it is of special interest to study the areas with many patients. The author also gives some surprising interpretations of her results, as when she says that there was no significant gender difference between the patients at the department of venereal disease and the general hospital, in spite of the fact that the women constituted 61 per cent of the patients at venereal departments and only 43 per cent at the general wards.

The book would have gained from a clearer focus from a more selective use of the extensive information, and especially from more careful