

## Book Reviews

the cause and the control of beriberi in other parts of the world. Much of this work was done by competing research groups operating in Japan, Britain, France and, last but not least, the United States.

Importantly, Carpenter recognizes that the results of the investigations conducted by these groups contributed to Eijkman's success in solving the mystery of beriberi's aetiology. All this research work was also crucial to the discovery of the various means adopted to prevent—and treat—the disease. This included the use of vitamin supplements, as well as certain changes in cultural practices, most notably, adaptations in the methods of milling and preparation of rice. Carpenter's internationalist perspective is a major strength of his work, and one that is worth emulating in other detailed studies of specific diseases.

All in all, the book is interesting and easy to read, which makes it useful for both general and specialist readers. It is, to my mind, particularly appropriate for undergraduate study, as the work can be effectively used to describe the complexities of the research method to candidates hoping to go on to pursue doctoral work. However, if there is a weakness in this book, it lies in the conscious effort on the part of the author to avoid a detailed examination of the social responses to the beriberi trials and the medical innovations they engendered. Seen from this perspective, Carpenter's work represents a genre of history writing that concentrates on the nature and effects of laboratory and field trials, rather than studying the effects of the introduction of their results in general society. Medicine is, after all, an intensely social phenomenon, and it is, therefore, important to understand the complex social and political reactions to the introduction of new medical technologies. This, of course, allows one to prepare a more rounded picture of officially sponsored efforts to tackle the effects of damaging diseases. It is worth noting here that while new medical practices tend usually to be

carefully designed in laboratories, they are implemented by a wide range of administrative staff, many of whom have little—or even lack—formal medical training. The introduction of medical innovations into society, therefore, usually tends to be a complicated affair, especially in colonial contexts (in this case, the Dutch East Indies). To be fair to Carpenter, this topic is a big one, and can be made the theme of another book.

**Sanjoy Bhattacharya,**  
The Wellcome Trust Centre for the  
History of Medicine at UCL

**Robert I Rotberg** (ed.), *Health and disease in human history: a Journal of Interdisciplinary History reader*, Cambridge, MA, and London, MIT Press, 2000, pp. viii, 345, £41.50 (hardback 0-262-18207-6), £16.95 (paperback 0-262-68122-6).

The *Journal of Interdisciplinary History* has long been involved in publishing interesting and challenging historical research on the impact of environmental and epidemiological factors in the past. This collection of articles demonstrates the breadth and variety of this work with studies of famine, nutrition, migration, sanitation, disease and—above all—mortality which range from London to Edo, and from the sixteenth to the twentieth century. Its contents include several pieces on aspects of mortality and morbidity in England from the sixteenth to the nineteenth century, together with work on fertility and disease in nineteenth-century Italy, urban sanitation in Japan, smallpox in central and southern America, nutritional deficiencies among Caribbean slaves, mortality in colonial Chesapeake and child mortality in Southwest United States. Even genetic isolates in Oregon get a look in.

Robert Rotberg's introduction to the collection suggests that the essays were

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chosen to “exemplify the best work” (p. 1) that the *Journal* published in this area between 1975 and 1996. It is a selection strategy which—despite the individual worth of the articles—prompts as many questions as it answers. While the willingness of the *Journal* to publish such work in the first place can only be applauded, the point of producing this collection is unclear. Most substantial libraries will already have runs of the journal itself. The lack of a clear periodic, geographic or thematic focus means that most readers are unlikely to be interested in obtaining the entire book when they are concerned with only one or two of the articles. For much the same reason, it is unlikely to be drawn on as a course text for students. Indeed, considering that several of these articles were written in response to earlier pieces in the same journal, the failure to reprint both sides in the debate further limits its potential pedagogic uses—as well as leaving the general reader with a sense that they need to go back to the journal to look at the original arguments that are being challenged. Smaller flaws also mar the collection. Despite the bulk of the introduction being taken up by summaries of each article, there is no attempt to guide the reader to other work on the questions addressed, even though several of the pieces date from the 1970s. The decision to reformat articles and employ new page numbers without indicating the original numbering will make referencing difficult. The *Reader* also raises the more substantial question of what means should be used to disseminate archives of journal articles? Considering both MIT and the MIT Press’s position at the vanguard of academic communication over the internet, it is somewhat surprising that they should choose this rather limited method in which to make the past content of their journals available.

**Patrick Wallis,**  
University of Nottingham

**Joan Lane,** *The making of the English patient: a guide to sources for the social history of medicine*, Stroud, Sutton Publishing, 2000, pp. xv, 208, £25.00 (hardback 0-7509-2145-5).

This social history of medicine traces the process and experience of medical practitioners as well as the patients who were suffering from illness. Whereas traditional medical history research focuses on scientific discoveries and their application, this guide takes the human approach—chronicling first-person accounts of exactly what it was like to be a medical student in eighteenth-century London and how patients suffered from and were treated for ailments such as smallpox and venereal disease.

It is important to note that much of the material has never before appeared in print. Included are excerpts from diaries, office records and correspondence from all the English counties and London. National surveys are also integrated into the book chapters.

Each chapter is organized by subject, such as ‘Patients’ own accounts of illness’, ‘Medical apprenticeship and training’ and ‘Hospitals, lunatic asylums and prisons’. Within each chapter, the compilation of primary sources is chronological, usually beginning in the early 1700s and many times spanning almost two centuries. Though random diary entries, medical directories, press reports and advertisements may seem like impossibly diverse material to compile in a coherent manner, the author binds this material together with a brief but thoroughly engrossing introduction at the beginning of each chapter. These introductions allow even the novice medical historian to understand the context in which diary entries and other such first-person accounts were written.

In addition, short introductions are also included before individual entries, giving important background on the particular person, institution or disease being