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became possible in this tradition. A belief, say, in the slum's deleterious effects on health (and thus its immorality) was compatible at times with a thesis of racial degeneration: the environment as if grafted into the body (transferred from one ecology to another) and then reproduced across future generations in a spiral of decline. Regeneration and rejuvenation were simply the other side of this coin. A chapter on the campaign for national revival and sport shows a movement obsessed with formidable drift to degeneration, to some nadir of unfitness. Calls for social welfare, physical training, and drastic "surgery" against those elements beyond the pale of the social order could be made simultaneously. Old republican hostilities to the non-productive classes were renewed in clinical terms. As René Waldeck-Rousseau, Minister of the Interior put it, incorrigibility faded into incurability: "[We need] a new punishment for the effective and energetic repression of these incurables of vice, these incorrigibles of misdemeanour and crime, who wilfully live outside the boundaries of society, struggle openly against it, and through their repeated infractions, pose a serious and continuous threat to public tranquility."

No doubt many of these images have a certain pertinence today, with the resurgence perhaps (in these very different social and political circumstances) of the rhetoric of degeneration—parasitism, competition, fitness . . . the host of enemies without and within? In that sense, the fictions of the turn of the last century, from *The war of the worlds* to *Germinal* still have their echoes, real or imagined, for the turn of ours.

Nye's essays necessarily raise many more themes than they fully engage. But there are some strange under-emphases. The novel, for instance, though clearly important to the subject (to the consolidation of new narratives, a whole historiography, conflating the organic and the social, linking the crises of body and polity in one imaginative frame) is given little attention. Moreover, when Zola or Huysmans is mentioned, it is only to illustrate a discourse assumed to have been forged elsewhere. To a peculiar degree, in fact, degenerationism in the late nineteenth century was produced in a continual refraction between scientific and literary languages. A whole story of decline, civilisation and its discontents, the fall of empires, is therefore at issue in Nye's book but sometimes beyond the terms of the discussion.

What is valuably evoked, however, is the conceptual unity of social pathologies in the debates before 1914. Crime, madness, alcoholism, perversity, anarchism, prostitution, and so on were all aspects of an apparent synthesis, a singular process of national performance. Every crime or suicide became a statistic in an anxious European competition for survival. It may have taken the first world war, Nye suggests, to prove that Europe was not dying slowly of incurable illness, but, on the contrary, had the capacity to unleash hitherto unparalleled harm programmatically upon itself.

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JONATHON ERLEN, The history of the health care sciences and health care 1700–1980: A selective annotated bibliography, New York, Garland, 1984, 8vo, pp. xvi, 1028, \$100.00.

Our typical response with bibliographies is to be glad that scholars compile them, but to grumble that they don't match up more closely to our needs; and Jonathon Erlen's is no exception. Its most conspicuous virtue lies in bringing conveniently between two covers some five thousand references to books, articles, and (extremely valuably) unpublished dissertations in the field of the history of medicine, broadly considered, over the last three centuries. Many of these entries are annotated; and although the annotations are merely descriptive rather than critical, the annotation nevertheless performs a useful service, especially when publications have cryptic or misleading titles. My spot checks suggest that Erlen's bibliographical information is reliably accurate.

Erlen has organized his citations in a single alphabetical sequence of subject headings, from ABDOMEN through to YELLOW FEVER, which makes it a quick-to-use guide for the researcher anxious to discover, at a glance, what to consult on the DRUG INDUSTRY, on

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TYPHUS, or JAW FRACTURES. It must be noted, however, that the names of medical men do not appear in this alphabetical listing, hence it is not a particularly helpful guide to the scholar concerned with medical biography, especially as the index also fails to provide a way-in to great names. The absence of running heads, moreover, leaves the book exasperatingly more difficult to consult than it need have been, and the system of cross-referencing is also rather rudimentary.

The proof of the pudding is in the eating: does this selective bibliography actually contain the choice items in the categories listed? Unfortunately, the volume is very hit-and-miss in what has been included and what left out. Look up ANEMIA and you find an entry; look up CHLOROSIS and there's nothing, despite the recent admirable publications by (amongst others) Figlio and Loudon. Look up CHILDREN and there are numerous items, but the fundamental work of Philippe Ariès has been left out; look up CHINA and Joseph Needham's magisterial oeuvre is omitted; try CHOLERA and Margaret Pelling's fundamental monograph isn't listed; go to CONTRACEPTION and the standard writings of Angus McLaren aren't there; look under ALCOHOLISM and the seminal paper by Bynum is missing. Similarly, certain topics get plenty of insertions, but others hardly get a mention (is there any real point for example in listing just one single entry under the heading ANTHROPOLOGY: a Johns Hopkins MA thesis of 1973 on Freud and anthropology, when surely what the reader requires are references to the extensive literature on the involvement of nineteenth-century medical men in the development of physical anthropology, and some guide to contemporary medical anthropology?).

Of course, given the oceans of recent scholarship in the history of medicine, a bibliography like this must be selective; and no compiler can be an expert in all fields. But too often here the reader cannot feel confident he will be selectively guided to the most important publications. The lack of an extensive introduction, and of a systematic classification of entries means that the reader is wholly thrown back upon the alphabetical listing, which sometimes is fruitful, sometimes at best patchy. Erlen's will not take its place on the shelves as a definitive guide, but rather as a useful source of stimulus.

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RUDOLF VIRCHOW and RUDOLF LEUBUSCHER (editors), Die medicinische Reform. Eine Wochenschrift, erschienen vom 10. Juli 1848 bis zum 29. Juni 1849, Berlin, DDR, Akademie-Verlag, 1983, 4to, pp. iv, 276, M 70.00.

The movement for medical reform in early nineteenth-century Germany, described by Kurt Finkenrath (*Die Medizinalreform. Die Geschichte der ersten deutschen Standesbewegung von* 1800—1850, Leipzig, 1929), came to a climax during—and as part of—the Revolution of 1848. Both Erwin H. Ackerknecht ('Beiträge zur Geschichte der Medicinalreform von 1848', *Sudhoffs Arch. Gesch. Med.*, 1932, **25**: 61–109, 113–183) and Johanna Bleker ('Die Medizinalreformbewegung von 1848/49', *Deutsches Ärzteblatt—Ärztliche Mitteilungen*, 1976, **73**: 2901–2905, 2982–2988) have shown how medical reform was an integral part of the political, revolutionary developments of 1848–49. The most significant periodical at the time to argue for radical medical reform was a weekly, *Die medicinische Reform*, edited by two young doctors, Rudolf Virchow (1821–1902) and Rudolf Leubuscher (1821–61). The first twenty-six of the total of fifty-two issues were edited jointly by the two friends; the subsequent ones by Virchow alone. Publication of their weekly was not a lucrative venture, and circulation was restricted to a mere 230 or so copies.

The reform movement was two-pronged: it wanted an improvement in the organization of both the medical profession and public health. It advocated the integration of disparate groups of medical practitioners, the integration also of medical education between the different German States, and the development of a scientific medicine based on materialistic principles. To Virchow, medical reform was, above all, a matter of revolutionary politics. The medical profession had to be concerned with not just medical questions in the narrow sense of the word, but also social and thus political conditions. Characteristic is the following sentence