

Book Reviews

ROY PORTER (ed.), *The popularization of medicine, 1650–1850*, Wellcome Institute Series in the History of Medicine, London and New York, Routledge, 1992, pp. x, 295, illus., £50.00 (0-415-07217-4).

The translation of professional medical knowledge into language the public can comprehend and employ for home treatment and health maintenance has long been an important activity in Western medical culture. Since the Enlightenment particularly, instruction in matters medical has seemed a crucial element in equipping men and women to control their destiny. Historical examination of the process of medical popularization has nevertheless been occasional and incomplete. This volume, a collection of papers presented at a 1991 conference at the Wellcome Institute, stimulates a more serious appreciation of the significance and complexity of lay medical literature.

The reader should be forewarned that the book can give a misleading first impression. The table of contents, after all, intersperses titles that specify quite distinct aspects of the popularization process in England among others that indicate general surveys of popularization in three Continental countries, as well as America. The suspicion that this is but another addition to that tried and tired genre of the medical historical miscellany proves unfounded, though, for while individual essayists do concentrate on specific locales, eras, and themes, their examination of the elephant is carried out from so many sides that a complete outline of the creature emerges in the end.

The chapter dealing with the American experience provides the most thorough treatment of the content and context of popular medical guidance. Norman Gevitz cogently analyses the growth of domestic medicine manuals, from the colonial period to the mid-nineteenth century, as an expression of nationalism and national character. Yet as independent as New World authors professed to be, they still often only “Americanized Buchan”, the Scottish popularizer par excellence. In other settings, William Buchan and his Swiss counterpart S.-A. Tissot were Gallicized or Hispanicized, those two authors clearly dominating the field of popular medical education throughout Europe well into the 1800s. Enrique Perdiguero, for example, demonstrates in considerable detail that the work of informing the public during the Spanish Enlightenment was accomplished primarily through repeated translations of their works. Maria Szlatky shows that the medical Enlightenment in Hungary relied overwhelmingly on translations and imitations of Tissot. In France, Matthew Ramsey reports, there was in fact a volume titled *The French Buchan*. Even the doctrine of the non-naturals, the traditional philosophy of hygiene, was made most accessible, as Antoinette Emch-Dériaz explains, by Tissot.

Ramsey’s contribution, like Gevitz’s, strikes an even balance between the factual and the analytical. Concentrating on medicine in France, he characterizes evolutionary stages of popularization, and explores Enlightenment physicians’ rationalizations of their educational mission. The other articles on Continental countries tip heavily toward the information-laden survey; the English situation, on the other hand, is given closer theoretical scrutiny by virtue of being divided into several smaller parcels. Thus Andrew Wear confines himself to the sixteenth and seventeenth centuries, highlighting the variety of offerings generated by the ferment of Galenism, Paracelsianism, religion, and magic. Roy Porter’s brief but insightful coverage of the Georgian age focuses on the relations between political and medical radicalism, particularly physician-authors’ uncertainty over whether the right to health could be realized by teaching and exhorting people to take care of themselves, or if firm medical control was required to save the masses from their ignorance and self-neglect. Eighteenth-century writings on surgical self-treatment constitute Philip Wilson’s subject, one that he uses to clarify how popular literature could be intended not just to teach, but also to set boundaries on patient ambition and advertise the superior skills of professional practitioners. Mary Fissell dissects the *Erra Pater*, a popular eighteenth-century “almanac”, in order to discuss questions of how home medical manuals were marketed, used, and understood by lay readers. Finally, Stephen Jacyna draws on the personal records of an 1820s Londoner (as well as of his doctors) to construct a fascinating account of how a client’s understanding of medicine could shape the physician-patient relationship. And vivifying all these issues, it should be added, was what Porter

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calls “the politics of knowledge dissemination”, the tension between the desire to enfranchise the masses medically and the need to keep potentially dangerous knowledge in competent hands.

These chapters hardly exhaust the subject, of course. Porter’s compendious introduction acknowledges as much, but also rightly suggests that the value of this work is not simply that it explores several new patches of territory, but that by raising many broad questions about the nature of popularization, it “points the way towards a more comprehensive history”.

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VIRGINIA BERRIDGE and PHILIP STRONG (eds), *AIDS and contemporary history*, Cambridge History of Medicine series, Cambridge University Press, 1993, pp. x, 284, £35.00, \$54.95 (0–521–41477–6).

Most of the papers in this valuable collection examine evidence that both precedes and is contemporary with the HIV epidemic, despite the editors’ division of the book into the “prehistory” and the “history” of AIDS. Historians and their colleagues in adjacent disciplines will be greatly instructed by: Jeffrey Weeks on the regulation of sexuality in Britain; Jane Lewis on British public health doctors’ long search for a role and recognition; Bridget Towers on medical screening in the United Kingdom; Ilana Loewy on the history of the Wassermann reaction; Paul Weindling on the use of militaristic models in international policy to control sexually transmitted diseases; William Muraskin on responses to Hepatitis B in the United States in the 1970s and early 1980s; Virginia Berridge on continuity in British drug policy; Warwick Anderson on the politics of needle exchange in New York (as deduced from printed primary sources); Ewan Fairlie on district authority responses to disease (and on the use of management theory in historical analysis); John Street on the continuing policy salience of the epidemic in Britain; and Monika Steffen on AIDS policies in France. Janet Foster’s appendix on the “archive potential” of AIDS is a useful guide, although she ignores electronic data about patients collected as a result of clinical investigation during the epidemic.

The only paper not mentioned above is Harden’s and Rodrigues’ celebratory history of research policy at the National Institutes of Health in the United States. The authors defend their employer’s contributions to scientific progress. But they do not even foreshadow the important story: NIH leadership in mobilizing investigators and patients for community-based trials, and the vast expansion of women and members of minority groups among research subjects.

The authors are poorly served by a curious title, an embarrassing jacket illustration, and an opaque introductory chapter. The title adds a third, unexplained, category to those of “prehistory” and “history”. The jacket illustration is epidemiologically incorrect; it identifies “risk groups” rather than risky behaviour. Berridge’s introduction strives for historiographic profundity without achieving it.

Two errors require correction. Berridge erroneously claims (p. 12) that the papers on the social impact of AIDS in a 1986 issue of the *Milbank Quarterly* were reprinted as a book in 1988, despite accurate citations by many of the authors in this collection. Towers three times misidentifies Professor Stanley Joel Reiser as Reisler.

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MICHAEL B. TYQUIN, *Gallipoli: the medical war. The Australian army medical services in the Dardanelles campaign of 1915*, Modern History series, Kensington, NSW, New South Wales University Press, 1993, pp. xiv, 277, illus., Austral. \$39.95 (0–86840–189–7).

Gallipoli—widely regarded as one of the most disastrous “sideshow” of the First World War—occupies a special place in the collective memory of Australians. It was there, during the eight-month abortive campaign to wrest the Dardanelles from the control of the Turks in 1915, that some 72,000 Australians lost their lives (albeit, overwhelmingly, to enteric diseases). Michael Tyquin’s *Gallipoli* richly supplements the multi-volume official medical histories of the Australian involvement in the campaign through a focus on the day-to-day experiences of the sick and injured