anthologies of this type, new articles are added or the collection is typically given some freshness with the inclusion of a new introductory chapter by the author explaining the context, connections and interruptions within the articles' themes. But, apart from a short one-and-a-half page preface, there is nothing new in this volume. However, regardless of the book's production, the articles stand well on their own and speak for themselves as wellargued and thoroughly researched examples of good history reinforcing the length and productivity of Curtin's career.

Curtin is a formidable historian. The content of this collection is sound and incontestably interesting. Maybe predictably so, precisely because we have seen everything in the collection before, but this does not detract from the fact that this is a valuable resource. It is a treat to have things made so easily accessible for scholars in the field.

> Anna Crozier, The Wellcome Trust Centre for the History of Medicine at UCL

Margaret Humphreys, Malaria: poverty, race, and public health in the United States, Baltimore and London, Johns Hopkins University Press, 2001, pp. xi, 196, £28.50 (hardback 0-8018-6637-5).

In this relatively brief book, Margaret Humphreys has given us what should become the standard work on the history of malaria in the United States. Gracefully written, perceptive, and well-documented, it will make historians of medicine, public health, and the social history of the American South grateful for her efforts. Humphreys, a physician and historian who has also published a book on the history of yellow fever in the United States, is a reliable and careful guide to all phases of the malaria story, from aetiology, to medical care (or lack thereof), to social context. A Southerner herself, she is sympathetic to the plight of a region that lagged behind the rest of the nation in medical care and, partly in consequence, in health, into the mid-twentieth century. She is, however, unsparing in her critique of the conventions of racism and in enumerating their results for African-Americans.

Humphreys begins with a careful review of malaria in the colonial era and works through the nineteenth century, all the while aware that historical reports do not reliably identify malaria as a distinct disease. Along the way there are pauses to consider the effect of slavery on the onset and endemicity of malaria, the roles of vivex and falciparum malaria, and the disappearance of malaria from the old Northwest. She agrees with the sixty-yearold thesis of Erwin Ackerknecht that the increasing accoutrements of "civilization" in the upper Mississippi and Ohio river valleys presented diminishing opportunities for mosquitoes to cohabit with and bite humans, such that the complex humanmosquito-plasmodium ecology could not flourish. Under similar circumstances, the occasional malaria epidemics of regions throughout the northern and western United States and Canada came to an apparent end by about 1900.

The book then turns to an examination of the persistence of malaria in the American South into the mid-twentieth century. The author asks "what was it about the South, its people, its topography, its political will" that made malaria such a persistent pestilence? (p. 48). Humphreys is particularly troubled by the historical reality that very quickly, in the first decade of the century, the cause of malaria and means of controlling it were identified and welldemonstrated. Why were these not seized on and implemented in the South?

Her answer is essentially the subtitle of the book: the longevity of malaria was a matter of race, continuing poverty, and the

## **Book Reviews**

failure of the public health infrastructure to mount a consistent attack. In particular, the racism of the South kept African-Americans in rural poverty, which Humphreys suggests kept them near the mosquito breeding places and in dwellings hospitable to adult mosquitoes. She states that this segment of the South's population was the primary reservoir of sustained infection, and it was only the out-migration of African-Americans from these circumstances that finally broke the malaria chain in the region.

There is something disturbing about Humphreys' argument for malariologists and other public health advocates who, short of developing a vaccine, would like to think that malaria is subject to rational control strategies. But Humphreys is quite firm in her point of view, dismissing quinine, drainage schemes and DDT spraying as having significantly controlled the disease. In sum, while this case history may not shed particular light on global malaria issues, it is a readable, informed examination of malaria's recession in a large nation that deserves the attention of anyone studying this fascinating but deadly disease.

> Darwin H Stapleton, Rockefeller Archive Center

Peter C English, Old paint: a medical history of childhood lead-paint poisoning in the United States to 1980, New Brunswick and London, Rutgers University Press, 2001, pp. xv, 254, £57.95 (hardback 0-8135-2987-5).

Old paint is the second of three books on lead poisoning to appear in recent years. In Brush with death (Johns Hopkins University Press, 2000) Christian Warren wrote an impassioned account of the subject, critical of the producers and industrial users of lead, and of a complacent medical and

public health establishment only slowly roused to action. Not only, he claimed, did the lead industry deceive regulators into the belief that lead-paint posed little or no public health risk; not only were public health officials partially blind to the problem of lead poisoning; Warren also invoked a broad range of social, cultural and political factors to explain why the dangers of lead-at work, in the home and in the air-went unrecognized for so long and why so many people suffered and died, adults as well as children. By contrast, Peter C English's book is narrower in scope, has a more sympathetic attitude towards public health officials and the lead industry, and represents the story of childhood lead poisoning as a succession of technical and policy problems addressed conscientiously by lead producers, industrial users and health officials together. His account can be read as a conservative response to the earlier volume. A third book-David Rosner and Gerald Markowitz's Deceit and denial (University of California Press, 2002)—turns critical attention back to the lead industry. It examines how the industry sought to confuse knowledge about the impact of lead on health, and how it continued to promote its product despite considerable evidence of the harm it did to children.

English's book begins with the emergence of concerns about childhood lead poisoning in the late-nineteenth and early-twentieth centuries. The problem first came to notice as a public health issue when a series of sporadic cases, which physicians identified as caused by lead-paint on children's cribs and toys, began to gain epidemic proportions in the mid-1920s. The lead industry, English notes, initially doubted the link between lead-paint and childhood lead poisoning, but abandoned their misgivings following investigations in the 1920s and 1930s by Felix Wormser, secretary of the Lead Industries Association (LIA). The result, according to English, was that concerned manufacturers stopped using