normal cells" (p. 65). In other words measurement of light absorption promised routine distinctions between the normal and the pathological. Such work promised to affirm Bernard's view and unite pathology and physiology through biology. The attempt, however, was subverted by the "false negative" problem. In the real clinical world the qualitative judgement of the pathologist was final.

Biomedicine, the authors say, has reaffirmed the qualitative distinction but by the creation of "new entities and events" such as cell surface markers described in Chapter 4. Although, to iterate the point, it is on the platform in which cell surface markers are used by biologists, pathologists and clinicians in their everyday work that the distinction is transcended. This is dense stuff and occasionally I lost the thread. notably when told "the twentieth-century ... separated the entities that accompany pathological processes from the pathological event itself" (p. 76). The separation of entities and processes was well explained but the "pathological event itself" had the ring of a Kantian, unknowable, Ding an sich about it. It had the same flavour later in the volume when the authors make the judgement: "Despite the continuing redescription of pathological processes in biological terms, the notion of a pathological event resulting in a lesion remains central to the understanding of disease" (p. 331). No doubt other readers will find their own puzzles for although the book spans over 500 pages, the dust jacket might also have proclaimed multem in parvo.

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Aya Takahashi, The development of the Japanese nursing profession: adopting and adapting western influences, Routledge Curzon Studies in the Modern History of Asia, 15, London and New York, Routledge Curzon, 2004, pp. xiii, 209, £60 (hardback ISBN 0-415-30579-9).

This book is the outcome of Dr Takahashi's groundbreaking PhD thesis in which she explores the emergence of the exclusively female profession of nursing in Japan including the concept she terms: "Nightingalism". Japanese nursing historiography has, until recently, fallen very much to the periphery of popular Japanese medical historiography. However, this particular work has been written from an international perspective, and therefore makes a valuable contribution to the trans-national social history both of nursing and medicine. In particular I would recommend readers new to Japanese medical history not to omit the excellent introductory chapter which provides a broad historical overview to the period covered by the book (c.1868-c.1939). Takahashi explains that until the beginning of this period, nursing was an alien concept to the traditional Japanese culture and its introduction was brought about mainly through Japanese doctors who had received a western medical training, i.e. it was introduced as a largely female profession supporting the modernization of medicine rather than one being pioneered by or for Japanese women. This had the effect of inadvertently placing a group of Japanese women, living within the constraints of a highly paternalistic society, within the organized international nursing community of the early twentieth century.

The book is divided into three parts: the three chapters that form Part 1, 'An imported profession', trace the decline in Japanese traditional medicine and the simultaneous modernization of medical regulation, training and practice from the mid-nineteenth century showing how this was directly linked with the "importation" of nurse training and practice from the West. Part 2, 'The development of a Japanese model', explores the significance of the wars with China and Russia, c.1894 to c.1905. In these two chapters the author looks at the Japanese mode of Red Cross patriotism and its influence on the West, post-1900. It was this, Takahashi argues, that was largely responsible for successfully bridging the cultural divide between western ideas and traditional Japanese values of respectability in women, by concentrating on aspects of nursing as patriotic

self-sacrifice and devotion, epitomized by Miss Nightingale, whilst conveniently separating these values from Nightingale's British Victorian cultural ethos and strong Christian background. This section explores the paradoxical situation which existed for Japanese nurses during this period: international attention and admiration was focused upon their role within the Red Cross, which was run with military-style discipline; simultaneously the subordinate position taken by them, which made this high level of organization and orderliness possible. stifled feminist movements and effectively suppressed any moves that might have been made towards autonomous professionalism. The final three chapters which constitute Part 3: "Re-encounter" with western nursing professionalism', continue this theme of "suffocated professionalism" whilst evaluating the role of public health nursing during the inter-war period in Japan. As health centres or "hokenfus" were established, the public health nurses were graded as having extended "hokenfu" status —a higher rank than "nurse", a move which Takahashi argues increased professional divergence by creating a class of nursing "technicians" in contrast with contemporary developments towards professional unity in the UK.

The author challenges current limits of women's history, offering a fresh international perspective. Professionalization is viewed here in a far wider social context and within a comparative framework which contrasts Japanese and British developments in healthcare. Introducing the concept of "suffocated professionalism", Takahashi explores nursing's professional development in a markedly different, heavily paternalistic cultural setting compared with the more familiar western model. Underpinning this fascinating book is a powerful argument for revising current approaches, as well as historically reviewing past attitudes, towards understanding and evaluating the introduction of "westernknowledge" to alternative cultures. This book challenges the customary view that these concepts were accepted in totality as universally rational and reasonable, showing instead that where this assumption was made in the

introduction of modern nursing to Japan, the philosophical and cultural prerequisites were apparently overlooked in Japanese enthusiasm for the socio-economic advantages of modernization. This created what Dr Takahashi describes as a "black hole" in Japanese westernization. The development of the Japanese nursing profession provides a new model in combating such a universalistic approach to historical analysis of the diffusion of medical knowledge.

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Maria H Frawley, *Invalidism and identity in nineteenth-century Britain*, University of Chicago Press, 2004, pp. viii, 292, illus., £27.00, US\$39.00 (hardback 0-226-26120-4).

The overarching objective of Invalidism and identity is to retrieve "the figure of the invalid from the margins of literary, medical and social history" (p. 2). Conducting a detailed analysis of a relatively small number of texts, Maria Frawley explores the contradictions that the invalid embodied—productivity versus waste, liberation versus confinement, virtue versus falsity. A short introduction sets the scene. Chapter 1 then teases out the socio-historical context, associating the culture of nineteenth-century invalidism with both the spiritual values of the Evangelical Revival and the work ethic of the Industrial Revolution. Chapters 2 and 3 focus on texts where the authors were actively seeking cure or relief, either by experimenting with medical remedies or by travelling to search for health abroad, whilst Chapter 4 addresses the writings of those intent upon unpicking the experience of incapacity. In a brief afterword, Frawley invites her "readers to gather round an imaginary sofa" (p. 252) to hear the mid-Victorian novelist, Elizabeth Gaskell, explain "the capacity of the invalid to be at once culturally invisible and fundamentally pivotal to our understanding of the story" (p. 246).

This resort to a literary anecdote is symptomatic of the problems that *Invalidism*