point that the serologist Ludwik Fleck made when he opened his *Genesis and development* of a scientific fact (first German edition, 1935) with observations on the history of a serological diagnosis, i.e. with observations on immunology as a science of the clinic.

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L A Reynolds and E M Tansey (eds), Clinical pharmacology in the UK, c.1950–2000: influences and institutions, Wellcome Witnesses to Twentieth Century Medicine, vol. 33, London, Wellcome Trust Centre for the History of Medicine at UCL, 2008, pp. xxiv, 139 (paperback 978-085484-117-2).

L A Reynolds and E M Tansey (eds), Clinical pharmacology in the UK, c.1950–2000: industry and regulation, Wellcome Witnesses to Twentieth Century Medicine, vol. 34, London, Wellcome Trust Centre for the History of Medicine at UCL, 2008, pp. xxvi, 120 (paperback 978-085484-118-9). Books in this series are freely available online following the links to Publications from www.ucl.ac/histmed; hard copies, £6.00, \$10.00 from www.bertrams.com; www. gardners.com; www.amazon.co.uk; www.amazon.com

I suspect that most of us have been touched, perhaps unknowingly, by the mysteries of clinical pharmacology at some stage in our lives, whether as patients swallowing pills to reduce cholesterol, relieve a headache or treat a perennial bout of hay fever, or as doctors thumbing anxiously through the *British National Formulary* in search of enlightened knowledge about the exact dosage or frequency of prescribed medication. In each case, we place our personal health or that of our patients in the hands of those clinicians and scientists whose job it is to determine the

precise pharmacodynamics and pharmacokinetics of an increasing range of active drugs, and to moderate or eliminate the risk of adverse reactions, particularly from a fashionable tendency to polypharmacy.

In spite of the critical manner in which pharmacological knowledge underpins much clinical practice (and indeed self-medication), we know little about the history of clinical pharmacology or about the nature of its often contentious relationships with the pharmaceutical industry, doctors and academic researchers, and with government (and increasingly European) regulations. These two Witness Seminars were organized to address such issues and, in many ways, they largely succeed in opening up and exploring interesting disciplinary and political questions. Drawing on personal memories of individual and collective career pathways, volume 33 focuses on the early pioneers of the specialty, on the evolution of research and training centres in the United Kingdom, and on the emergence of specialist societies and publications during the decades following the Second World War. Although the story that emerges from the reminiscences of contributors is largely London-centred, there are constructive accounts of developments elsewhere, including Scotland and Wales. Broader international links, and particularly the role of the World Health Organization, are only briefly mentioned (although they deserve greater historical scrutiny), but there are challenging accounts of the obstacles to professional recognition, especially within clinical settings, and of the enduring (and laudable) concern amongst British clinical pharmacologists to improve the safety of prescribing amongst newly qualified junior doctors.

Focusing on relations with the pharmaceutical industry and on the growing regulation of medicines following the thalidomide tragedy, volume 34 contains material which is perhaps more directly useful to historians of medicine. The picture of the industrial contours of clinical pharmacology

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that emerges from the first half of the discussion offers constructive insights not only into the heterogeneity, and alleged "social blindness", of the pharmaceutical industry, but also into the manner in which innovative training schemes often required, and clearly benefited from, close financial and intellectual engagement between pharmaceutical companies and academic departments. The second half of the Witness Seminar focuses largely on the growing regulation of medicines in the post-war years by the Committee on Safety of Drugs (later the Committee on Safety of Medicines), the Medicines Act of 1968, the Medicines Commission, and, more recently, the Commission on Human Medicines. The transcript is illuminating, effectively revealing the personal and political determinants of decision-making, the persistent under-resourcing of regulatory authorities, the on-going tensions between laboratory and clinical experience, and the gradual encroachment of European regulations on the control of drugs.

Given the complexity of the history, it is not surprising perhaps that the discussions failed to resolve certain issues. It remains unclear, for example, precisely which social, political, professional and cultural factors drove the emergence of clinical pharmacology during the post-war years, or indeed precisely what clinical pharmacology was during that period. Equally, it will be a project for future historians to determine whether the recent move towards "translational medicine" manages to improve the sometimes strained relationships between academia, the pharmaceutical industry, the National Health Service, and patients.

The parameters for the debates covered during these two Witness Seminars are clear, the discussions are open and challenging throughout, and the contributors are expertly (and humorously) managed by the chair on each occasion, Professor Rod Flower. In conjunction with the excellent editing, the constructive bibliographies and the biographical snippets of key actors, these two volumes offer an intimate and effective

introduction to critical aspects of modern medicine.

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Charles Burnett (ed.), *Ibn Baklarish's book of simples: medical remedies between three faiths in twelfth-century Spain*, Studies in the Arcadian Library, No. 3, Oxford, The Arcadian Library in association with Oxford University Press, 2008, pp. 217, illus., £85.00 (hardback 978-0-19-954306-9).

This book contains the proceedings of a symposium held in response to the Arcadian Library's acquisition of a copy of Ibn Baklarish's *Kitāb al-adwiya al-mufrada li-l-Isrā'īlī* (The Book of Simple Medicines by al-Isra'ili), which is commonly referred to as the *Kitāb al-Musta'īnī*, in honour of the author's patron, al-Musta'īn bi-llāh Abū Ja'far Aḥmad, who ruled in Saragossa from 1085 to 1110 ce. As Charles Burnett explains in the preface, the Arcadian Library manuscript is dated to 1130 ce, not long after the text's composition, and is in remarkable condition.

In the first paper, Ana Labarta opens with a discussion of the Arcadian manuscript, references to Ibn Baklarish and his Kitāb al-Musta'īnī in the Arabic bibliographical sources, and a summary of modern scholarship concerning both book and author. She then comments on the author's full name and the few details we have about him, namely that he flourished in Saragossa at the end of the eleventh century and during the early twelfth century ce. Little more is known about the historical context in which the book was composed. The Kitāb al-Musta'īnī is a learned, yet practical, medical reference work based upon a great number of earlier sources. It lists about 700 simple drugs, in alphabetical order, providing the following information in tabular form: drug name, nature and degree, synonyms, substitutes, uses, properties and methods of use. It is a remarkable