

Book Reviews

what she terms “fantasy” surgery and “empirical” surgery. For what any given group of practitioners sees as solid empirical evidence in any historical era may well be seen as fantastic by another group of practitioners in another era.

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Roy Porter (ed.), *The Cambridge illustrated history of medicine*, Cambridge University Press, 1996, pp. 400, illus., £24.95 (0-521-44211-7).

Until recent times, historians of medicine have almost exclusively written monographs and articles intended for a scholarly audience of their peers, and, in spite of the universal interest in health we now share with the public at large, little of this information has found its way to a general readership. This richly illustrated volume seeks to remedy such a deficiency, and in that endeavour succeeds admirably in providing a timely and instructive synthesis of the evolution of medicine under the skilful editorship of Roy Porter. In fact, Porter introduces the book with a brief essay sketching the current crisis in medicine and stressing the irony that the healthier Western societies experience a disproportionate appetite for medical care. He insists that to understand medicine's triumphs and trials, the events must be placed within their proper historical framework.

The book begins with a background chapter on the history of disease written by Kenneth Kiple. The shifting ecology of disease stretches from prehistoric hunting times to the changing conditions created by the agricultural revolution. Other sections emphasize the unhealthy character of cities and the disease exchanges that followed the conquest of America, including the importation of slaves from Africa. Further issues address the relationship between nutrition and disease, the mortality declines of the eighteenth century and the morbid consequences of colonialism.

Modern viral scourges such as influenza, polio and AIDS are also presented.

Vivian Nutton takes the reader through a panorama of ancient medical systems from Babylonia and Egypt to ancient Greece and Rome. Separate inserts are devoted to the Hippocratic writings and oath, as well as Galen of Pergamum. Christian and Islamic views of healing follow, and the chapter ends with a treatment of Byzantium and the Middle Ages in Europe. Medievalists, however, may object about the author's characterizations of the latter as the “Dark Ages”. Porter himself writes on the changing perceptions of illness, from the pagan magico-religious views to Christianity's vision of the sick and their bodies. Hippocratic humoralism, in turn, is followed by the seventeenth-century mechanical and chemical interpretations. A discussion of metaphorical views of disease, the sick role, and alternative medicine follow. A chapter titled ‘Primary care’ by Edward Shorter reviews traditional treatments such as bloodletting and technical innovations in medical care including X-rays, thermometry, and ways to measure blood pressure and heart activity.

Porter's additional contributions focus on the development of medical science, hospitals and surgery, and mental illness. There is also a chapter on drug treatment and the rise of pharmacology written by Miles Weatherall. Early materia medica derived from ancient Greece, China and India is contrasted with Paracelsian chemical remedies, followed by a discussion of chemotherapy, clinical trials and antibiotics. Another article from John Pickstone on medicine, society and the state reviews the political and professional influences on the medical marketplace, imperialism and social welfare, and the eugenics movement. A concluding look into the future by Geoff Watts is concerned with medical progress, the promise and pitfalls of genetics, designer drugs, robotics surgery, computers, and transplantation. Besides a general index and list of key medical personalities, the book also contains a chronology of major medical events, a list of common diseases and their causes, and a

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selected bibliography. Although all multi-authored books display some historiographical and stylistic differences as well as duplication, Porter's ode to medicine's past, warts and all, will appeal to physicians, students, and informed laypersons.

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Gwen Wilson (ed. Jeanette Thirwell Jones), *One grand chain: the history of anaesthesia in Australia, 1846–1962, Volume 1: 1846–1934*, Melbourne, The Australian and New Zealand College of Anaesthetists, 1995, pp. xxi, 657, illus., A\$75.00 (0646-264-87-7).

News that "painless surgery" under ether anaesthetic had been performed in America and Britain in late 1846 reached Australia within months, and just weeks later a Sydney dentist and a Tasmanian surgeon had prepared the basic technology and successfully repeated the procedure. Chloroform, too, was quickly adopted and soon displaced ether as the anaesthetic of choice; its comparative ease of administration made it more suited to conditions in these far-flung outposts of Empire.

Gwen Wilson's two-volume work details the development of anaesthesia in Australia from the 1846 news reports to 1962. The first volume, which concludes with the formation of the Australian Society of Anaesthetists in 1934, focuses not on technical progress but on those who worked towards this medical milestone. Thus dental anaesthesia, despite its germinal and continuing contribution, receives little attention. The volume is a tribute to doctors who laid the foundations for a hard-won recognition of anaesthesia as a specialty. It is rich in hagiographical and autobiographical comment. Supported by the Faculty and later College of Anaesthetists, the author, herself one of the earliest Australian women graduates to specialize in anaesthesia, weaves through the story an account of her long and ingenious research journey.

The work meticulously traces the evolution of a medical specialty against the backdrop of social and political events in Australia and within the context of changes in science, medicine, and the medical profession. Australia's contribution to anaesthesia is unique in that it was shaped by practitioners and their circumstances rather than by advances they made in the field. Edward Henry Embley's research input to the chloroform-ether debate and Australians' work in resuscitation are notable exceptions.

Rugged individualism and the sustained ascendancy of the general practitioner can be discerned as forces shaping Australia's contribution. General practitioners not only recognized the advantages of anaesthesia, but early asserted their control over its use. They dominated medical associations and education, influenced the appointment of anaesthetists to hospitals, resisted specialization and doggedly adhered to chloroform years after its lethal effects, particularly in the hands of the untrained, had been demonstrated. With specialization in surgery, the growth of hospitals and increasingly sophisticated technology, the need for specialist anaesthetists to replace GPs serving as surgeons' assistants became apparent. Australian women doctors played a leading and unique role in the development of anaesthesia as a specialty.

Such a detailed work draws heavily on primary sources. It is therefore unfortunate that no references, apart from those for direct quotations, are included in the text. The reader is directed to a companion publication, *A bibliography of references to anaesthesia in the Australian medical journals, 1846–1962*. This arrangement, and an index limited to chapter subheadings and names, seriously reduces the usefulness of the volume as a reference work. Each chapter covers a chronological period and concludes with illustrations of the key players for that period and the apparatus they used.

This exhaustive and enthusiastic account of the development of anaesthesia in Australia will appeal to far more than specialists in the field. It is a mine of information, despite the difficulties of access, for anyone interested in