scruple then every prescription where this occurs has a serious error, and so, in a sense, invalidates Brownrigg's treatment. A drachm (3)=60 grains, whilst a scruple (3)=only 20 grains—an error of 1:3. Of less importance is to have equated the apothecary ounce (3) with that of the avoirdupois (oz) as there is a difference of 42.5 grains between them.

It would thus seem that the editors have an unfortunate lack of familiarity with the nomenclature and signs of the older medicines and prescriptions. This has the undesirable effect of the reader wishing to check with the original manuscript because of lack of confidence in the interpretation.

Not wishing to end on too sour a note, it is pleasing to a pharmaceutical historian to see a reference to a prescription seen "in Mr Garnière's chemist's shop in London" which in fact was in Pall Mall. The date seems to be in the early 1730s so this could have been either Isaac or his son Thomas who belonged to a family who had Royal Apothecaries, Apothecary-Generals and apothecaries to the Chelsea Royal Hospital amongst its members.

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**Jean-Claude Beaune** (ed.), *La Philosophie du remède*, Seyssel, Éditions Champ Vallon, 1993, pp. 384, Frs 175.00 (2–87673–179-7).

This book contains the papers presented at a 1992 colloquium organized by the department of philosophy of the University of Lyons. It is seemingly a companion volume to the published proceedings of an earlier symposium, entitled La Nécessité de Claude Bernard and held under the same auspices. Like its predecessor, the meeting took place partly in the Claude-Bernard Museum at Saint-Julien-en-Beaujolais, but Bernard himself is barely mentioned by the thirty-five participants. Indeed, he is explicitly reproached by one of them for having overemphasized the "how" of therapeutics at the expense of the "why", a charge which he had anticipated in one of his famous Lectures on the phenomena of life common to animals and

plants: "Determinism is . . . the sole scientific philosophy that is possible. In truth, it does forbid us the search for the why; but why is illusory. On the other hand, it exempts us from doing like Faust, who after affirmation, plunges into negation".

There is a Faustian quality about many of the contributions. Several authors appear to have sold their souls to philosophical devilment in attempting to meet the editor's stated aim of concentrating on the historical and epistemological ambience of medicopharmacological intervention. As might be expected, a francocentric intellectualism is prominent in those sections of the material devoted to definitions, culture and philosophy respectively, and is also readily detectable in the historico-scientific section. The choice of topics is arbitrary throughout. Thus, for example, while there is surprisingly little on the adverse effects of treatments, a placebo paradigm is identified in Nietzsche's Ecce Homo, and the final word is given to a psychoanalyst citing Lacan (who else?) in support of the notion of delusion as self-cure. The great physiologist would surely have found no grounds here to modify his belief that "le meilleur système philosophique consiste à ne pas en avoir".2

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Peter Keating, La Science du mal: l'institution de la psychiatrie au Québec, 1800–1914, Montreal, Éditions du Boréal, 1993, pp. 211 (2–89052–529–5).

Peter Keating's La Science du mal is a concise and well-organized book that describes the history of psychiatry in the Canadian province of Quebec between 1800

<sup>&</sup>lt;sup>1</sup> C Bernard, Lectures on the phenomena of life common to animals and plants, translated by H E Hoff, R Guillemin and L Guillemin, Springfield, Thomas, 1974, p. 288.

<sup>&</sup>lt;sup>2</sup> C Bernard, *Introduction à l'étude de la médecine expérimentale*, Paris, Garnier-Flammarion; 1865, p. 306.