

studies; the connections between immigration, race, and geographies of difference; the links between tuberculosis and gender; and its association with war. The second section focuses on the “new” tuberculosis pandemic, including the impact of HIV infection and the spread of drug-resistant strains, not only in London, New York, and the former Soviet Union, but in sub-Saharan Africa and other developing countries. The third section explores issues around advocacy and action, looking at current understanding of tuberculosis and the implications of interdisciplinary, scientific, and ethical approaches for health policy.

Thought-provoking and wide-ranging, it is not possible to do justice to the contents in the space available here. Among the highlights are Nick King’s forensic dissection of essentialist and anti-essentialist views of disease. King argues that attention was focused on “the bodies of people crossing international borders” (p. 46), and in contrast the causal roles of inadequate health care and social and economic injustice were underplayed. The studies of New York and London link the tuberculosis epidemic to wider factors of “de-development”, that included internal migration and emigration, changes in housing, and homelessness, and they emphasize the need to deal with the “full spectrum of determinants” (p. 149). The chapter on Haiti and Peru contains striking portraits of the impact of tuberculosis on two families, showing its effects on health and family life, and linking this with access to appropriate treatment. The tuberculosis epidemic in Russian prisons in the mid-1990s showed how systems for tuberculosis control in the former Soviet Union were based on models from an earlier age, and also highlighted conflicts between the imperatives of public health and criminal justice. And an important chapter on interdisciplinary approaches shows the potential value of integrating the social sciences into operational research on tuberculosis control.

Readers of this journal will find the historical dimensions of this story rather limited, and some of the arguments familiar from earlier secondary work. Similarly there is some repetition between the different chapters, for example, on the costs of

treating multi-drug resistant tuberculosis. But this is a remarkably consistent and strong collection, with a powerful political message, and illuminating cross-national perspectives. Gandy and Zumla argue that the history of tuberculosis is one of medical failure, with the key question being why available means of treatment and control have not been more widely applied. They suggest that, while vaccines may become a new “magic bullet”, reliance cannot be placed on biomedical innovations alone. Gandy and Zumla conclude that “the failure to control TB worldwide is a direct consequence both of poor political leadership and of the burden of poverty borne by the great majority of its sufferers” (p. 241). Overall this is an important book that will be essential reading for all those—academics, policy-makers, medical personnel, students—interested in tuberculosis and global poverty.

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Helen M Dingwall, *A history of Scottish medicine: themes and influences*, Edinburgh University Press, 2003, pp. vi, 282, £16.99 (paperback 0-7486-0865-6).

It is generally accepted that medicine, in both the past and present, is a social phenomenon. Since the 1960s, historians have analysed how medical theories are influenced by ideas from other intellectual disciplines and how practices are affected by political decisions regarding funding, social decisions about what groups are most “deserving” of care, and by public attitudes to medical practitioners. The social approach to the history of medicine opens up the possibility of writing national histories of medicine, showing how medicine is influenced by the particular social, political and cultural environment within a specific country. In recent years, many historians have made international comparisons in order to unpick the political, economic and geographical influences on medicine.

Few, however, have attempted to write a national history of medicine. Helen Dingwall’s study of Scottish medicine is therefore a bold

venture. Dingwall discusses the problems raised when trying to write national histories. There is the central issue of national identity: when did Scotland cease to be a collection of fiefdoms and emerge as a nation state? Did government from London mean that Scotland ceased to be a separate nation from the nineteenth century? For the medical historian there is another fundamental question: whether to grapple with Scottish medicine—identifying the sources of distinctively *Scottish* medical ideas, practices and institutions—or to analyse medicine *in Scotland* and the factors that shaped the course of its history within those geographical limits. Given the need to square this question with the fundamental objective of this book—to provide university students and general readers with a basic introduction to the history of medicine—not surprisingly, Dingwall has chosen the latter option and (despite the book's title) has produced a history of medicine in Scotland. As the subtitle suggests, this is a book which explores the factors which have given a distinctive contour to past medicine.

The scope of the book is impressive—exploring medicine from the Dark Ages to the present day. Chapters on the history of medicine are interleaved with chapters on broader historical developments—religious, social, political and economic. The medical chapters dwell on the well-accepted major events in Scottish medical history: the emergence of the guilds and colleges in the seventeenth century, the ideas and teaching circulating in eighteenth-century Edinburgh, the public health problems and medical advances of the nineteenth century. *A history of Scottish medicine* is therefore similar in its coverage to David Hamilton's earlier history of medicine in Scotland, *The healers*, published in 1981. However, Dingwall makes good use of more recent scholarship, and the text and chapter bibliographies highlight some of the most interesting work produced over the last few years.

There are some problems with the work. Our relative ignorance of medicine in pre-medieval times hampers the flow of the early chapters. Dingwall is at her best when writing about the seventeenth century, her particular period of expertise. (All the more remarkable since few

historians write simply and lucidly when they are only too aware of the complexity of the issues they describe.) In this chapter, she feels free to make more comparisons with developments elsewhere—thus the reader gets a picture of what differentiates Scottish medicine. By comparison, the chapters on the eighteenth and nineteenth centuries, which lack such contextualization, feel rather old-fashioned. Dingwall focuses on medical practice and is rather reluctant to engage with medical theory, thus missing an opportunity to explore the social and political influences on Archibald Pitcairne's iatromathematical ideas or on the physiological thinking of Robert Whytt, Alexander Monro secundus and William Cullen. Overall, the work achieves its objectives—providing a lively introduction to Scotland's medical history in its context.

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Steven Cherry, *Mental health care in modern England: the Norfolk Lunatic Asylum/ St Andrew's Hospital c.1810–1998*, Woodbridge, Boydell Press, 2003, pp. xi, 335, illus., £45.00, US\$75.00 (hardback 0-85115-920-6).

I much enjoyed this book and it has proved an invaluable teaching aid for undergraduates studying the politics and practice of modern medicine. Steven Cherry's obvious fondness for his subject and the care taken with the writing as well as the research make this monograph particularly readable. The well-organized chapters offer broad thematic as well as chronological surveys and are interspersed with lovely vignettes of asylum life. The asylum itself is presented as a key site of human relationships that have distinct local and national contexts and show clear continuities as well as change over time.

The sophisticated multi-layered analysis provides a very accessible way of engaging with recent debates in the historiography. The non-specialist reader will appreciate an interesting and detailed study of a single institution that