

Book Reviews

chosen to “exemplify the best work” (p. 1) that the *Journal* published in this area between 1975 and 1996. It is a selection strategy which—despite the individual worth of the articles—prompts as many questions as it answers. While the willingness of the *Journal* to publish such work in the first place can only be applauded, the point of producing this collection is unclear. Most substantial libraries will already have runs of the journal itself. The lack of a clear periodic, geographic or thematic focus means that most readers are unlikely to be interested in obtaining the entire book when they are concerned with only one or two of the articles. For much the same reason, it is unlikely to be drawn on as a course text for students. Indeed, considering that several of these articles were written in response to earlier pieces in the same journal, the failure to reprint both sides in the debate further limits its potential pedagogic uses—as well as leaving the general reader with a sense that they need to go back to the journal to look at the original arguments that are being challenged. Smaller flaws also mar the collection. Despite the bulk of the introduction being taken up by summaries of each article, there is no attempt to guide the reader to other work on the questions addressed, even though several of the pieces date from the 1970s. The decision to reformat articles and employ new page numbers without indicating the original numbering will make referencing difficult. The *Reader* also raises the more substantial question of what means should be used to disseminate archives of journal articles? Considering both MIT and the MIT Press’s position at the vanguard of academic communication over the internet, it is somewhat surprising that they should choose this rather limited method in which to make the past content of their journals available.

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Joan Lane, *The making of the English patient: a guide to sources for the social history of medicine*, Stroud, Sutton Publishing, 2000, pp. xv, 208, £25.00 (hardback 0-7509-2145-5).

This social history of medicine traces the process and experience of medical practitioners as well as the patients who were suffering from illness. Whereas traditional medical history research focuses on scientific discoveries and their application, this guide takes the human approach—chronicling first-person accounts of exactly what it was like to be a medical student in eighteenth-century London and how patients suffered from and were treated for ailments such as smallpox and venereal disease.

It is important to note that much of the material has never before appeared in print. Included are excerpts from diaries, office records and correspondence from all the English counties and London. National surveys are also integrated into the book chapters.

Each chapter is organized by subject, such as ‘Patients’ own accounts of illness’, ‘Medical apprenticeship and training’ and ‘Hospitals, lunatic asylums and prisons’. Within each chapter, the compilation of primary sources is chronological, usually beginning in the early 1700s and many times spanning almost two centuries. Though random diary entries, medical directories, press reports and advertisements may seem like impossibly diverse material to compile in a coherent manner, the author binds this material together with a brief but thoroughly engrossing introduction at the beginning of each chapter. These introductions allow even the novice medical historian to understand the context in which diary entries and other such first-person accounts were written.

In addition, short introductions are also included before individual entries, giving important background on the particular person, institution or disease being

Book Reviews

discussed. This illustrates that the author not only tried to give medical historians access to this unique primary resource, but to put the material into perspective as well.

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Keir Waddington, *Charity and the London hospitals, 1850–1898*, Studies in History New Series, Woodbridge, Royal Historical Society and Boydell Press, 2000, pp. xii, 252, illus., £40.00, US\$75.00 (hardback 0-86193-246-3).

Despite recognizing their importance, hospital historians have traditionally been less interested in the administrative and financial aspects of institutions under study, although paradoxically this documentation has survived much better than clinical records. We tend easily to forget that most hospitals periodically teetered on the brink of insolvency even though many had been initially launched with generous endowments provided by pious donors. Saddled with the somewhat fixed expenses of providing shelter, food, and care, hospital income remained highly dependent on the fickle generosity of individual patrons, the uncertain revenues from investments, and the greed of corrupt administrators. Waddington's work, focused on Victorian voluntary institutions in London, thus fills an important gap in our understanding of nineteenth-century British hospitals. Instead of depicting the "great" metropolitan establishments as heroic arenas for medical and surgical triumphs, the author allows us to see them as administratively contested and financially precarious establishments, constantly struggling to raise more funds and pay their mounting debts.

The book is chronologically divided into three parts. The first discusses in detail the

charitable imperative that motivated prospective donors, followed by a close look at their role in the management of institutions thus supported. Readers will readily discover the contours of a private benevolent economy based on philanthropy and voluntarism that was a source of pride in British society. Employing rich published and unpublished hospital sources the author probes the multiple layers of contemporary meaning associated with the concept of charity. A third section looks at the events of 1897 and beyond.

Waddington is at his best in penetrating the autocratic world of hospital subscribers and their selfish reasons for giving and then adopting managerial functions to further their business and political careers. Fundraising and social enhancement went hand in hand, with subscription lists printed in annual reports and newspapers. In London, those middle-class governors represented a male élite jealous of its status, a close group of well-to-do gentlemen with enough money and leisure to run their institutions, even successfully protecting their turf against the inroads of an ascendant medical staff. The carefully maintained separate spheres between them led to constant tensions and struggles for control of admissions, patient monitoring, and institutional discharges. By the 1890s, the endemic financial crisis in the metropolis' major hospitals triggered more fears of state intervention, seen as a threat to voluntarism and local control. To no avail, both the creation of a royal sponsored collection, the Prince of Wales Hospital Fund (1897), and a voluntary Central Hospital Council for London (1898) sought to improve finances and avoid the competition and duplication of services. Charity alone could no longer solve social problems, allowing the state to join in a partnership with voluntary efforts that came to shape the health care sector for the first half of the twentieth century. In conclusion, Waddington's account represents an impressive display of scholarship. He has