

This carefully argued book is well-integrated with the existing historiography. Its focus on treatment will appeal more to medical and policy historians than to social historians, as there is very little about the addicts themselves. I was left wondering why heroin use increased so rapidly in the late 1970s. Who were these new users and why did drug use appeal to them? I also wondered why Mold focused only on heroin treatment when by the 1980s most of the drug users were poly-drug users. Is this because doctors and policy-makers focused only on heroin? Were treatments provided for other drugs? Given the increased complexity of drug use around the world, which Mold refers to in her conclusion, it would have been helpful to learn more about how Britain has faced the challenge of treating poly-drug users.

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Colin L Talley, *A history of multiple sclerosis*, Healing Society: Disease, Medicine, and History Series, Westport, CT, Praeger, 2008, pp. xvii, 201, £27.95, \$49.95 (hardback 978-0-275-99788-5).

Colin L Talley's *A history of multiple sclerosis* will find itself on the shelves of many of the estimated 2.5 million people worldwide with multiple sclerosis (MS), in medical schools, history departments and health activists' offices. The intended readership is wide and it does deliver. Based partly on his PhD research, Talley has written an accessible and relevant history.

His main argument is that institutional contexts have been vital in enabling the changes in our experience of MS as disease and illness. His particular assertion is that, if we wish to improve the lot of people with MS, history tells us that the solution lies in state intervention—the provision of increased disability allowances, improved legislation and enhanced funding of biomedical research.

Like the only other monograph on this subject, by the neurologist-historian T Jock Murray, Talley's begins with the emergence of MS from the disease category paraplegia, the nature and location of Jean-Martin Charcot's studies, and the numerous attempts to explain the cause, occurrence and course of MS. Much of this is familiar. Murray's focus was upon physicians and scientists, whereas Talley brings to the fore the social and cultural context. In the latter half of the book Talley approaches the history of the illness experience. Based on the medical literature and patient records (from hospitals in New York and Los Angeles, and Tracy Jackson Putnam's private practice), his argument is that despite equivocal evidence, physicians, encouraged by their patients, have been therapeutic activists. Talley also asserts that the (American) National Multiple Sclerosis Society put MS on medical, public, political and philanthropic maps, and to great effect. MS research funding boomed.

He continues with a review of the secondary literature of disabilities studies, premised on a social model perspective of disability, to make his case for the role of the political economy in enhancing the experience of disability. In particular he highlights the inherent historical bias against the young and female disabled. In the penultimate chapter Talley brings his historically informed argument to the biomedical politics of today. With his customary plain English, he weaves together the science of an auto-immunity framework, an explanation of how interferon(s) modulate the immune system, and an analysis of where and with whose money this basic and applied science was carried out.

Talley explores the long trajectories of MS contingent upon collective and political construction, avoiding esoteric language and swathes of methodologies from the scientific, social science and history disciplines. From his introductory medical description of MS through to a succinct explanation of grounded theory and a closing reiteration of the potentialities of reframing (an auto-immunity) paradigm, his argument throughout is clear.

Some, however, may take issue with his selection of sources. His comparative discussion of European MS societies is based on two secondary literature articles. His assessment of national contribution to the “advances in the understanding of MS as an autoimmune disease” by way of numbers of laboratories and clinics identified in “seventy-seven key studies” is problematic (pp. 112–13). On this basis, the UK MS Society, which began funding fellowships in 1954 and to date has directed over £75 million to research, was not an identifiable financier of any advance. Consideration of *Interferon: the science and selling of a miracle drug* by Toine Pieters (2005) could have broadened the perspective here. The opening line, “We are at a point of great hope” (p. 133) in Talley’s concluding chapter will raise eyebrows. But he is on a mission. One that is well crafted and heartfelt.

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Philippe Mudry, *Medicina, soror philosophiae: regards sur la littérature et les textes médicaux antiques (1975–2005)*, textes réunis et édités par **Brigitte Maire**, Lausanne, Editions BHMS, 2006, pp. xxvi, 545, €32.00 (paperback 978-2-9700536-0-6).

The collection edited by Brigitte Maire comprises no less than fifty papers written by her mentor Philippe Mudry between 1975 and 2005. It includes a brief introduction by the editor and a preface by his former colleague and friend Jackie Pigeaud, whose *Kleine Schriften* appeared recently (Paris, 2007), and whose interests widely converge with Mudry’s. A specialist of Latin literature—although he does not shy away from approaching Greek texts—Mudry’s main contribution to the disciplines of classics and medical history lies in his many studies on Celsus, Pliny the Elder and Caelius Aurelianus—most of which are gathered here.

His edition of the preface of Celsus’ *De medicina* is a classic; his clear, vivid accounts of the ancient doctrine of the Methodists (for example, ‘Le regard souverain ou la médecine de l’évidence’, pp. 87–94) have contributed to the scholarly revival of this ancient medical school (the fragments of the Methodists were edited by Manuela Tecusan in 2004). In general, Mudry’s approach combines sound philological information with an adequate view of the broader (medical-historical) picture; he has a talent for explaining clearly the complicated or delicate issues that ancient medical texts often raise, and sometimes entertains his readers with humorous (though accurate) analyses of the strategies of modern translators regarding Latin texts. Moreover, Mudry is more sensitive than anyone else to the human aspects of Roman medicine and to the concerns that Latin doctors display (or not) about pain and suffering. Finally, his texts are usually clear, concise and well-written; even readers with uncertain French can follow his arguments and enjoy the stories he tells within his various studies, such as the misfortunes of the most famous hypochondriac ever, Aelius Aristides. It is equally possible to pick one article at a time, or to read the whole book at one go, for Mudry never wrote just for specialists, but always in a clear, accessible fashion. The vast majority of Mudry’s papers were published in French, and a few in Italian. Whether including an article in Romanian (p. 95) was a useful thing to do is uncertain; also, the reverse chronological order adopted by the editor may or may not seem appropriate to every reader: the editor justifies her choice, arguing that it allows the reader to see how Mudry’s thought developed (p. xv1); the simple, chronological order might have proved just as efficient. But this is a very minor criticism, for this book constitutes a useful and pleasant introduction to ancient medicine. A series of indices supplements it conveniently.

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