

Jonathan Simon and Marianna Kaba) which discuss the case of diphtheria serum, the first and exemplary standardisation of a biological drug. Three of the four papers of the second part investigate other biological therapies: Michael Worboys studies Wright's therapeutic vaccines, Jean-Paul Gaudillière, the manufacture of sex hormones, and Ulrike Linder, polio vaccine. A fourth paper, by Christian Bonah, examines the standardisation of Strophanthin, a drug derived from a plant. The two parts are linked through insightful papers on the Danish State Serum Institution, by Anne Hardy, and on the development of international co-operation in the inter-war era, by Pauline Mazumdar. The latter paper focuses on the politics of standardisation, rather than on the fate of standardised substances. Mazumdar's study also provides important insights on the development of international co-operation in the inter-war era.

The majority of the papers in this volume are carefully researched case studies that illuminate different aspects of standardisation/*Wertbestimmung* in context. They point to the role of local scientific cultures of leading institutions (the Pasteur Institute in Paris, the Serology Institute in Copenhagen, St Mary's Hospital in London), of charismatic individuals (Ehrlich, Roux, Madsen), relationships between researchers and clinicians, organisation of health care, state intervention, and international networks of collaboration and exchange. Papers by Hüntelmann (on the regulation of diphtheria serum in Germany), Gaudillière (on the production of hormones by Schering and Bayer) and Bonah (on standardisation of Strophanthin) dwell also on theoretical aspects of standardisation/*Wertbestimmung*. They discuss the contrasting roles of administrative and industrial cultures of standardisation; the differences between standardisation in a research laboratory and a production plant; the co-production of a given therapeutic agent, its clinical indications, and the criteria of its efficacy. The final, synthetic essay by Alberto Cambrosio, situates standardisation in a larger framework of regulatory practices in medicine,

and argues that the early regulation of therapeutic sera and vaccines set the pattern for the later regulation of all pharmacologically active preparations. Drawing on the pioneering work of Ludwik Fleck, Cambrosio stresses the importance of the slow, meandering initiatives which, crisscrossing between research laboratories, production plants and regulatory instances, gradually led to the stabilisation of new therapies.

A single volume cannot do full justice to a very rich and complex topic. Further studies will teach us more about the strategies of industrialists, the role of clinicians, and methods used to assess the efficacy and risks of therapeutic agents. In the meantime, the volume *Evaluating and Standardizing Therapeutic Agents* is an excellent introduction to the role of standardisation/*Wertbestimmung* as a boundary object which links heterogeneous networks and domains of study, and shapes the production of new medical knowledge and practices.

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Laura Salisbury and Andrew Shail (eds), *Neurology and Modernity: A Cultural History of Nervous Systems, 1800–1950* (Basingstoke: Palgrave Macmillan, 2010), pp. xiii + 298, £55.00, hardback, ISBN: 978-0-230-23313-3.

This collection of essays starts from the assumption that: 'to speak of neurology and modernity is to describe a relationship of mutual constitution' (p. 1). 'Neurology' – in the broad sense in which the word is deployed here – is thus the product of the modern world. But doctrines of the nerves have also served to constitute the experience of the modern. Indeed, the editors maintain that: 'modernity can be thought of as being singularly neurobiological, determinedly nervous' (p. 2). The modern self, Salisbury and Shail contend

in their introduction, has to a considerable degree defined itself in terms of the state of its nerves and, one might add, increasingly identified itself with the pinnacle of that system, the human brain. Neurology thus became: 'modernity's representative science of the body' (p. 33).

The thirteen papers explore various aspects of this 'symbiotic' relationship from a variety of viewpoints and with varied success. The contributions tend to be brief and to sketch out themes rather than to explore them in any depth. Some of the topics covered are familiar. Jane A. Thraillkill, however, succeeds in finding new aspects to the well-worn topic of railway spine and the incipient diagnostic category of traumatic neurosis. She sees the discourse that arose around these complaints as productive of a novel 'forensics of self' (p. 99). This was in turn, she argues, conducive to a new sense of personhood. Aura Satz provides a stimulating discussion of the relation of the identification of 'phantom limb syndrome' in the nineteenth century with the contemporary manifestations of other ethereal bodies in spiritualist séances. Both neurology and spiritualism, she asserts, challenged received notions of the extent and duration of the body. In her account of what aphasiology has to say about the subject of modernity, Laura Salisbury rightly focuses upon the centrality of the neurological reconfiguration of language in initiating a conception of the self as, not only embodied, but also embedded in a perceptual world where the distinction between consciousness and *res extensa* is effaced.

Overall, this volume is representative of the level of interest that currently exists in writing a cultural history of the nervous system – an interest that is a reflection of the centrality of the 'neurological' in contemporary culture. The variety of approaches and materials that these essays draw upon gives an indication of how rich and challenging such a history will be.

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Antje Kampf, *Mapping Out the Venereal Wilderness: Public Health and STD in New Zealand 1920–1980*, Ethik in der Praxis/Practical Ethics Studies, Band 28 (Berlin: LIT Verlag, 2007), pp. iii + 272, €29.90, paperback, ISBN: 978-3-8258-9765-9.

Do not be deterred by the German publisher's misspelling of 'venereal' on the front cover, for it is catalogued correctly. Nor should you dismiss this careful and intelligent history of the public health response to sexually transmitted diseases in New Zealand as a peripheral study. New Zealand may be geographically remote and was once socially conservative, but its social policy for much of the twentieth century has been distinctive and instructive. It is more egalitarian than its Australian neighbour, and its record on race relations, while far from sufficient, has been vastly better. These are social characteristics that shaped the way doctors, nurses and administrators dealt with the problems of STDs. Finally, this book is not for purist cultural historians of disease: rather it is a careful review of discourses, policy and practice within the government medical service and public health authorities from 1920 to 1980, just as HIV/AIDS was entering public consciousness and health concerns in Australasia.

New Zealand did not have a severe STD problem: the frontier society of ocean wanderers, escaped Australian convicts and adventurers that would have suffered high infection rates was long past by 1920. By then, they had a magic bullet for syphilis, and the practical experience of coping with the high STD rates in overseas servicemen during the First World War. There needed to be a new rational approach: notification, clinics and treatment. None the less, the cultural assumptions remained of individual moral deficiency and of aberrant women (in particular those who hung around the ports) who were a reservoir of infection to entrap males sowing their wild oats. Kampf includes a detailed case study of venereal