

## Book Reviews

that century. Lázaro's piece is the only one dealing with psychiatry outside the Anglo-Franco-Germanic world, and it also makes clear that Spanish history operates on a very different time line from the north-west of Europe. A cursory view of the remainder of the south and east of Europe calls into question whether the traditional history of psychiatry, focusing on the north-west, applies outside that region. This is surely an appropriate question for consideration at the European Association for the History of Psychiatry. This is a somewhat different theme than that of the current volume, and not meant as a criticism. It is instead intended as a challenge to social historians in the relevant countries.

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**Bill Yule, *Matrons, medics and maladies: inside Edinburgh Royal Infirmary in the 1840s***, drawings by John Johnstone, East Linton, Tuckwell Press, 1999, pp. xiv, 236, illus., £12.99 (1-86232-091-8).

**James A Gray, *The Edinburgh City Hospital***, East Linton, Tuckwell Press, 1999, pp. xviii, 468, illus., £20.00 (hardback 1-86232-096-9).

At first sight Bill Yule's quirky little book with its populist title, modern caricature drawings, paucity of references to the secondary literature and lack of footnotes has nothing to offer academia. However, the banal observation that appearances are deceptive has rarely been so well illustrated in medical historical studies. Bill Yule has combed the wonderfully rich archives of the Edinburgh Royal Infirmary to produce what he sees as a "fly on the wall" account of daily life in the hospital in the 1840s. The book does not pretend to be a major contribution to historical scholarship (and it is not), more likely it aspires to sit on the shelves of Edinburgh bookshops among

accounts of Holyrood Palace, the Tolbooth and Greyfriars' Bobby. It merits its place there but it also deserves more than a first glance from historians. Yule writes well and has stuck impressively close to his researches. A mountainous part of this book is composed of quotations from primary sources that have been deftly hidden in an engrossing narrative. All the things one might expect are here: wicked and wonderful matrons, haughty surgeons, anguished boards of management, high-spirited medical students and lots of case histories. Yule for the most part eschews analysis, which is a great virtue, for when he does not he slips into anachronisms and mistakes (how on earth did James Syme get to be Robert?); but these are few. The historian of hospitals will find no surprises here but that is no reason for ignoring this book. Its combination of style and historical detail will make it a splendid teaching text. Almost any of the chapters could be assigned as reading for discussion in an introductory class on medical history in the early nineteenth century. Students will love it. I did.

James A Gray's study of the Edinburgh City Hospital is a different kettle of fish but equally admirable in its way. This is an "in house" history by one of the hospital's former consultants. Gray like Yule has stuck close to his sources but Gray has gone for meticulous chronicling of every detail which, with the impeccable footnoting, makes this a most praiseworthy book. It is, perhaps, rather more likely to be used as a work of reference than read as a continuous narrative. None the less, its long-term narrative is very important for it illustrates the changing use of hospitals in response to epidemiological, political, social and economic factors. The first quarter of this fairly hefty book is devoted to Edinburgh's public health and fever hospital provision before the City Hospital, Edinburgh's third fever hospital, was founded in the wake of a smallpox epidemic in the 1890s. It was opened in 1903. If not

## Book Reviews

quite in the Oslerian super league, the hospital boasted some famous physicians in its fever days. Sir Robert Philip's Tuberculosis Scheme was admired throughout the world. Fever, however, was hardly a useful institutional category after the Second World War and, perhaps predictably, the hospital took under its wings tropical and geriatric medicine as well as various surgical specialities. This is very much a "history from above" book although not bone dry. Reminiscences of former staff enliven much of the material. Some day, someone should write the comparative history of hospital snobbery. The City and the Royal would be a good place to start.

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**Heather Munro Prescott,** *A doctor of their own: the history of adolescent medicine*, Cambridge, Mass., and London, Harvard University Press, 1998, pp. xi, 238, £21.95 (0-674-21461-7).

The focus of Heather Munro Prescott's clear and concise volume is the Adolescent Unit at the Boston Children's Hospital set up in 1951. It was here that J Roswell Gallagher pioneered not a new technology, but a new approach in medical expertise. Reacting to both the increased specialization of the American medical profession and its perceived failure to deal with the health problems of the young, Gallagher sought to create an interdisciplinary child-centred environment where the "whole patient's" physical disorders, learning difficulties and behavioural and emotional problems could all be treated. Most importantly, teenagers were to be listened to by doctors who also saw themselves "as guides on the arduous path to adulthood".

*A doctor of their own* opens with the familiar story of the changing perceptions of adolescence in the early twentieth-century. G Stanley Hall's ideas are usefully summarized, as are the perennial worries about national degeneration and juvenile delinquency. By the 1940s, concerns about the poor physical condition of army recruits led Lawrence K Frank and other paediatrics to speak of "the forgotten child". At the same time, Gallagher was concerned that children were too rigidly categorized according to strict physical criteria. Instead, he suggested there was no "normal" physical or emotional growth pattern: teenagers ought to be recognized as individuals who did not necessarily conform to the cultural and institutional expectations forced upon them. Such a guiding principle may not have been so readily accepted by his colleagues, but it was a creed perfect for the emerging teenage rebels of the 1950s. Responding to his well-placed advertisements in parent and youth magazines, middle-class mothers and fathers sent their problem sons and daughters to Gallagher's new Unit. Teenagers responded well to their treatment, as minor physical ailments often cleared up simply after they had had the opportunity to discuss confidentially the social pressures they felt themselves to be under.

Prescott moves on from this case study to outline the gradual acceptance of adolescent medicine within the broader medical community, helped as it was by the concern with medico-social issues throughout the 1960s. She meticulously details the professional rivalries faced by the Society for Adolescent Medicine, though by 1977 the American Medical Association officially recognized adolescent medicine as a sub-speciality of paediatrics. She concludes politically, arguing that a conservative reaction to the liberalism of the 1960s has meant that adults continue to shape approaches to medicine. Were adolescents again allowed to have their say and easy