

## Book Reviews

Fracastoro was, like Leonardo, a universal man, and, perhaps for that very reason, has lacked an adequate biography. Rossi is jejune and outdated, and the harvest of Fracastoro's manuscripts is only just beginning. Hence, the old biography of W. P. Greswell, 1801, ed. 2, 1805, still has its uses, for it concentrates almost entirely on Fracastoro as a poet and philosopher and uses many primary texts. Dr Eatough speculates on possible contacts, including Copernicus, Fracastoro's contemporary at Padua (although no actual texts mention a meeting, and certainly not instruction), but fails to explore the ramifications of the group around Giberti in Verona. A closer study of Maddison's 1965 life of Marco Antonio Flaminio would have revealed long contacts between the poets, and attributed Fr. 2 to its rightful author, Flaminio himself.

Perhaps most serious in a work which aims to set Fracastoro in a literary context, there is little discussion of neo-Latin epic or its place in contemporary literary theory. Walter Ludwig has given us many hints, particularly in his study of Scaliger and Fracastoro (*Antike u. Abendland*, 1979, pp. 33–37) and his survey of renaissance didactic poetry (*Festschrift für Leonard Forster*, 1982, pp. 151–180), but these have not been exploited here. I would gladly have dispensed with the long computer index in favour of a more detailed and coherent introduction that integrated Fracastoro more fully into the mainstream of renaissance ideas. That is a task that needs to be done, and the material is there for any intrepid researcher. Within his own limits, Dr Eatough has produced an excellent edition and commentary, but he has not been bold enough to break with a traditional literary form.

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MICHAEL DRAKE (editor), *Population studies from parish registers. A selection of readings from Local Population Studies*, Matlock, Derbys., Local Population Studies, 1982, 8vo, pp. xxxiv, 220, £5.95 (paperback).

Michael Drake was wise to point out the pitfalls of using Parish Registers for population studies, but his long-winded discussion of omissions takes up valuable space in his introduction that could have been used to encourage the use of the registers with caution and in conjunction with other parish documents. His penultimate sentence entreats that "one should not despair of using Anglican parish registers" and it is to be hoped that students will not spend too many hours deciding that a particular register is useless for demography. All of the readings are from volumes of *Local Population Studies*, and one wonders why five of the contributions selected are from volume 24 of this journal. This selection has given the section on baptism in the book undue weight compared with marriage, burials, migration, and area studies. Many excellent articles based on parish registers are to be found in other journals, so that the notes, printed in full in this book, are useful and the index is excellent. The print is very poor in places and it is a pity that the Appendix 1 table had to be cut in two and appear on the back instead of facing page. If back copies of *Local Population Studies* are unobtainable, this book supplies a need for students concerned with historical demography, but it is of very little value for medical historians.

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JOHN K. CRELLIN, *Medical care in pioneer Illinois*, Springfield, The Pearson Museum, Southern Illinois University School of Medicine, 1982, 8vo, pp. xi, 128, \$15.95.

Emerging from a study commissioned by the Department of Medical Humanities at the Southern Illinois University School of Medicine, this short volume is a chronicle of health and medicine in downstate Illinois (the author wisely omits Chicago and its vicinity). It is organized thematically – focusing in turn on such topics as health conditions, the diverse sources of medical care, and physicians' social and economic positions – and glides freely back and forth between Illinois statehood in 1818 and the end of the century, the study's chronological confines. Intended more for medical and lay audiences than for historians, much of the book resurveys the Illinois topography of nineteenth-century American medical terrain that has

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already been well charted elsewhere. In part because there is scant comparison of the sort that can extract broader significance from narrowly local scrutiny, the monograph offers little that is analytically new. But it does draw upon a rich cache of regional manuscripts that often generate intriguing glimpses of what health care and the experience of illness were like. Accordingly, the most unexpected and useful chapter, 'Physician-patient relationships', is based almost entirely on letters that patients wrote to their physicians, and provides one concrete portal into assessing the elusive texture of patient perception and expectation.

Local history has returned to vogue in American historiography (medical and otherwise) during the past decade, and in so far as this facilitates a more finely grained empirical reconstruction of context, it is a good thing. Professor Crellin's book will serve well the popular readership for which it was principally written. Yet at the same time it reminds the historian and teacher that there is still no satisfactory general history of American medicine that systematically exploits the burgeoning bibliography of good local studies.

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GAINES M. FOSTER, *The demands of humanity: army medical disaster relief*, Washington DC, US Army Centre of Military History, 1983, 8vo, pp. x, 188, illus., \$5.00 (paperback).

This very readable book is a history of the United States Army Medical Department involvement in disaster relief. In 1973, as a contribution to the celebration of the approaching Bicentennial of 1776, the Army Medical Department Historical Unit assigned a newly arrived lieutenant to prepare a history of army medical relief for civilian communities struck by natural disasters. The study took more than three years, which is not surprising, considering the extent and breadth of the source material detailed in the numerous footnotes.

The first relief operation was undertaken in 1792 to famine-stricken Creek Indians and the last recorded mission to Nicaragua at the end of 1972. Most missions were for domestic assistance in earthquakes, floods, and fires, particularly the Texas City explosion in 1947. Nineteenth-century assistance overseas was mainly to stem epidemics of diseases, such as cholera and plague in the Philippines. It was interesting for me, as a surgeon, to learn of the limitations of sanitary measures in such situations and the recognition by some physicians, far in advance of their time, of the necessity for prophylaxis and case control. Prevention is only likely to be successful if one understands exactly what one is trying to prevent.

In some earthquakes, there were considerable numbers of injured requiring medical help, but in others, the main requirement was for the establishment of sources of clean water, power, and food distribution. In some circumstances, too much aid and too little co-ordination sometimes meant that international aid was as much harmful as helpful.

In underdeveloped countries, aid for natural disaster requires medical assistance. In developed countries, medical assistance is not often necessary and the main requirements are for command and control of relief operations and the establishment of basic facilities. In all types of relief operations, the questions of cost, and the relationship between government agencies and voluntary agencies are fundamental. The issues are thoughtfully explored in this book, which is useful reading for anyone involved, or likely to be involved, in disaster relief. Two facts seem to me to emerge clearly from this study. The first is that national disaster relief should not depend on the army, and the second is that disaster relief is not primarily a medical responsibility.

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H. GRENSEMANN (editor), *Hippokratische Gynäkologie: die gynäkologischen Texte des Autors C nach den pseudohippokratischen Schriften De Muliebribus I, II und De Sterilibus*, Wiesbaden, Steiner, 1982, 8vo, pp. xiv, 191, DM.130.00.

In his *Knidische Medizin I* (Berlin, 1975), Grensemann tried to distinguish three layers of Hippocratic gynaecology, using the evidence of both medical doctrine and language; for example, the different terms preferred for womb and menses. The present volume draws