

argument builds on and is complementary to earlier readings. However, the book also benefits from use of texts less familiar in this context, such as Samuel Smiles' *Self-help* and the work of Frederick Treves, doctor to Joseph Merrick. It is these chapters which are most original and of most value to the student well-versed in the cultural history of the late nineteenth century.

Victorian demons is a valuable contribution to studies arguing that masculinity is not a self-evident and unproblematic concept. Despite the endeavours of James Eli Adams and others, the volume of historical work on gender is still disproportionately weighted in favour of consideration of female roles. However, any history which purports to deal solely with femininity or masculinity sets up a solely academic division. Historically, cultural constructions of gender are always formed in tandem, with developments in one resulting from and influencing shifts in conceptions of the other. There is an urgent need for more work which breaks down this artificial division. Smith acknowledges that there are excellent accounts by Judith Walkowitz and Bram Dijkstra on the pathologization of femininity at the *fin de siècle*, and demonstrates that similar models of disease and degeneration were applied to the respectable bourgeois male. However, occasionally the near-exclusive focus on masculinity undermines his argument. This is most obvious in the chapter on syphilis, where Smith argues that medical texts were highly politicized readings of the disease that attempted to conceal the dangers of the apparently normative male sexual conduct. Here a lengthier consideration of the instabilities, contradictions, and class-based constructions of female sexuality revealed by debates around the Contagious Diseases Acts is necessary to add context and coherence to Smith's reading of the medical literature.

As Smith acknowledges, this book is an ambitious undertaking which sits at the crossroads of many other fields of study: gender, the *fin de siècle*, Gothic literature, and the cultural history of medicine. But if the structure of the book sometimes appears to reflect the

fragmentation of knowledges that it describes, then it also effectively reconstructs the emotional tone of the age. The main criticism is that only in the chapter on the Whitechapel murders is the ambiguous status of medicine itself at the *fin de siècle* really considered. Smith acknowledges medicine's enormous power, but does not adequately convey the insecurities of a profession which had only recently legally consolidated its gains and was not only viewed with suspicion by the public, but continually had to safeguard itself against "external" threats such as the attempts of women to gain access to its environs. Although Smith effectively deconstructs the myth of a unified and complacent Victorian masculinity throughout, the extent to which the (predominantly masculine) medical profession turned a reflective and troubled gaze at itself is left largely unexplored. Nevertheless, *Victorian demons* is a worthwhile contribution to a growing literature examining the centrality of themes relating to gender and pathology which were deployed and re-constructed over diverse cultural texts and historical episodes.

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Pamela A Gilbert, *Mapping the Victorian social body*, Studies in the Long Nineteenth Century, State University of New York Press, 2004, pp. xxii, 245, illus., US\$65.00 (hardback 0-7914-6025-8), US\$21.95 (paperback 0-7914-6026-6).

Today, historians who work with maps no longer think of them solely as devices for finding one's way around. Maps, like books or pictures or much else for that matter, constitute a medium of persuasion. They are rhetorical instruments, tools of inclusion and exclusion, pamphlets of promise and denial. Some early maps of North America minimized the presence of native peoples and showed the land as domesticated in order to encourage settlers. But positivist modes of analysis of maps as transparent documents still linger and, ironically, maps now sometimes

treated as naïve statements were frequently seen as tendentious when they first appeared. Medical maps in particular, especially John Snow's famous cholera maps published in 1855, have often remained objects of uncritical veneration rather than being viewed as polemical documents, although Lloyd Stevenson's studies in the 1960s of spot maps of yellow fever indicated what might be done.

Pamela K Gilbert, editor of the series in which this book appears and whose background is in English literature, has confronted medical mapping in Victorian Britain and India head on. Her focus is the city, epidemic disease and cholera. Her text weaves together medical, sanitary and religious narratives with substantial chunks of *Bleak house* and *Our mutual friend*. The book proceeds through English sanitary and medical maps, John Snow's maps, a comparative study of disease representation of the London parishes of St Giles and St James, Dickens and the Thames, and two chapters on India in the 1830s and 1860s. Throughout the book she sustains an argument that medical mapping moved from the employment of conventions that would have been relatively familiar to an educated reader, to the use of conventions which required expertise to decipher them. Snow is depicted as a hinge in this movement as his visual portrayal of the hidden, water-borne movement of the cholera-causing agent also required masses of verbal elucidation for his maps to be read in the way he wished. In India medical mapping diverged from the metropolitan model as an essential unhealthiness was visually inscribed on the land and the people.

Gilbert's text, however, extends beyond the worthwhile exercise of decoding medical maps. She integrates her project into the much broader enterprise of understanding how mapping was one means by which the unknown, terrifying and terrified inhabitants of the slums were slowly known, ordered and policed. In line with some of the most imaginative recent work in the history of medicine, she explores how the corporeal and social bodies were simultaneously tamed through the mutual identification of these entities. It was the disorder and disease of the body of the city and of those of the bodies of its inhabitants

that threatened the health and modernity of both the parts and the whole. Sanitary maps documented the horrors of the slum and were also plans for salvation.

Quite why Gilbert's clear understanding of this development has to be ratcheted up a rhetorical notch is a mystery to me. She tells the reader that the "body and its contenance, which also modeled the boundaries of the middle-class individual self, could only be preserved through a careful policing of the abject and the closure of the boundaries of the body, through which contaminated or contaminating fluids should neither enter nor escape" (p. xii). At least this claim, if overwrought, is penetrable. But elsewhere syntactic and grammatical perversion create an impermeable veneer: "As the century wore on and gains were made in the most basic levels of sanitation . . . medical mapping and sanitary mapping, which later devolved back into social mapping, begins to split off, though they still overlap" (p. 30).

More alarming, however, is that the foundations of such claims are distinctly wobbly. For example, an illustration (figure 2.5) central to Gilbert's argument is said in her text to be reproduced from Thomas Shapter's *The history of the cholera in Exeter in 1832* (1849). So it is, but Gilbert's reproduction of that illustration has a caption assigning it to a tract of 1847 described as having been written by Henry Acland (pp. 40–1). Things get worse. In the bibliography this same tract is assigned to Acland and *also* to an anonymous author to whom it is also assigned elsewhere (p. 101). A little bibliographical research would have shown that the author of the tract was neither anonymous nor Acland but a churchwarden, Frederick Byng. This is only the beginning: figures 2.6 to 2.9 are assigned to the same tract (again said wrongly to be by Acland) when it is clear they come from Acland's *Memoir on the cholera* of 1856. There are other ways in which attribution and chronology do not seem to matter. Acland's *Memoir* is described as a "forerunner of important theories", one of which would "a short time later be graphically represented in two key maps by John Snow" (p. 54, emphasis mine). But, as noted, Snow's maps appeared in 1855, a year earlier than

Acland's, and it is highly likely that Acland had seen them before his own maps were published. The evidence is not quite conclusive, but Snow published early in 1855 and Acland's Preface is dated 1 May 1856. Acland (who was quite warm towards the water-borne theory) also made reference to Snow but did not make clear to which text he was referring. But since Acland made this reference (*Memoir*, p. 77) in the context of his discussion of the Golden Square epidemic of 1854 (shown on Snow's St James's map), Snow's 1855 publication seems the most likely target. There are other problems of mistaken identity and, astonishingly in a book about maps, geography: Sir George Greg, who appears on p. 91, turns up in the bibliography as Sir George Grey; England appears as an island (p. 85). The Scots and the Welsh would disagree. Oscar Wilde had something relevant to say: "To lose one parent, Mr Worthing, may be regarded as a misfortune; to lose both looks like carelessness".

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Ian and Jennifer Glynn, *The life and death of smallpox*, London, Profile Books, 2004, pp.x, 278, illus., £17.99 (hardback 1-86197-608-9).

Writing on the history of smallpox is shaped by the global eradication of the disease in 1979. The success of the World Health Organisation's campaign provides a natural end point to a story of man's ultimate triumph over a disfiguring killer. Thus histories of smallpox portray Lady Mary Wortley Montagu's introduction of inoculation (the process of deliberately infecting children with smallpox to induce subsequent immunity) to Britain and Edward Jenner's discovery of vaccination (in which the same technique was used to transmit cowpox, a much less dangerous means of acquiring immunity) as staging points on the road to the final conquest of the disease. This positive account has survived even though recent works, including *The life and death of smallpox*, now counterpoint the triumph

of the eradication with the potential for disaster should laboratory stocks of smallpox virus be used in biological weapons on unprotected populations.

This book follows the traditional triumphal narrative path with its familiar cast of heroes and villains. The authors choose not to engage with the historiography of smallpox and with works by historians of medicine on the relationship between public health and politics, the less attractive aspects of Jenner's character, or the social and moral complexities of anti-vaccination protest. The authors take a rather Whiggish line which does not seek to engage with contemporary understandings of disease and therapy. Thus they describe early attempts to treat smallpox by bleeding, purging and so forth as based on unsound rationale. However, their stance is equivocal and they show more sympathy when describing the work of medical heroes. Modern assessments of Jenner's vaccination experiments on children as "medical malpractice" are dismissed by the authors as "grossly unfair" (p. 103).

There is much to recommend in this book. For the historian or general reader seeking a short account of smallpox and smallpox prevention from a western perspective *The life and death of smallpox* is the best book on the topic. Unlike many other works in the field, it deals with smallpox, inoculation, vaccination, and the WHO eradication campaign. In addition to the familiar events, it covers some less well recorded developments in smallpox prevention such as the use of glycerinated calf lymph in the late nineteenth century. Perhaps the best parts of the book are the chapters on the WHO eradication campaign, where the authors bring out the varying techniques used to control smallpox and have no qualms about identifying the failures as well as the successes of the programmes used in different countries. *The life and death of smallpox* is shorter and more readable than Frank Fenner's seminal volume *Smallpox and its eradication* (1988). It is as comprehensive in its chronological and geographic scope as Donald Hopkins' *Princes and peasants* (1983; reissued as *The greatest killer*, 2002) covering the near and far East, Africa, north and south America.