

Book Reviews

Strasbourg in 1820, was so impressed by this cure that he entered into correspondence with Hahnemann and even met him personally. From about 1830 onwards Des Guidi practised homoeopathy in Lyons and remained for the rest of his life a faithful pupil of Hahnemann, who himself moved to Paris in 1835. At that time there were already about fifty homoeopaths throughout France.

By quoting many case histories in full, Dr Baur has put together a valuable research tool. His comments on the case books are both cogent and authoritative. However, the publisher does not tell us that this is only a new edition of a two-volume work which appeared first in 1985/86. This also explains why some important medico-historical works on Lyons, written by Olivier Faure in the late 1980s and early 1990s, do not appear in the bibliography. It is a pity that Dr Baur was not asked or perhaps was not willing to revise his pioneering work on Des Guidi's case books in the light of recent research in the history of medicine and homoeopathy in France.

Readers who are not familiar with the history of the placebo may be surprised to find that Des Guidi—like his famous master—knew exactly what the patient expected from him and used placebos (marked θ in Des Guidi's case books) to soothe the patient either before or between homoeopathic treatments. Also curious is the economic aspect of doctor-patient communication. Judging from the case books, it seems to have been not uncommon to pay the doctor's fee in kind, which Des Guidi refused. He charged his patients between five and twenty French francs for a single treatment.

Those who are interested in the history of medicine in Lyons will find a lot of local doctors and hospitals mentioned in these case books. One gets the impression that Des Guidi co-operated with many of

them although he knew that some did not think very highly of the new art of healing coming from Germany. And those readers interested in the history of the patient will find this book a mine of information, covering almost every aspect of the doctor-patient relationship in an age in which the established patronage system began to decline.

A subject index and a consolidated bibliography would have been helpful additions to the text. But all in all, this study is a valuable contribution to the history of case-taking in the early nineteenth century in general and to the history of homoeopathy in particular. It provides basic information on the practice and theory of homoeopathy and will open new research avenues pertaining to the study of Hahnemann's case books, which cover a much longer period (1800–43) and which pose the same hermeneutical and methodological problems.

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Susan Resnik, *Blood saga: hemophilia, AIDS, and the survival of a community*, Berkeley and Los Angeles, University of California Press, 1999, pp. xvi, 292, illus., \$29.95 (hardback 0-520-21105-2).

Resnik describes and assesses the recent history of what she calls a "community" that consists of persons with haemophilia, their families, and the professionals who provide their health care. She draws data from interviews, participant observation, analysis of printed primary sources and selected secondary sources.

The history of the haemophilia community has had four distinct stages, Resnik writes. She makes a persuasive case for this organizing scheme in thirteen chapters, all but one of which address the

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years after 1948. From the earliest record of the disease until the mid-twentieth century, the community consisted of "isolated families" that "evolved initially into a community of fate". New and promising treatments using blood products dominated the next stage, from the late 1940s to the 1970s. As a result, the "community was transformed into an organized, politically vocal constituency with a significant involvement in United States health care systems and agencies". Recognition of AIDS/HIV in the early 1980s initiated the third stage, which "was characterized by initial divisiveness, followed by expansion, empowerment, and democratization". In the final stage, beginning in the mid-1990s and, she predicts, continuing into the future, the "community now faces a new possibility of scientific breakthrough to a cure" (p. 2).

Several of Resnik's findings should interest historians of contemporary medicine and health policy. For example, she emphasizes the relative uniqueness, in the United States, of a disease interest group that has been dominated for most of its history by parents and patients rather than by physicians and other professionals (p. 34). She describes how, as early as the 1960s, lay dominance of this interest group facilitated the development and implementation of models of patient management that have subsequently been used in the treatment of other chronic diseases (p. 50). Similarly, her analysis of the gradual recognition of the threat of AIDS by the haemophilia community (90 per cent of severe haemophiliacs in the US were seropositive by 1988), explores both the reasons for denial among patients and the unfortunate consequences of physicians' lack of sophistication in population-based thinking (pp. 115, 144, 157).

A weakness of the book is Resnik's almost exclusive reliance on the methods of anthropology and oral history. These methods are inadequate for analysing the

political economy of the blood industry in the United States. She ignores research by Harvey Sapolosky and other political scientists on what they call the blood "cartel" in the United States. Moreover, a federal court subpoenaed pertinent information about the relationship between the blood products industry and physicians in the haemophilia community during the evidentiary discovery process that was triggered by a class-action lawsuit brought by haemophiliacs against the industry for failing to protect them adequately against HIV/AIDS and Hepatitis B. Resnik apparently did not seek access either to these files or to the persons whose testimony and documents are in them. This lawsuit was settled rather than litigated, which suggests that the industry and the physicians it paid to conduct research were not thrilled at the prospect of public exposure of their behaviour.

The author's lack of grounding in the literature of the history of medicine leads her to an overly optimistic conclusion. She believes that recently developed, genetics-based treatments will cure haemophilia and that strict adherence to an ethic of autonomy will protect patients from the paternalism of doctors and the greed of manufacturers of blood products. The history of medicine is littered with alleged magic bullets that were, at best, partial solutions. Similarly, relations between doctors and patients have been more complicated than many proponents of absolute self-determination by patients about their treatment are willing to admit.

Nevertheless, this book is a useful contribution to the contemporary history of medicine and health care. Resnik's interviews and her personal participation in the haemophilia community gave her access to people whose experience she describes in compelling detail.

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