

done? The case book lies at the heart of both and without it the first to be published was rather like a birthday party without the cake. But that aside, the value of these two complementary volumes is without a doubt the confirmation that within the social class milieu in which he worked, an eighteenth-century mad-doctor's management objectives for his patients and their families were in many respects similar to his nineteenth- and twentieth-century counterparts. No sudden ideological leap separates the approaches to personal mad-doctoring this past three centuries.

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**Pamela Michael,** *Care and treatment of the mentally ill in North Wales 1800–2000*, Cardiff, University of Wales Press, 2003, pp. ix, 252, illus., £14.99 (0-7083-1740-5).

This scholarly and sensitive history of the Denbigh mental hospital in North Wales makes a valuable contribution to the history of psychiatry in its British context. It is not a study that makes a fanfare about its arguments, though briefly in the introduction it is acknowledged that the encounter with this institution has steered the author away from expectations fostered in a reading of Foucault towards an admiration for humanitarian effort and achievement in the face of considerable odds. Thereafter, it slips into a primarily descriptive mode. But this is not to denigrate: it is here that genuine insight and new understanding does constantly emerge, often springing from the smallest detail. With obvious sympathy for history from below, Pamela Michael frames her approach to the history of an institution as one that will place the patient at the centre of things. And there is the intriguing and original ambition to demonstrate how the culture of the patients helped to shape the institution. She does get some way in achieving such objectives. Intriguing stories of patients and their lives are scattered throughout, though

often at the end of chapters rather than as central or even integral parts of the main story. Instead, at the centre, animating and holding together the narrative, is what one might call the character of the institution itself. Sitting in its archives, immersing herself in its architecture, and getting to know a staff past and present, who are committed historians in their own right, Pamela Michael has developed an empathy and quality of historical imagination that is often lacking in this type of institutional history. So it is her ability to describe the noise of asylum, for instance, her attention to the minute detail of the “daily round” and “underlife”, not the patient narratives for all their interest, which saves this from being another empty asylum.

The coverage of such a long period, from nineteenth-century roots to twentieth-century dissolution, means that we also have here in miniature a history of modern British mental health care. Since no historian of recent years has managed to put this whole story together, and since Pamela Michael's command of this long sweep of history is so convincing, the value of the book goes beyond that of a mere case study. This is particularly so when it comes to the less familiar territory of the twentieth century where there are a series of important findings and the demonstration of what policy meant in practice. To some extent, this runs counter to what initially appears to be the book's central claim for significance: its development of what one might call a Welsh way in lunacy. Such an agenda follows a body of work over the last decade that has qualified an Anglocentric vision of British mental health care with work on Scotland and Ireland, but until now very little on Wales. Denbigh is certainly a good choice with this agenda in mind, not least because of the importance of the Welsh language in the North. Throughout, there is an attempt to probe the significance of the Welsh context, with the opening up of a Welsh social epidemiology shaped in particular by religion perhaps most intriguing. But for much of the time it is far from clear that this was a “Welsh system”, rather than a case study for thinking about provinciality more generally, and

it would certainly be a shame if the study were neglected as having a value in relation to the Welsh context alone. Indeed, anyone wanting a clear story of how the British way in lunacy changed over the course of two centuries and what this could mean for a single institution would not be being misdirected if they ended up, as they should from now on, in remote North Wales.

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**Maxime Schwartz,** *How the cows turned mad*, transl. Edward Schneider, Berkeley and London, University of California Press, 2003, pp. viii, 238, £17.95 (hardback 0-520-23531-2).

Billed as a “detective story” that “illuminates the remarkable progression of science”, *How the cows turned mad* is the English translation of a French text by Maxime Schwartz, molecular biologist and former head of the Institut Pasteur, Paris. Schwartz goes beyond existing histories of Bovine Spongiform Encephalopathy (BSE or “mad cow disease”) to consider the growth of knowledge about related diseases, which since the 1960s have been grouped together under the heading Transmissible Spongiform Encephalopathies (TSEs). These include scrapie in sheep, Creutzfeldt Jacob Disease (CJD) in man, and kuru, a disease of cannibalistic Papua New Guinea tribesmen.

To Schwartz, TSEs are “the disease”, and BSE, CJD, kuru and scrapie are the different “guises” that it has adopted in a bid to escape scientific detection. Starting in the eighteenth century, he moves effortlessly over time and space, tracing its diverse clinical and pathological manifestations. He describes how late nineteenth- and twentieth-century advances in bacteriology, genetics, biochemistry and molecular biology enabled European and American scientists to make important discoveries that contributed to the understanding of disease aetiology, pathology and epidemiology. He also recounts how, in recent

years, the consumption of BSE-infected meat and the use of contaminated human growth hormone preparations has given rise to CJD in young adults, and asks whether, in the light of concurrent scientific knowledge, such tragedies could have been avoided.

The English translation of this text is brought up to date with a new chapter, which describes the events and discoveries of the year 2001. In conclusion, the author identifies several impediments to the growth of knowledge about “the disease”: its elusive behaviour; the existence of disciplinary and professional barriers which meant that scientists were often unaware of relevant work undertaken in another field; and the fact that scientists’ findings, in suggesting that an infectious protein (prion) caused “the disease”, ran counter to accepted scientific thought.

Written for a lay audience in the year 2000, when BSE and CJD were subject to widespread media attention, Schwartz’s aims were two-fold: to educate readers, so enabling them “rationally [to] assess the often alarmist information” that came their way, and to celebrate the successes of modern science. It is impossible to assess whether he has managed to dispel fears about BSE and CJD, but in his second goal he has largely succeeded. This is a concise and extremely readable account, which provides a good overview of the growth of knowledge about TSEs and renders accessible some extremely complex scientific information. As such, it is a good starting point for anyone wishing to learn more about the nature of these unusual diseases, although the bibliography is limited, and the reader may find irritating Schwartz’s portrayal of “the disease” as a sentient being that has repeatedly tried to evade capture.

Historians, however, will find this work rather less useful. The author’s retrospective narrative runs counter to mainstream academic history of medicine, as does his celebration of scientific heroes and their discoveries, and his imposition of a present-day disease category upon the past. In confining his attention to the science of “the disease”, Schwartz mentions but does not address the controversies that