

Book Reviews

Louis J Acierno, MD, *The history of cardiology*, London and New York, Parthenon Publishing Group, 1994, pp. ix, 758, illus., £65.00 (1-85070-339-6).

If histories of medical specialities were to be weighted, cardiology and neurology might turn out to be the joint heaviest, perhaps separated by a scruple or two: or at least until the publication of this weighty tome. Into the scales would go the countless papers in journals on Galen, Harvey, Laennec and their "contribution" to cardiology, also the always welcome reprints and republications of landmarks (including the ever useful *Classics of cardiology* by Willis and Keys). Then there would be the numerous definitive books chronicling the history of cardiology. Someone has yet to write a history of cardiology which is about cardiology: a twentieth-century, technologically-sophisticated, professionalized, institutionalized, highly invasive medical discipline. Histories of cardiology are usually written by cardiologists. Conventionally such works trace the roots of the subject to Hippocrates and beyond. They very often repeat material easily accessible in other secondary literature. They often contain errors and anachronisms when dealing with the earlier period. When they reach the twentieth century they either fall silent or become richly informative because of the author's direct or relatively direct acquaintance with the subject.

Louis Acierno obviously knows this genre. Thematically arranged (anatomy, diagnosis, etc.) the various sections in this book start with "myth" and end with modernity. There is the obligatory trek through Claudius [*sic*] Galen. The plate which pictures what Professor Acierno describes as Galen's "formidable features" (p. 9) is an undated print by an artist who could not possibly have known what Galen looked like. Such casualness suggests the possible dubiety of Acierno's sources for his history of pre-twentieth century investigations of the heart which compose such a large part of this volume. Further on it was intriguing to discover Harvey had apparently written "But damn it, no such pores exist nor

can they be demonstrated" (p. 198). This quote is cited as appearing at p. 597 of volume 10 of the 1847 translation of Harvey by Willis. The Willis translation is in a single volume and p. 597 reveals no such quote, although there is an account of inflating the right heart with water. In addition to such errors, as other reviewers have noted, Acierno misspells the names of numerous figures, Bechat for Bichat, for example. All this is most unfortunate since it makes the work impossible to trust as a reference book. It is doubly unfortunate because there is a great deal of recent twentieth-century history chronicled here which is not accessible in this form anywhere else. As far as I can tell this seems scrupulously accurate.

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David S Barnes, *The making of a social disease: tuberculosis in nineteenth-century France*, Berkeley, University of California Press, 1995, pp. xiv, 305, illus., \$42.00 (0-520-08772-0).

Tuberculosis in nineteenth-century France was, as elsewhere in the West, the great killer. Despite the lack of national mortality statistics, French doctors, public health officials and politicians were well aware not only of tuberculosis as a great killer, but as a killer which especially affected France. Whereas death-rates from the disease were apparently declining in Britain and Germany by the 1870s, mortality in France seems to have peaked about 1890. Defeat in the Franco-Prussian war of 1870 made France sensitive to the physical condition of her people. As with "physical deterioration" in England after the Boer War, so tuberculosis became identified as the source of France's national weakness, the actual and potential cause of her overshadowing by Germany. As French political anxieties mounted, so a rhetoric of hysteria built up around the subject of

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tuberculosis. Although the disease affected all social classes to some degree, it was re-conceptualized in the French mind as one of vice and negligence among the poorer classes, an affliction whose incidence testified directly to the moral and social evils undermining France—promiscuity, alcoholism and unhygienic life-styles.

The process by which tuberculosis acquired this significant status as the ultimate social disease in France is the subject of David Barnes's study. It is a large subject, which deserves fuller and more reflective treatment than is possible in a monograph of this type. One of the problems in writing about tuberculosis is the multi-faceted nature of the disease and its contexts, and its inscrutable causation, which troubled nineteenth-century observers as much as it still troubles historians. On the model of William Coleman's *Death is a social disease* and Richard Evans's *Death in Hamburg*, Barnes attempts with some success to set the French response to tuberculosis in its social and political context and to demonstrate the relevance of his story not just for the history of medicine, but in terms of the wider history of France. Engaging with the narratives of French hysteria, he first examines the mid-nineteenth century medical response to tuberculosis, and the parallel emergence of the popular idea of tuberculosis as a vehicle of redemptive suffering. The stories of *La Dame aux camélias*, of *La Vie de bohème*, of *Les Misérables*, and of the Goncourt brothers' *Germinie Lacerteux* and *Madame Gervaisais* are set against the real-life experiences of St Thérèse of Lisieux whose brief adult life consisted in suffering tuberculosis and writing about that suffering.

The central sections of the book deal more predictably with the familiar narratives of public health, or—as Barnes has it—the development of the dominant etiology of the disease in the special context of France. A local study of public health responses in Le Havre, the tuberculosis capital of France, demonstrates the energy and dedication of local efforts to combat the disease, perceived here as a threat to local prosperity, through

campaigns against slum housing, alcoholism and specifically against the disease itself. While justifiable as meat in the narrative sandwich, this chapter sits somewhat uneasily with the rest of the book, raising questions as it does about other local responses to tuberculosis. In the final chapter, Barnes opens up the “oppositional etiology” of the left-wing workers' movement at the turn of the century, and so integrates the tuberculosis story into the living politics of a wider France.

While this study is the first English-language book on tuberculosis in France, it complements an accumulating native French historiography. A reading knowledge of French remains essential for those who wish to explore more fully the images and realities of tuberculosis in French history.

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Derek A Dow (comp.), *Annotated bibliography for the history of medicine & health in New Zealand*, Dunedin, The Hocken Library, University of Otago, 1994, pp. xx, 322, illus., NZ\$39.50 (+p&p). Available from the Hocken Library, University of Otago, Dunedin, New Zealand.

This is by far the most comprehensive bibliography ever published on the history of medicine and health in New Zealand, and in some respects it betters its Australian counterpart, *An annotated bibliography of the history of medicine and health care in Australia*, edited by B Gandevia, A Holster and S Simpson (Sydney, 1984). Rather than simply follow the Australian model, Dr Dow has adopted a different system of classification, and places more emphasis on historiography by arranging the entries in each section chronologically by date of publication. Another notable departure from the Australian model is the inclusion of unpublished research essays and theses. This is especially commendable, for a great deal of worthwhile historical