

reproduction. Overwhelmingly, those of the interwar period are on tuberculosis. Included is a set of ten from 1934 which nicely illustrate the use of the would-be universal graphic language—‘ISOTYPE’—invented by Otto Neurath. As we move into the 1940s the double-cross icon of the anti-tuberculosis campaign gives way to images of happy healthy families and dietary knowledgeable housewives. More noticeable, too, is the involvement of commercial companies in sponsoring “culture physique”—no less than fourteen of Renaud’s samples coming from Molson Ltd, a major Canadian brewery. Also in the 1940s are Department of Health posters for diphtheria immunization, and a few warning against syphilis and gonorrhoea. Among the latter is the “decadent” ‘L’Hecatombe La Syphilis’ by the Dutch artist, Louis Raemaekers—a poster that made its controversial debut in 1922–23, but was issued by the Ligue Canadienne de Santé only in 1944, whether for reasons of provincial prudery or influence of the Catholic Church we can only guess.

The 1960s and 1970s mark a shift, not simply because of the absence of health posters referring to infectious diseases (increasingly believed to be a thing of the past), but also, in terms of the sophistication of graphic design, which, from here forward, more and more approximates that of commercial advertisement. Tooth decay, road safety, proper diet, fluoridation, and—slickest of all—anti-smoking posters predominate. Gone are mothers and babies, and concerns over the health of labouring bodies. Interesting is another absence (though not peculiar to Quebec health posters) of bio-medical and medical professional iconography—white coats, test tubes, retorts, microscopes, stethoscopes, and the like.

Thereafter, to 2005, the number of pages per decade doubles. Surprisingly, this is not attributable to posters on AIDS (*SIDA*). These take up only a few pages and, in contrast to those reproduced in several recent coffee-table books, are among the dullest in the volume. An exception is a series of three posters issued by the Quebec government depicting

photo-like images of cemetery statuary in erotic AIDS-conducive poses. Unfortunately, no information is supplied on the artists, designers, and production agencies involved, nor on costs, print runs, circulation, and places of posting. As throughout, Renaud makes no attempt to put contextual flesh on these ephemeral, mass-produced material objects, or ask how, why, when, where, and which people came to think they had value. Thus the volume serves to sustain the impression that such images simply speak for themselves. It also reinforces a notion of continuity in their educational function. In these respects this book supplies compelling evidence for engaging in the historical questions it begs.

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**Robin Haines,** *Doctors at sea: emigrant voyages to colonial Australia*, Basingstoke, Palgrave Macmillan, 2005, pp. x, 248, illus., £45.00 (hardback 1-4039-8685-1).

Through my daily journey along Liverpool’s Dock Road, I have become the maritime equivalent of a train-spotter. I can recognize familiar ships and I know roughly how often they are in port. There have been some mornings when hitching a ride on one has seemed infinitely preferable to arriving at work. Yet I have realized, through reading Robin Haines’s excellent study of oceanic voyages, how little I actually know about what happens in that long interval between ports.

This latest book by Haines continues a series of publications on nineteenth-century emigration to Australia. Whereas the focus has previously been on the experiences of the emigrants, especially their morbidity and mortality, this aims at understanding the role and contribution of the doctors, who accompanied every oceanic voyage after 1849. Haines uses a selection of case studies from the 323 emigration voyages made between 1848 and 1885 from Britain to Australia.

## Book Reviews

Most of these were unremarkable, resulting in a mortality of less than 2 per cent. Yet there were several notorious voyages, especially in the 1850s when outbreaks of infectious diseases killed large numbers of passengers, often children. Surgeon superintendents were hired to ensure the implementation of sanitary regimes and to provide medical care during the average 100-day voyages. They appear to have been remarkably successful, particularly given the fact that most voyages started out with a number of emigrants already harbouring infectious diseases such as typhus, whooping-cough and measles. The surgeon superintendents, Haines suggests, need to be seen as early pioneers in preventive medicine. At a time when British sanitary reformers were struggling to impose similar regimes, the complete authority given to these medical men on ships could have served as a useful pilot study. Haines does not seek to examine why the British authorities failed to capitalize on this.

The partial nature of archive sources has determined the selection of case studies. Whilst the mortality data can be pieced together from materials in Australia and London, very few of the mandatory surgeons' journals for each voyage have survived. Haines is well aware of the potential pitfalls, and is confident that the sources used are representative. There is a good balance between describing the normal routines on board ships, and discussing how exceptional circumstances were handled. The inclusion of diary-style case studies, using anecdotes from the handful of surgeons who also left personal journals, makes for gripping reading. Through these personal accounts we learn how surgeon superintendents worked to maintain not only sanitary order, but also the appropriate moral behaviour of the emigrants. Their success in both of these areas was required if Australia was to thrive as a colony, and they were conscious that their supervisory skills were in turn being monitored by the authorities.

This book provides an insight into nineteenth-century society, exposing class and sectarian issues. At times the surgeons' perspective is subsumed by accounts of how "barely

civilized" emigrants from Ireland and the Highlands of Scotland struggled to cope with the protein-heavy diet and alien concepts of personal hygiene. Indeed, the emphasis on the experiences of the emigrants has squeezed the space devoted to the history of nautical medicine, apart from a brief acknowledgement of some "great men" such as James Lind, Gilbert Blane and Thomas Trotter. I had hoped to find more discussion of the backgrounds of surgeon superintendents, and some elaboration of Haines's views on ships as floating medical laboratories. This is a slim, beautifully-written volume. One hopes that there is yet more to be gained from such carefully detailed studies.

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**David Boyd Haycock and Patrick Wallis** (eds), *Quackery and commerce in seventeenth-century London: the proprietary medicine business of Anthony Daffy*, *Medical History* Supplement, no. 25, London, Wellcome Trust Centre for the History of Medicine at UCL, 2005, pp. viii, 216, £35.00, €52.00, \$64.00 (hardback 0-85484-101-6).

The editors and compilers of this volume will find a smallish but appreciative audience for the publication of an account book from the business of Anthony Daffy, the well-known manufacturer and trader in what came to be famous as Daffy's Elixir. The account book, with entries for the years 1674–83, was found by Patrick Wallis, and he and David Boyd Haycock set about transcribing and annotating it under the aegis of the Wellcome Trust, one of the few patrons of studies in how the medical market developed during the early modern period. Much of this large market consisted of proprietary medicines—originally secret but, if successful, eventually much copied concoctions, often manufactured as a single product by people not trained as apothecaries or physicians, and therefore generally included under the umbrella of quackery. Similar markets for proprietary medicines