

Book Reviews

according to the different spheres where New Zealand troops played a significant part—North Africa, Greece and Crete, Italy, the Pacific and Japan. There are also case studies of nursing aboard hospital ships, and of the voluntary aids who complemented the fully trained staff.

'Faraway Places' recounts the experiences of nurses and voluntary aids serving with British units, including some who had the misfortune to become prisoners of war.

One of the strengths of this book is the liberal use of diaries, personal correspondence and interviews conducted by the author and others. These vividly illuminate the hopes and fears of three generations of military nurses, and the arduous conditions under which many of them worked. Some of these vignettes are poignant in the extreme while others reveal a rich vein of humour; I especially liked the account of the shrinking uniforms of the first group of voluntary aids sent overseas in 1941. Rogers is also to be commended for her use of primary sources when retelling relatively familiar events, such as the 1915 sinking of the *Marquette* in which ten New Zealand nurses perished.

One disappointing feature is the failure at times to locate nursing in the wider historical context. Isobel Dodds, for example, who tended International Brigade members during the Spanish Civil War, is described as the daughter of a "politically active pacifist father who was a friend of Peter Fraser and knew Bob Semple and Paddy Webb" (p. 189). We are not told, however, that all three were MPs in New Zealand's first Labour government of 1935–49. By the same token, the text would have been enriched by a fuller explanation of the tantalizing references to the introduction of penicillin (pp. 222, 246, 306).

Overall, however, this is a valuable addition to the story of New Zealand nursing, and to the historiography of the changing relationship between Mother England and its colonial offspring. As Rogers notes in her final paragraph, those New Zealanders who served overseas learned "what it meant not to be British".

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Peter Razzell, *The conquest of smallpox: the impact of inoculation on smallpox mortality in eighteenth century Britain*, London, Caliban Books, 2003, rev. 2nd ed., pp. xxvii, 253, £40.00 (hardback 1-85066-045-X).

For those who follow the work of University of Essex research fellow Peter Razzell, the re-release of his 1977 *The conquest of smallpox* provides only a modest addition to his classic work on population growth in Britain during the eighteenth and nineteenth centuries. The largely unaltered main text is preceded by a brief new introduction that adds some recently compiled data and a more nuanced thesis concerning the ultimate impact of inoculation and vaccination on overall mortality in the period. In the new introduction Razzell reviews novel modes of analysing mortality based on parish data sets and the larger debates in the field of population demography. However, these are better treated in his numerous articles published on the subject. While this re-release intends to inform current debates in demography, this is still an important work for any medical historian interested in smallpox inoculation or vaccination. Historians new to the field should be encouraged to read this oft-cited text in full.

As in the original publication, Razzell concludes by stating that without inoculation and vaccination between one quarter and one third of the population would have died from smallpox in the post-civil registration period. Additionally, survivors of smallpox would be more at risk for opportunistic infections and impaired fertility. "It is not exaggeration to say that inoculation and vaccination prevented the decimation of the population of the kind that Europe suffered in the fourteenth century onwards, and instead of the rapidly expanding economy of the nineteenth century which we label the Industrial Revolution, there would have been a very prolonged period of decline and stagnation" (p. 210).

However, in the new introduction, Razzell admits that the major fall in infant, child, and adult mortality began before the implementation of inoculation. Thus, while not the single cause of the decline in mortality, Razzell continues to argue that inoculation and vaccination, "made a

highly significant contribution and were part of a general process of medical innovation and improvement that brought about the fall in mortality” (p. xxvii). Razzell identifies, but does not discuss other factors implicated in mortality decline including a range of environmental and domestic improvements such as the replacement of dirt floors with brick, improved personal hygiene, and the use of cinchona bark.

The original work effectively challenged Thomas McKeown’s thesis that medical intervention played little or no role in the decline of mortality rates in the eighteenth and nineteenth centuries. Razzell’s work also challenged a standard historical narrative that drew sharp and anachronistic distinctions between inoculation with smallpox, *inoculation*, and inoculation with cowpox, *vaccination*. This text remains one of the best sources detailing the actual practices and efficacy of inoculation in Britain prior to the introduction of vaccination. Inoculation, taken up first by the aristocracy, became a widespread and highly successful prophylactic by the 1770s except in the major cities. Razzell also presents a viral attenuation theory using pre-molecular experimental evidence to support historical accounts that describe inoculation as a relatively benign and non-contagious procedure. Finally, Razzell concludes that inoculation had a profound impact on mortality from smallpox, although the localization or extent and nature of this impact is much more complex than Razzell’s earlier text allowed for.

In fact, it appears that the rural and urban experiences of both smallpox and, in turn, the usage of protective treatments like inoculation or vaccination, differed greatly from place to place. This somewhat overshadows Razzell’s attempts to generalize the extent and impact of inoculation on smallpox mortality in Britain. Even in Razzell’s careful hands, the analytic landscapes are shaped by somewhat incommensurable features such as parish boundaries. In turn, concepts of endemic disease versus epidemic disease are distorted by somewhat arbitrary notions of time and place. These categories are important because they are used as analytic tools to describe the disease experience.

For example, Razzell argues that there were specific north-south divisions in the use of inoculation reflecting fundamental differences in the experience of smallpox. In the north, smallpox was generally endemic, or nearly always present, striking young children rather than adults. Razzell argues that the constant presence of the disease generated a kind of fatalistic expectation that treatment was futile, leading to the slow adoption of inoculation. In the southern parishes, where smallpox occurred in epidemics, the disease struck adults and children alike creating a generalized fear and encouraged mass inoculation. However, Razzell’s cultural arguments regarding the diffusion of both technologies lack the nuances of recent social histories, and he rightly calls for more detailed local studies.

Razzell’s rescue of inoculation from its dusty, “black-boxed” role in the history of vaccination reiterates the importance of exploring anachronistic presumptions in the standard histories of medical technologies and practice. But, Razzell’s work also reiterates the pitfalls of trying to isolate and generalize the impact of a particular medical technology on a disease by wrenching it from the social and cultural variables that enliven it.

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Urban Örneholm (ed. and transl.), *Four eighteenth-century medical dissertations under the presidency of Nils Rosén*, Acta Universitatis Upsaliensis, Uppsala Universitet, 2003, pp. 284 (ISSN 0526-2859, ISBN 91-554-5789-4).

Nils Rosén was one of the most prominent paediatricians in eighteenth-century Europe, and the author of an often cited textbook. Medical dissertations of the time were written in Latin, and are therefore not easily accessible for most modern researchers. In his linguistic PhD thesis Urban Örneholm has translated four dissertations completed under the direction of Nils Rosén that provide an improved opportunity to explore medical science and the understanding of diseases 250 years ago.