phenomena by chapters on the way in which others have thought. There is a particularly incisive chapter in which he goes back to Johannes Müller and shows that Müller was in fact much subtler than the crude interpretations of his work which were used to justify the rigid specificity theory of sensation. It is particularly interesting to compare this book with Pain by William Noordenbos (Amsterdam, Elsevier, 1958). Noordenbos was a Dutch neurosurgeon, struggling to understand pain mechanisms at the same time as Livingston. This book too relied on careful clinical observation which made nonsense of the accepted explanations and which proposed a shifting mechanism involving integrated core structures in brain and spinal cord. Livingston's book will reward anyone dealing with patients in pain today, as well as giving an insight into the struggles of a sensitive, intelligent man attempting to make sense of sensory mechanisms some fifty years ago.

> Patrick D Wall, London

Elizabeth Malcolm and Greta Jones (eds), Medicine, disease and the state in Ireland, 1650–1940, Cork University Press, 1999, pp. x, 278, £40.00 (hardback 1-85918-110-4), £15.95 (paperback 1-85918-230-5).

This, the first substantial survey of disease and medicine in modern Ireland, goes a long way towards answering some of the crucial questions its editors outline in their introduction. Irish historians have long been aware that eighteenth-century Dublin was a centre of medical education which rivalled London and Edinburgh, and that Ireland witnessed significant advances and breakthroughs in health care provision over the next two centuries. However, these important considerations have not been related to some of the broader questions

that have been asked by historians of medicine and disease in comparable societies. As the editors quite rightly point out, the history of Irish medical institutions such as hospitals has proliferated while broader, more encompassing studies have not. We do not know enough about why Ireland became a centre of medical education, neither do we know why voluntary and state hospitals proliferated in the country from the beginning of the eighteenth century or why this expansion declined by the twentieth. This volume endeavours to begin to provide answers to some of these questions, or, at the very least, to suggest ways in which such answers might be found. It is largely successful in this endeavour. The editors have taken a broad period and included articles on a wide range of topics which examine issues of health, illness, and health care provision. In doing so they have succeeded in addressing some of these central questions and, importantly, in relating them to wider issues that are crucial to any understanding of modern Irish history.

The book is divided into three sections: 'Medicine', 'Disease', and 'The State'. The first section provides the broadest chronological sweep with articles on aspects of medicine from seventeenth- to nineteenth-century Ireland. The second focuses more exclusively on developments in the nineteenth century, while the third is stronger on the early and very modern periods. The articles range from quite narrow examinations of particular events and people, to broader explorations of ideas and issues. There are—inevitably—gaps: the collection is stronger on medicine and disease than it is on the state and some articles are undoubtedly stronger than others. This is hardly surprising for a work of this kind, and it is a very minor criticism of a book which illuminates so much about each particular period. Some of the contributors, notably Mary Daly, James Kelly and Maria Luddy, are well known for their work on other aspects of modern Irish

history, and their expertise brings to the volume a stronger sense of the relevance of the history of medicine to the wider history of modern Ireland. Not only do the contributors highlight how issues of health and ill-health influenced and were influenced by Irish and Anglo-Irish politics and religion, they also add much to our understanding of salient and under-explored issues of class, gender and social mobility.

This collection is not a comprehensive history of medicine, disease and state intervention in Irish health since the seventeenth century. The editors clearly did not intend that it should be. More usefully, however, it is an excellent overview of the state of research in this area and will certainly serve as a stimulus to further research. Moreover, this book has much to offer all historians of modern Ireland as it illuminates many aspects of the broader social, political and cultural history of the country. As a historian whose interests include education, associational politics, social mobility and gender, I was particularly struck by the way in which a number of essays impacted not only on my own work, but on the work of numerous other historians of modern Ireland. This collection helps move the history of medicine in Ireland from the periphery to the margin.

> Senia Paseta, St Hugh's College, Oxford

Cormac Ó Gráda, Black '47 and beyond: the great Irish famine in history, economy, and memory, Princeton University Press, 1999, pp. xii, 302, £21.95 (0-691-01550-3).

The 150th commemoration of the Great Irish Famine produced a plethora of publications, several of them from Cormac Ó Gráda's pen. *Black '47* is the finest of them all. Its strengths stem from the author's command of evidence, his

comparative perspectives and his skill in combining techniques drawn from several disciplines.

The most striking feature emerging from the comparative approach is the scale of the tragedy. One-eighth of the population (more than one million people) perished in five years, a greater proportion than in any modern famine with the exception of China's Great Leap Forward. Part of the reason is that the famine lasted so long. It was crucial too that a third of the population lived almost exclusively on potatoes and so was at risk when the harvest was damaged by blight in 1845 and all but destroyed in subsequent years.

Would fewer people have died had relief policies been more effective? Ó Gráda's discussion is an outstanding treatment of a question that has long bedevilled Irish historiography. There were (and are) essentially two possible relief strategies: cash-for-work and food aid. The former was tried in the form of public works, often criticized as expensive, corrupt and inefficient. Ó Gráda mounts a robust defence, employing Amartya Sen's concept of entitlements. Mid-nineteenth-century Ireland possessed efficient bureaucratic structures compared to twentieth-century famine-wracked countries and it was free from civil war. Public works failed because of a lack of will by the British government, because the incomes earned were inadequate to buy labourers enough calories to fuel manual work, and because, contra Sen, the Irish food problem was not simply one of distribution, but of inadequate supply. Food aid, via the soup kitchens, was adopted in early 1847, but was abandoned in the summer in the mistaken belief that the blight had been beaten. At one time the kitchens were serving three million meals a day, testimony to the ability of administrative systems to cope.

The Irish Poor Law had been set up in 1838 and 130 workhouses were operating in 1845. But they were not designed to handle huge numbers of destitute people and gave