

A major turning point in Micale's account comes with the period following the upheavals of the French Revolution. Attentive throughout to the political contexts of the discourse about hysteria, he writes that: "The ebb and flow of the discourse . . . clearly mirrors a larger cycle of gender polarization and liberalization" (p. 278). Partly in response to revolutionary-era demands by women for new rights, the post-revolutionary political reaction also became a period of "gender counter-revolution". Older conceptions of gender difference reasserted themselves and hysteria was re-inscribed in the uterine model. One aspect of this was the parting of the ways between hysteria's "two cultures". As alienists assumed an increasingly significant role in policing the post-revolutionary gender order, male hysteria all but disappeared from view outside the memoirs or correspondence of exceptional figures like John Stuart Mill.

In the final part of his book Micale returns to familiar territory, charting how Charcot—working in the liberal, militantly secular political environment of the Third Republic—resurrected the neurological paradigm and in so doing made it once again possible to train the medical gaze on the male variant of hysteria. This turn away from the uterine model, which in Charcot's case meant downplaying the role of sex in the aetiology of the disorder, was not without its ironies, as Micale's final discussion of Sigmund Freud makes clear. Whereas Freud uncoupled hysteria from any anatomical moorings and thus created a purely psychogenic model, he also restored sex to a central place in the disease picture surrounding hysteria. At the same time Freud rejoined the two cultures of hysteria, drawing on laboratory science and clinical experience as well as literature, mythology, and biography, including, not least, his own—the numerous nervous ailments of the 1890s that plagued him and that he referred to in his correspondence as his "little hysteria".

But even in Freud's case, a certain reticence remained surrounding the topic of male hysteria. Despite his significant contribution to

the fin-de-siècle questioning of gender and sexual identity, none of his published case histories of hysterics includes a male patient. Arguably it was not until the Great War that male hysteria, in the form of shell shock, found widespread entry into the psychiatric literature. Missing from Micale's narrative is any discussion of the epidemic of wartime male hysteria, a crucial chapter in the history of this shape-shifting ailment and one that has been the focus of much recent scholarship. Micale is exemplary in his weaving together of intellectual, medical and cultural history; a concluding foray into social history would have provided a welcome coda to this otherwise highly illuminating account.

Andreas Killen,
City University of New York

May-Brith Ohman Nielsen, *Mennesker, makt og mikrober. Epidemibekjempelse og hygiene på Sørlandet 1830–1880*, Bergen, Fagbokforlaget, 2008, pp. 433, Kr. 498 (hardback 978-82-450-0687-2)

In 2003 state-sponsored public health in Norway celebrated its 400th anniversary. The event, marked by a two-volume official history and numerous exhibitions, awakened historical interest in public health issues, especially with regard to the nineteenth and twentieth centuries. May-Brith Ohman Nielsen is the first to present a study of public health for an entire region. She concentrates on *Sørlandet* (the south country), the counties bordering the Skagerrak from Kragerø in the east to Flekkefjord in the west, from c.1830 to c.1880. At that time the coastal region was a centre of Norwegian sailing, and its major town, Kristiansand, had an important naval base as well as an internationally recognized quarantine harbour. Town and region were thus well acquainted with the problem of "importing" disease from outside and with a traditional preventive response: quarantine, isolation, and disinfection.

Nielsen's account is based on a careful reading of a wide variety of sources: reports from the region's district medical officers, quarantine commissions, public health commissions, newspapers, minutes of medical societies, contemporary medical journals, and correspondence. In a chronological narrative she relates the changing profile of diseases—from scabies and nerve fever (typhoid/typhus) to tuberculosis—and the efforts of the medico-political authorities to understand these diseases and to prevent their inception and spread. Despite the detail, however, there is no systematic comprehensive discussion of public health measures in the region. Statistics on incidence and lethality of specific diseases are few, and classic public health reforms such as water supply, sewerage, hospitals, and the like are presented rather cursorily.

These are the cholera years, and Nielsen's central interest is the medico-political struggle over the aetiology of cholera and how to combat the disease. The contest between contagionism and anticontagionism, or quarantinism and sanitationism, is, of course, a staple of nineteenth-century public health history, and the outline (and outcome) is well known. However, this is the first in-depth study of the confrontation in Norway. So what is new?

According to Nielsen, the struggle over how to deal with cholera in Norway was simultaneously a contest between theory-driven and practice-driven medical thinking and a medico-political conflict between the central authorities in Christiania, the country's capital, and the provincial experts in Kristiansand and Sørlandet. Thus, the overarching theme of how scientific truth is determined takes the form of a conflict between centre and periphery, so well-known in Norwegian historiography. Doctors and political leaders in Kristiansand knew from their experience with the international quarantine harbour that quarantinism worked in preventing the spread of disease. They also knew that the physical situation of Kristiansand—buildings in wide, airy streets

on well-drained soil—was an intrinsically healthy environment; hence disease must emerge and spread by contagion of some sort. Doctors in Christiania, on the other hand, did not have this experience; hence their opinions were derived from contemporary medical theory; indeed, Nielsen argues that several were prepared to deny the validity of practical medical experience.

Since authorities in Christiania determined Norwegian policy, the miasmatists in the capital overruled the contagionists for over three decades. Quarantine requirements were relaxed from the early 1830s; the international quarantine station in Kristiansand was laid up. Reports by local medical officers documenting examples of paths of contagion were ignored for many years. During the 1853–54 cholera epidemic, the country's worst, the conflict reached an emotional peak when Kristiansand leaders argued that the Christiania-based coastal steamer "Constitution" had brought the cholera contagion from the capital city and therefore it should no longer dock in the town. By the next epidemic in 1866, the miasmatists had lost considerable power. Ernst Ferdinand Lochmann, the major medical advocate of contagionism, had become professor in Christiania and succeeded in organizing preventive measures along the Kristiansand model with the result that only eight persons died of cholera, compared with almost 1,600 in 1853. The passage of a revised law on control of seaborne diseases in 1881 marked the official return of quarantinism.

Despite the occasional moderating phrase, Nielsen's tone is pretty black and white, reminiscent more of Ackerknecht than of Pelling and Baldwin; there is no doubt that Lochmann and his Kristiansand colleagues are the enlightened heroes and that the medical elite in Christiania are blinkered obsessives. In line with this tone the reader gets much about the medico-political milieu in Kristiansand, but only fragmentary information on the counterpart in Christiania. Despite this weakness, though, Nielsen has written a pioneering study of the medico-political sources of public health in Norway that

deserves a wide readership and should stimulate further research.

William H Hubbard,
Haugesund, Norway

Kathryn Edgerton-Tarpley, *Tears from iron: cultural responses to famine in nineteenth-century China*, Berkeley and London, University of California Press, 2008, pp. xxiii, 332, £23.95, \$39.95 (hardback 978-0-520-25302-5).

How is it possible to speak about the unspeakable? How can historians write about thoroughly disturbing historical experiences? How can we find the appropriate balance between empathy with those having to make impossible choices and the need to keep an analytical distance from the events, the sources and the people we are studying? The dearth of studies on one of the most lethal famines in China's history that caused, directly or indirectly, the death of an estimated 9 to 13 million people, suggests that there is no easy answer to these questions.

Kathryn Edgerton-Tarpley, inspired by studies on the Irish Famine of the 1840s, is perhaps the first author to have approached the North China famine of 1876–79 in its entire ambiguity and multi-dimensional complexity—a task that only became feasible by focusing explicitly on “cultural responses” to the famine rather than on writing its social or economic history.

The first two chapters of this book provide a succinct introduction to the historical setting and the experience of the famine in southern Shanxi, which was one of the worst hit regions. The description of the local famine experience draws largely on a ‘Famine Song’ belonging to the folk tradition, an extraordinary document preserved both in a manuscript version dating to the 1890s and an interestingly edited version published in 1986. Then she shifts to an analysis of the different responses to the famine. This part includes

four chapters dealing with the local, official, outside (i.e. western) and Jiangnan (i.e. southern elites) responses and the various ways they coped with, understood, and explained the famine in its local, national and international context (“from Suzhou to London via Shanghai”). The wealth of detail presented here shows nicely how these partly overlapping perspectives in themselves actually include many ambiguities, as for example the irreconcilable representations of the famine commissioner Yan Jingming, who is portrayed as a cruel slaughterer of rebellious salt workers in an orally transmitted folk story, but as a conscientious relief worker in the written tradition. At the same time the local ‘Famine Song’, purportedly stemming from the folk tradition, also supports the view that the government had the best intentions and did what was possible against all the odds, and, perhaps even more surprisingly, we learn that even today Yan Jingming’s story still causes heated debates among Shanxi villagers.

In the last part of the study the existential meaning of the famine experience is epitomized in what the author calls “icons of starvation”, from the female sacrifice required by Confucian family values, to the “feminization of the nation” (to save the women is to save the nation) and the metaphorical reading of the descriptions of cannibalism. Even though the significance of these signs is different at the different levels of analysis, it is striking that at all levels the foremost way to deal with the unspeakable was to turn it into moralizing accounts. These were located in very different discourses, ranging from the wrath of heaven at human greed and vice—a view that was shared by all, from the Shanxi villager to the foreign missionary—to the Chinese rejection of the blessings of industrial modernity (railways). “Famine was the antithesis of progress” (p. 130). Again, in this context the reader is surprised to learn that it is the alleged “conservatives” who ask for the use of foreign loans for famine relief, whereas the modernizers seem to be more concerned about funding their armies.