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interest demonstrated by a case study of liquid milk. French and Phillips indicate the importance of pressure groups in influencing the views of both civil servants and politicians about the regulatory framework that was desirable and practicable, the latter amounting to the exercise of “bureaucratic discretion”. Moreover, the authors hint at a problematized version of Whitehall and Westminster that recognizes a variety of actors and cross-cutting administrative cultures. This could profitably be explored further, for instance by studying the long-standing and at times bitter policy struggles between the Ministries of Agriculture and Health in the area of food, by adducing additional evidence from the book’s major sources: Parliamentary Papers and the unpublished ministerial archives held in the Public Record Office.

At £40, this volume is aimed for the shelves of University libraries rather than the bestseller shelves of bookshops, but it will nevertheless quickly become established as a benchmark of food regulation history. We now need similar books on the period after 1939 and histories comparing the situation in the UK with that of other countries.

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Judith Walzer Leavitt (ed.), *Women and health in America: historical readings*, second edition, Madison, University of Wisconsin Press, 1999, pp. ix, 692, £22.50 (paperback 0-299-15694-7).

Until recently, traditional accounts of the history of medicine have largely ignored women’s role as either givers or receivers of health care. Over the last few decades, more scholarship has focused on women’s experiences, and it has become increasingly sophisticated and nuanced, moving away

from a view in the 1970s of women as victims to women as agents who act in ways that both enable and challenge established medical practice. *Women and health in America* adds more detail to this increasingly complex picture. In this thoroughly revised second edition, Judith Walzer Leavitt has assembled another outstanding group of essays about women’s experiences in the health care arena. This book is especially valuable since it collects in one volume existing scholarship that had been previously available only in a variety of disparate sources.

The volume is organized chronologically into three parts: the first covers subjects from the seventeenth and eighteenth centuries, while the second focuses on the nineteenth century. The third, which addresses health concerns from the late nineteenth to the twentieth century, is the largest unit, containing twenty-eight out of the thirty-five selections that comprise the volume. This final section is further subdivided into specific topics: body image and physical fitness; sexuality; fertility, abortion, and birth control; childbirth and motherhood; mental illness; health care providers (midwives, nurses, physicians); health reform and public health; and the medicalization of health practices.

Twelve brief, but helpful introductions precede every section, providing a concise overview of the subject and a précis of each article. Only six essays from the 1984 edition remain. The remaining twenty-nine were initially published over the last fifteen years, from as early as 1986 to as recently as 1996. Topics bearing on issues of race, ethnicity, class, and sexual orientation have a much more prominent place in this volume than in the first edition. Some contributors provide broad overviews of a particular subject, such as Nancy Dye and Daniel Smith’s chapter on ‘Mother love and infant death, 1750–1920’, which tracks maternal feelings and perceptions about children during this period through an examination of women’s personal writings.

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Others narrow the focus considerably. In 'From robust appetites to calorie counting: the emergence of dieting among Smith College students in the 1920s', Margaret Lowe probes the change in attitudes of Smith College students toward food and their bodies. Prior to the First World War, weight gain was perceived as a sign of health, but by the 1920s, dieting and weight loss became central concerns which, Lowe argues, "signal a pivotal shift in the way white middle-class college women understood and shaped their bodies" (p. 173).

The range and depth of this book is impressive, and several themes emerge from even cursory browsing. First, medicine both shapes and reflects social attitudes of the time in ways that profoundly constrain and limit our knowledge of health and disease. Second, but related to the first point, medical and social understanding of health and illness have material consequences in people's lives. Conceptions about the body influence what a society considers appropriate or inappropriate behaviour based on age, gender, race, or condition of health, as Elizabeth Lunbeck's article, "'A new generation of women': progressive psychiatrists and the hypersexual female', vividly demonstrates. While it is important to recognize how these societal beliefs affected past medical practices, it is equally, if not more, important to be cognizant of how they continue to operate. Leavitt's book is a compelling testimony to how an appreciation for the contingencies of history and cultural values, particularly with regard to gender, can guide the current direction of health care in America. And this is Leavitt's express intent: "It is my hope that the historical articles in this book can further that understanding by helping to inform current health policy debates. . . . By looking back while we plan ahead, the issues at the turn of the millennium . . . can be put in a perspective and context that can maximize future development" (p. 7). *Women and health in America* thus provides a

fascinating glimpse into the past, while furthering an understanding of the complex social factors that continue to shape health care in America today.

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Julyan G Peard, *Race, place, and medicine: the idea of the tropics in nineteenth-century Brazilian medicine*, Durham, NC, and London, Duke University Press, 2000, pp. x, 315, £11.95 (paperback 0-8223-2397-4).

Colonial medicine and tropical medicine have become virtually synonymous in recent years but, as Julyan Peard reminds us in this timely book, tropical medicine also developed outside the domains of the European powers. *Race, place, and medicine* is the story of one such development: the ideas generated by the Bahian School of Medicine in nineteenth-century Brazil, or the "Tropicalistas" as they have come to be known.

Bahian "tropical medicine" evolved in response to very different imperatives than "tropical medicine" in the European colonies and was, to some extent, its antagonist. European medical discourses framed the tropics in an increasingly negative light, and by the mid-nineteenth century it was generally thought that tropical climates enervated the minds and bodies of their inhabitants. It was climate that made the natives of India and Africa indolent, and which made Europeans—particularly northern Europeans—dynamic and powerful. Alongside this widely held view went the belief that there were certain maladies peculiar to tropical climates, or, at least, that diseases manifested themselves more violently in the tropics than in temperate lands. During the nineteenth century, these ideas had begun to