

## Book Reviews

A collection like this is bound to be mixed in quality and range; the best, most testing essays here scrutinize particular case histories to expose the complexities of intersections between science and gender. Ornella Moscucci's study of hermaphroditism "as an attempt to reconcile the concept of sexual difference with the idea of human nature" (p. 178), or Roger Cooter's fascinating essay on the paradoxes inherent in Harriet Martineau's espousal of mesmerism and positivism, for example, are faithful to the contradictions in their material and judicious in their claims about what can be proved on the evidence of one case. The "Woman Question" is still being asked—and rephrased. A single narrative of the history of gender and scientific enquiry is not possible; but between universality and *différence*, the *via media* of the case study is one way forward for more comparative and comprehensive gender studies.

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DIETRICH VON ENGELHARDT (ed.), *Diabetes: its medical and cultural history: outlines, texts, bibliography*, Berlin, Springer-Verlag, 1989, 8vo, pp. x, 493, illus., DM 156.00.

What a disappointment! What an embarrassment! I leaped at the opportunity to review a 1989 book on the medical and cultural history of diabetes. Surely it would contain a wealth of new historical information—the most recent research, new analyses and interpretations, new methods as developed by our new generation of medical historians, new questions stemming from our changing scientific and social understanding of diabetes and insulin. At last, a really historical book on diabetes would be in the mail.

Alas, *Diabetes: its medical and cultural history* turns out to be a bad anthology of old articles. There is little if anything in the collection that will be new to serious students of the history of diabetes, little if anything of value to curious laymen. The book contains some 35 articles, most reflecting the antiquarian, whiggish interests of an older generation of medical historians. Page after page of fact-laden priority-tracing, philological exegesis, literature-searching and gradgrind biography, bracketed by some silly poetry and badly-presented illustrations.

The serious personal embarrassment is to have to criticize an anthology for not taking account of one's own work. The most recent article included in *Diabetes: its medical and cultural history* was published in 1978. Yes, historical scholarship moves slowly, but this is ridiculous. It was in 1982 that I published a 300-page history of the discovery of insulin, based on a cornucopia of hitherto unexamined sources. The extent and excellence of my sources, ranging from the Banting, Collip, Macleod, and Best papers to the Nobel archive in Stockholm and interviews with first-hand observers of the discovery, means that all earlier accounts of the discovery of insulin, virtually all references to the discoverers (and, I believe, to the precursors) cannot stand without some revision, if only to take account of the new data and/or to dispute my arguments.

Readers of *Diabetes: its medical and cultural history* would not know that *The discovery of insulin* exists—unless they find the single reference in the book's spotty, inaccurate bibliography. They would not know about any of the historiography produced about diabetes in the 1980s (admittedly a slim shelf), including my second book *Banting: A biography* published in 1984. They would not know, either, of any of the scientific developments of our time—the new typology of diabetes, the relationship of some forms of diabetes to immunological disorders, the recent emphases on education and compliance as central in the history of diabetes therapy, the fall from grace of lente insulins, the development of synthetic human insulin, and on and on and on. The new knowledge is important because it causes historians to ask new questions. The outlines of all sorts of new approaches to historical events in diabetes, on both sides of the discovery of insulin, are becoming apparent, but are completely absent from this book.

*Diabetes: its medical and cultural history* might have some useful value as an anthology if it had appeared in 1980. Now it has very little, except as a sometimes handy reference when you want to know more about the derivation of the word "diabetes" and the lives of some of the pioneers in diabetes research. It ought not to have been published, and it should embarrass not

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only this reviewer but everyone connected with its production, with the exception of the fairly substantial number of its authors who are dead.

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YAKOV RAPOPORT, *The doctors' plot*, transl. Natina Perova and Raissa Bobrova, London, Fourth Estate, 1991, pp. xii, 280, illus., £17.95 (1-872180-13-2).

On 13 January 1953, the astounded citizens of the USSR heard a massive "criminal conspiracy" denounced. Prominent Soviet physicians had conspired to kill the leaders of the country by medical means. A round of arrests followed involving high-ranking physicians and scientists. This was the so-called "Doctors' Plot".

The administration forced Yakov Rapoport out of his major professional position as chief pathologist at the First Gradskaya Hospital on 14 January. He assumed that his removal was merely routine antisemitism. Later events showed that it was a prelude to his arrest. On 2 February 1953, Rapoport was still a distinguished pathologist on the staff of the Tarasevich Institute of Control of Medicinal Preparations in Moscow. On 3 February he was in Lubyanka Prison having his first lesson in MGB interrogation. A few days later, he began advanced studies in Lefortovo Prison.

*The doctors' plot* records Rapoport's recollections of his incarceration—fortuitously, for only two months. He wrote it some years later and it was finally published in the USSR in 1988. Though based entirely on memory, Rapoport's account is full of detail. But it is much more than a memoir from prison. *The doctors' plot* chronicles the pernicious, stultifying, and often terrifying effects of Stalinism from the 1930s until 1953.

One muted theme which presents an important message for modern readers is moral courage and our need to cultivate it. Not the adrenalin-boosted courage of jumping into a river to rescue a drowning child, but the more testing courage that exists—or does not—unaided by drama. Will an individual defy a corrupt regime by refusing to inform on a neighbour or a colleague? Can he or she adhere to ethical standards in the face of unrelenting pressure to abandon them?

The consequences of failure by individuals to rise to ethical challenges invests *The doctors' plot*. Rapoport cites several instances of unethical behaviour. One was the use of Soviet medical commissions to certify the health of physicians who later became prisoners. For example, Eliazar Gelstein was a physician incapacitated by cardiac disease. A commission of doctors proclaimed him fit for military service. Rapoport, himself a victim of severe hypertension, also was supposedly fit (pp. 86–7). Later, he realized that this charade provided a patina of legality. If he and Gelstein were physically fit for military service, they also were fit for prison. What of the ethical values of the Soviet physicians who made up these commissions?

Rapoport is scornful of two younger colleagues who, under direct orders, wrote a scathing denunciation of Rapoport's pathology textbook. This was more than two years after its publication. The negative book review was only a minor issue in Rapoport's life. Nevertheless, its publication is another example of the cynical construction of spurious legality by the Soviet regime. If the Soviet medical literature denounces Rapoport's scientific work this is one additional sign that the state has a duty to act against him. He was physically fit for prison, and as a bad scientist he ought to be in prison.

The young men excused themselves, later, on the grounds that though they were unhappy writing such a review, they acted under orders. Here is the leitmotiv of the 1945–48 war crimes trials. *Befehl ist Befehl* was the constant refrain in Europe, the Japanese equivalent in the Far East. Orders are orders. One must obey. But superior orders had limited merit as a defence in these trials, and received some weight as mitigating factors in the trials of those of low rank only. "Superior orders" should be equally unacceptable now, even though disobeying may carry major economic and political penalties.

And there's the rub. Rapoport's appeal is for honesty and courage in the face of demands by the state to behave otherwise. That is his definition of courage. But many of us lack these