

Book Reviews

public health interventions aimed at promoting healthy drinking habits by, for example, seeking to discourage the excessive consumption of alcohol or soft drinks with high sugar content.

Dealing with drink is a much more solemn affair, the “morning after” perhaps to the *Liquid pleasures* earlier imbibed. None the less, it is an equally good book. Against the background of growing alcohol consumption since the 1950s, Thom analyses the development of the “policy community” which shaped the response of successive governments to an increasing level of alcohol problems. The main contribution of this book lies in its consideration of the changing emphasis of policy from treatment towards prevention. Thom highlights changes in the alcohol policy community, and the introduction of competing conceptions and paradigms of alcohol problems as key factors behind this shift. She charts how the initially dominant disease model championed by psychiatrists gave way to a population-based approach advocated by a broader range of professions and voluntary groups, highly consistent with broader ideological influences in the health field, such as the “new public health”. Thom discusses the tensions within government prompted by the new approach and documents interdepartmental battles in Whitehall. She goes on to discuss more recent developments, notably the shift towards a “harm reduction” approach and suggests that the tensions surrounding policy in this field remain. The deliberations regarding the Blair government’s long overdue alcohol policy, to some extent provide further evidence of this.

Thom also analyses the role of researchers in providing an evidence base for public policy formation in this field, noting that during the 1970s research findings became more important in the development of alcohol policy. She also demonstrates how evidence has been used selectively to advocate (or oppose) particular policies. This kind of approach is

at the cutting edge of contemporary policy research. The politics of expertise, evidence and discourse has now become central to our understanding, not only of the governance of public health problems but in other policy areas as well.

In summary, both books are a welcome addition to the bookshelf and have an appeal beyond their respective target audiences of social history and alcohol studies. Despite their contrasting approaches, they also complement each other well, providing a considerable insight into the social and political aspects of our drinking habits.

Rob Baggott,

De Montfort University, Leicester

Johanna Geyer-Kordesch and Fiona Macdonald, *Physicians and surgeons in Glasgow: the history of the Royal College of Physicians and Surgeons of Glasgow 1599–1858*, London, Hambledon Press, 1999, pp. xviii, 478, £30.00 (hardback 1-85285-186-4); **Andrew Hull and Johanna Geyer-Kordesch**, *The shaping of the medical profession: the history of the Royal College of Physicians and Surgeons of Glasgow 1858–1999*, London, Hambledon Press, 1999, pp. xxx, 288, £30.00 (hardback 1-85285-187-2).

Soon after my appointment as archivist to the Greater Glasgow Health Board in 1979 I was taken to the Royal College of Physicians and Surgeons to discuss the College records and history. Stanley Alstead and Willie Reid, two leading members of the Senior Fellows Club, enthused about the need for a comprehensive history to mark the College quatercentenary. This two-volume history does not do justice to their commitment, or to the efforts of many other loyal local members over the past 400 years.

One problem is the failure to adopt a

consistent tone or approach. The first four chapters by Fiona Macdonald record the activities of the Faculty (as it was known until 1962) up to the mid-eighteenth century. They exhibit a tendency to become bogged down in legalistic minutiae on the regulation of practice, but with little detail about the number of practitioners at any given time, or their relationship with patients. One contributory factor is the apparent patchiness of the College records prior to 1654 (p. 13), and the loss by fire of the College minutes for the period 1688–1733. As a result, many of the conclusions in these early chapters are no more than speculative.

Even the College founder, Dr Peter Lowe, remains a shadowy figure. As a native of Errol, in Perthshire, I have always been intrigued by the possibility that this may also have been Lowe's birthplace; the answer to this is as elusive now as it was a century ago when Alexander Duncan produced his *Memorials of the Faculty of Physicians and Surgeons of Glasgow*. The analysis of Lowe's textbooks (pp. 44–76) is a useful exercise but it is hard to accept the claim that it "opens a window on knowledge and medical practice in Glasgow at the time of the founding of the Faculty". There is nothing in this history to suggest it was read by locals, and the text stresses his links with eminent metropolitan surgeons rather than the local profession.

The remainder of volume 1 by Johanna Geyer-Kordesch poses other and more serious difficulties. The authors' Introduction states: "The Glasgow incorporation sometimes fades into the background because progress in medical knowledge and teaching at times only makes sense in the broader context of European medicine." Sadly, this laudable aim is often poorly executed. The chapter on the Enlightenment is a case in point. The references to "ousted" ministers, "Killing Times", Cameronians and "moderates" (p. 158), for example, are never explained for a readership which is unlikely to contain

many ecclesiastical historians and they have, in any case, little or no relevance to the history of the College. In too many instances the author's agenda is far removed from the role of the College as a medical institution.

The chapters on the Enlightenment, the teaching of botany, anatomy and chemistry, and midwifery and general practice, which form the core of the middle section of volume 1, exaggerate the role of the College in these spheres. They are characterized by sweeping but unsubstantiated statements. On page 194, for instance, it is claimed that licentiate candidates made up a large percentage of Glasgow University's paying "students" but no figures are provided nor is it stated to which period this refers. (No medical class lists survive for the period prior to 1790, and only Jeffray's anatomy lists are extant between then and 1803.) Later it is claimed that the career of Professor John Burns stood at the cusp of the "typically Scottish conflation of the MD and the surgical licence"; again, no evidence is offered in support of this contention which is at odds with my own impressions. The discussion of eighteenth-century obstetrics concludes that William Smellie and William Hunter wished to improve surgical education "in accordance with Scottish values and with the Faculty's educational and professional concerns in the 1720s and 1730s". Since we have already been told that no College minutes survive for the period 1688–1733, it is difficult to see how this conclusion has been reached.

The arguments put forward in this section are further undermined by the factual errors which litter chapters 5 to 10. The claim that botany and chemistry were taught in Glasgow only by university medical graduates until the nineteenth century—"excepting only the outstanding William Hooker"—is just one glaring example. William Robison, lecturer in chemistry 1766–9, was an MA, not an MD; he subsequently filled the chair of natural philosophy at Edinburgh. As for William

Book Reviews

Hooker (1785–1865), he was not appointed to the chair of chemistry until 1821, and his son was named Joseph, not Jackson (p. 209).

It is also inaccurate to state that Glasgow did not have a specialist midwifery hospital until 1834 (p. 266), for James Towers, a member of the College since 1787, had established a lying-in hospital in the early 1790s and continued to run this until his death in 1820; it was then taken over by his son, who also succeeded him in the university chair of midwifery. Other claims are equally misleading. On page 406 it is asserted that “Like the majority of the teachers at Anderson’s College, John Burns later transferred to a professorship at the university.” In truth, only 6 of the 26 Anderson’s College lecturers appointed up to 1860, as listed in Comrie’s *History of Scottish medicine*, made this transition, with one other recruited as a university lecturer.

The mention of Anderson’s College highlights another recurring problem, the failure to identify individuals when they first enter the story. “John Anderson’s extra-mural college” is first mentioned on page 239 but we do not learn until page 267 that Anderson was “an educational reformer and professor of natural philosophy”, nor is there any indication that he died in 1796, three years before the foundation of the institution that bore his name.

One major omission from this first volume is the failure to explore in sufficient detail the College’s links with other aspects of the Glasgow medical world. In particular, there is virtually no mention of the Glasgow Medical (later Medico-Chirurgical) Society founded in 1814, despite its role in prosecuting medical science and the fact it held its monthly meetings in the College building. One of the few references to appear—“William Hood, who had protested earlier, became the fifty-third member of the Glasgow Medical Society in 1828, but died in 1830” (p. 359)—is not only a complete non-sequitur, having no relationship to the

events discussed immediately before or after, it is also inaccurate. Hood’s name does not appear in the Medical Society list of members, where the fifty-third entry, dated 16 November 1824, is that for John Robertson.

Some of the many errors of fact or interpretation result from the failure to consult relevant secondary sources. The claim that hospital clinical teaching at Glasgow predated its introduction in Edinburgh (p. 305) ignores the path-breaking research of Guenter Risse’s *Hospital life in Enlightenment Scotland*, which is omitted from the bibliography, along with a number of other works one might expect to find there. The history of the Royal Medico-Chirurgical Society, published in 1989, is omitted, while a footnote (p. 344) directs readers to Jacqueline Jenkinson’s *Scottish medical societies 1731–1939* (1993) for information on the Glasgow societies. Discussion of the medical curriculum makes no mention of Michael Moss and Derek Dow’s 1988 article in *History of universities*, nor does A D Boney’s work on the various physic gardens appear in the bibliography, though his 1985 book is referred to in a footnote on page 170.

The Introduction to volume 2 states this is “primarily the history of an institution”, focused squarely on the College and its emergence as a key player in postgraduate medical education. The text charts the growing importance of the universities in the second half of the nineteenth century, the decline of the College in the half century to 1930, and its subsequent emergence as a teaching and examining body.

The account of the College’s external relationships in the twentieth century is more sure-footed and less self-indulgent than the first volume, though it too stumbles on a number of occasions and fails adequately to contextualize the College’s activities. In the discussion of early twentieth-century initiatives in postgraduate

medicine (pp. 78ff) Glasgow University's Principal McAlister is only belatedly identified as an "eminent medical man", with no mention of the fact he was also president of the General Medical Council 1904–31. It is erroneously stated that in 1936 McAlister was succeeded as Principal by Hector Hetherington, who is generally credited with having revived the reputation of Glasgow medical education during his 25-year tenure. In fact McAlister was succeeded in 1929 by Sir Robert Rait, professor of Scottish history since 1913. Rait seems to have had little interest in medical affairs, which may have a bearing on the reportedly low status of the College in the 1930s.

The commentary on the relationship between the College and the hospitals raises further concerns about the understanding of the local scene, and the accuracy of the reporting. Clinical tutors were not appointed in 1961 to "Glasgow's hospitals" (p. 185), but to a number of those located within the Western Regional Hospital Board area, which stretched from Dumfries in the south to Stirling in the north. The dean of medicine presumably had regular meetings with the WRHB's senior administrative medical officer, and not the senior administrative officer as stated (p. 188). No clear outline is given of the health boards which replaced the WRHB in 1974 (p. 222), nor of the extent to which the Greater Glasgow Health Board (never named as such) encompassed the majority of west of Scotland teaching hospitals. And George Forwell was not an unspecified "Chief Area Medical Officer" (p. 236) but was Chief Administrative Medical Officer of the GGHB.

There are some significant omissions which straddle both volumes. It is surprising, for instance, to find no evaluation of the part played by the *Glasgow Medical Journal* in the evolution of Glasgow medicine. There is a brief reference to the short-lived *Glasgow Medical Examiner* but no comment on the *GMJ*,

which appeared from 1828 to 1833 and again from 1853 to 1955. It was published from 1868 under the auspices of the Glasgow and West of Scotland Medical Association, a body referred to only once, in a biographical sketch of Alexander Napier (p. 67, fn. 65). The amalgamation of the Edinburgh and Glasgow journals to form a new *Scottish Medical Journal* is noted on page 148, with the comment that "access to such a journal has been identified as one of the essential features for maintaining a successful 'research school'". Despite this acknowledgement, no attempt has been made to assess the *GMJ* in this light.

Equally surprising is the neglect of the specialist local medical societies, all of which had close links with the College, and in most instances met within the College premises. There is no mention, for instance, of the Glasgow Obstetrical and Gynaecological Society (founded in 1885), and there is a single perfunctory reference to the Glasgow Pathological and Clinical Society (1873).

The claim that volume 2 would be primarily the history of an institution is not borne out. Statements about the corporate life of the College are often presented in an apologetic or disjointed manner. Typical of this approach are the events listed on pages 58–60. These include brief accounts of College building extensions, 1893–1902, the 1901 retirement of the long-serving honorary librarian, the donation in 1883 of the William Mackenzie collection of books, the death of the College librarian in 1921 and the granting of Royal patronage in 1909.

In the second-to-last paragraph of volume 2 the authors quote the College's two most recent presidents as stating that "The College is a Fellowship, and we have Fellows all over the world" (p. 238). There is little to indicate this human aspect, and few attempts to quantify the College presence, either at home or abroad. Such international links long predated the

Book Reviews

overseas teaching and examining described in the final pages of the history. For example, more than 10 per cent of the doctors who practised in New Zealand before 1930 possessed Glasgow qualifications. Of these 357 individuals, 71 were Glasgow College single licentiates and a further 83 held the conjoint “triple qualification” granted by the three Scottish medical colleges. No hint of this level of outreach appears in this College history.

Where fellows, or prospective fellows, are referred to by name there is often little to indicate how their connection came about. This is well illustrated in the paragraph on the admission of women to the fellowship. We are told nothing about the background of the first applicant, Elizabeth Baker, who applied in 1897. The same is true of the first successful candidate, “one Yamani Sen, a Licentiate in Medicine and Surgery of the University of Calcutta”, who became a fellow in 1912. How she came to be accepted when a number of local women had been rejected in 1905 is never explained.

This apparent lack of curiosity about the individuals connected with the College is compounded by the failure to acknowledge the efforts of a number of those who have helped shed light over the years on the College history. In volume 1 there is no reference to the manuscript history compiled by William Weir in the late nineteenth century although this was drawn upon by Stanley Alstead and others and was presumably available to the authors. By the same token there is only a cursory acknowledgement of the work done by senior fellows in the 1970s and 1980s to research specific aspects of the College history. A good example of this is the footnote (p. xxv) relating to the work on the College property by Jim Hutchison (a man never to my knowledge addressed as “Holmes Hutchison”, as he is elsewhere recorded in the book). Most tellingly, there is no tribute to the videotaped interviews

conducted by Dr Peter McKenzie, a latter-day “Old Mortality”, to capture the memories of his predecessors and contemporaries. The bald note in the bibliography relating to the transcripts of these tapes (p. 257) gives no indication of the extent of this labour of love, or of the value of their contents.

A fleeting reference to the launch in 1971 of the *College Bulletin* concludes that, after spending 120 years “ensuring its fair representation in national developments in medical education”, it was “perhaps fitting that it now turned back to reassure its members and Fellows that it had not forgotten that they were, fundamentally, the College itself”. It is unfortunate that the authors of this history did not heed their own words. Those whose contributions, singly and collectively, helped the Royal College of Physicians and Surgeons of Glasgow to evolve into its present form are ill-served by this history.

Derek A Dow,
University of Auckland

Udo Benzenhöfer, *Der gute Tod? Euthanasie und Sterbehilfe in Geschichte und Gegenwart*, Munich, C H Beck, 1999, pp. 272, DM 24.00 (paperback 3-406-42128-8).

The recent debates on the moral and legal permissibility of active and passive euthanasia, and physician-assisted suicide, have led to a number of studies into the concept of the “good death” in certain historical periods and countries. Moreover, there is a growing body of scholarly work on the medical killing of handicapped or mentally ill patients in Nazi Germany. Until now, however, a comprehensive historical survey of the subject was lacking. Benzenhöfer’s account of the changing meanings, evaluations, and practices of euthanasia from Greek antiquity right up to