## **Book Reviews**

quite separate. This had been an historical development deriving from the Viennese influence at the beginning of the century. Which was the better arrangement is difficult to say and this book does not attempt an answer. It deals almost exclusively with military psychiatry and as such is a mine of useful information. However, a lack of trained neurologists is recorded (pp. 250 and 448), and it is suggested that inaccurate diagnoses resulted. On the whole, it seems that owing to this peculiar structure of neurology and psychiatry the neurological patients were less well handled than in other armies. Since 1945, however, due to the activities of the American Academy of Neurology the two specialities are more separate, with benefit to each.

As far as the psychiatric problems encountered overseas are concerned, the importance of social aspects of psychiatry become more apparent. But as well as deriving benefit from handling the psychiatric and behavioural disorders, methods whereby they could be prevented or modified also were evolved. As the editors say, the lessons learned thereby and which are recorded here should make sure that in the future the experience of history is not ignored.

STANLEY RUBIN, Medieval English medicine, Newton Abbot, David & Charles, 1974, 8vo, pp. 232, illus., £6.50.

The title of this book is somewhat misleading. Rather than dealing with medicine of the whole Medieval period it is concerned mainly with the early Middle Ages, that is with Anglo-Saxon medicine. As such it is a competent survey, although containing nothing new. The author aims to depict "... disease, sickness [? the difference] and medical practice in their widest sense ..." (p. 9). He must, however, possess a limited knowledge of medical historiography, for he claims that instead of this approach the more conventional one in this subject is "... so often limited to the study of specific diseases or their treatment throughout the ages ...", and he believes that contemporary historical views of disease are frequently neglected (p. 9).

In fact, his handling of diseases is inadequate. When discussing leprosy he makes no reference to the Biblical influences, an appreciation of which is essential for a full understanding of the way in which the medieval leper was regarded and treated, influences which still linger with us today. Also, there is confusion over the transmission of bubonic plague: Mr. Rubin appears to believe that either rats or fleas (unspecified) are responsible, whereas, of course, the rat flea is the real carrier of the disease (p. 74). His suggestion of an epidemic of poliomyelitis in 851 seems unlikely, and the primary source used is unreliable. In the case of secondary sources the author accepts them too uncritically, that by Bonser, for example, on Anglo-Saxon medicine being notoriously defective.

It is not clear why it was thought necessary to produce this book, which is a compilation of well-known sources. Moreover, it is strange that Dr. Charles Talbot's excellent book on *Medicine in Medieval England*, which has obviously supplied the author with much information, is not included in his *Select bibliography*, whereas Dr. Talbot's work on medieval medical practitioners, which deals hardly at all with the Anglo-Saxon period, is.