Marks. In many ways the most successful chapter is the final presentation, 'The curious career of internal medicine' by Rosemary Stevens, who deals skilfully with the vexed issues of general specialist versus sub-specialist and the other tensions which beset internal medicine. Despite the questions of "power, politics and professionalism", which "jostle uneasily for prominence as internal medicine struggles for consensus over purpose and mission in an environment dominated by health care systems", she concludes that "internal medicine holds a pivotal position in American medicine". Its leaders and institutions have great power and for this reason will play an enormously important role in the future development of American medicine and the American medical profession.

Whether they deserve this powerful position is a question not addressed by this conference. The views of the patient are nowhere to be found; nor are those of epidemiologists or health care planners. One has, after all, to remember that for all the successes of internal medicine in the United States during the past century, and despite the undoubted scientific pre-eminence of many American medical schools at the present time, it remains paradoxically true that the patients whom American physicians seek to treat are the most dissatisfied with their health system of any in the Western world.

Sir Christopher Booth, Royal College of Physicians

MARK V. PAULY and WILLIAM L. KISSICK (eds.), LAURA E. ROPER (assoc. ed), *Lessons from the first twenty years of Medicare: research implications for public and private sector policy*, Philadelphia, University of Pennsylvania Press, 1988, 8vo, pp. xxii, 389, £27.95.

When Lyndon B. Johnston signed the Social Security Amendment Act in 1965, he established the principle that government should pay hospital and physician costs for all US citizens over 65. In a nation where organized conservatives in the American Medical Association and Republican Party repeatedly have blocked compulsory insurance legislation and all forms of socialized medicine throughout the twentieth century, it was a significant departure from the *laissez-faire* philosophy that historically dominated U.S. health policy. Medicare was a negotiated compromise that reflected the traditional politics of consensus.

Yet its economic impact jolted conservatives and liberals alike. Escalating Medicare costs and those of its companion, Medicaid, as well as those of other social programmes in the "Great Society" of the 1960s, caused shock waves that vastly altered the health care landscape in the United States. Since then, the American system of voluntary indemnity insurance supporting fee-for-service payment to independent physicians and separate hospitalization insurance has faltered.

The conservative administration of Richard Nixon established a second legislative landmark, which was conceived as an antidote to the economic disaster caused by his liberal predecessor. Under the Health Maintenance Organization (HMO) Act of 1973, corporate-based prepaid health plans that integrate physicians groups, hospital and clinic facilities, and bureaucratized financial and management structures under the auspices of the private corporation, have mushroomed. The HMO is a unique American alternative to socialized medicine. Its advocates have sought to modernize American medical care within the framework of free market competition.

Despite its title, this volume does not convey a portrait of these broad structural transformations in the American health system. Based on a conference sponsored by the Leonard Davis Institute of Health Economics of the University of Pennsylvania in October 1986, it is a compilation of 16 research papers, whose contents reflect the broad diversity of the participants from the fields of economics, sociology, gerontology, medicine, law, and political science. With the exception of Rosemary Stevens, historians of U.S. health care are notably absent from the roster. The historian would find little reward in this survey of Medicare issues, problems, payment mechanisms, professional role, and suggested reforms written in the language and from the perspective of the 1980s. Yet the conference and its published

proceedings elucidate a central historic paradox articulated by the keynote speaker. Wilbur Cohen was former HEW administrator and Secretary under Presidents Kennedy and Johnson. He directed passage of the Medicare law, then saw it implemented. Cohen theorized in his keynote address that Medicare "was born more of social conviction than of research findings". Ironically this publication, which Cohen prefaces, reverses his caveat. It is a useful reference for current policy analysts, and perhaps a factual source for social scientists. For the humanities scholar, however, its bare-boned, contemporary perspective sparks little creative insight into the deep impact of this legislation on American culture, society, and politics.

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DAVID JORAVSKY, *Russian psychology: a critical history*, Oxford, Basil Blackwell, 1989, 8vo, pp. xxii, 583, £45.00.

This volume presents nothing less than a comprehensive history of psychological thinking in Russia, embracing experimental and applied psychology, neuropsychology, philosophy of mind, and the psychologies expressed in the classics of Russian literature or implied in the country's political ideologies. The chronological canvas is broad as well. After an introductory chapter on the emergence of scientific psychology in nineteenth-century Europe, Joravsky proceeds to what he calls the "genteel disintegration" of the pre-revolutionary era in Russia—meaning the separation of psychological thinking into literary, philosophical, academic-experimental, and physiological-reflexological compartments. From there he surveys what he terms the "genteel integration" of the post-1917 era, culminating in the attempt to create a synthesis of literary, philosophical, and experimental psychologies led by Lev Semenovich Vygotsky. Finally he treats the "plastic unity" of orthodox Pavlovism and Soviet-style psychiatry forged during the Stalin era. A brief coda on the post-Stalin years concludes the work.

In a vast, multifaceted argument, conveniently outlined in the book's preface, three theses stand out. The first—that there was, and is, something distinctive about Russians' ways of treating the topics listed above—will excite little controversy. The second thesis is more provocative. Joravsky espouses no psychological viewpoint, but argues that the war of schools and succession of fashions that is so endemic in psychology was inevitable. Because the psyche itself lies between mind, brain, and society, "the modern science of mind was predestined at conception to flounder between philosophy and neurophysiology and social science, as it has for more than a century now" (p. xv). Such corruscating scepticism will win no friends among readers who prefer their histories of science to consist of cheerleading for the ultimately "right" side, or indeed with anyone who wants to believe there can be scientific knowledge in psychology, however defined.

Joravsky's third thesis builds on the other two. Given the inevitable fractiousness in psychology in the West generally, he maintains, the history of psychological thinking in Russia is understandable as an extraordinarily complex interplay between two sets of forces. On the one hand, the academics continued to claim that they could explain the whole of the psyche from some piece of it; on the other hand, political ideologists were sure that they already possessed wisdom on humankind, but still required the technological services psychologists and psychiatrists could provide. In this interplay of forces Joravsky finds no essential discontinuity from the relatively open discussion of the 1920s to the Stalin era.

Along the way, Joravsky rescues a number of important scientists from ideologically-mandated historical straitjackets. Ivan M. Sechenov, "the father of Russian physiology", for example, was not a proto-materialist. Despite the title of his most famous book, *Reflexes of the brain*, he was a mind-body dualist and a political liberal, whose attempt to create a "medical psychology" by discovering neural centres for excitation and inhibition was an abject failure. The teacher-student lineage Soviet writers have constructed from Sechenov to Ivan Petrovich Pavlov, which is often cited uncritically by Anglo-American writers, is largely legendary.