do justice to her extended knowledge of the history of French colonial medicine in Indochina and make it accessible to a wider public.

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Angus McLaren, Twentieth-century sexuality: a history, Family, Sexuality and Social Relations in Past Times series, Oxford, Blackwell, 1999, pp. viii, 295, £50.00 (hardback 0-631-20812-7), £15.99 (paperback 0-631-20813-5).

Angus McLaren's ability to provide an overview of as complex a topic as sexuality in the mercurial twentieth-century is truly outstanding. In this book, he summarizes with wit as well as historical accuracymany of the key issues that have shaped sexual identity throughout the last century. He does this by focusing on the stories that people tell about sex in court reports, newspaper clippings, medical texts, case histories, and birth-control manuals. Topics covered include contraception, psychoanalysis, decline in birthrates, sexology, homosexual sub-cultures, fascism and Nazism, born-again virgins, the "sexual revolution", marital advice, "perversions", the Kinsey reports, frigidity, and AIDS. All of these have been the subject of panics of one sort or another: Did women feel that they were good lovers? Is AIDS a gay plague? Are youth sexually active? Have a quarter of Americans had homosexual experiences? How can over-protective mothering affect the sexuality of the child? How much sex is too much? These questions are focused upon by considering a wealth of European and American evidence, always in its political, religious, cultural, social and ideological contexts—no mean feat, especially in a text designed to introduce the history of twentieth-century sexuality. And indeed McLaren has written

a very good introduction. While not all the issues are covered as fully as they are elsewhere, it is the synthesis of a wide range of material which makes his book so good.

As this review is written for a medical history audience, I will concentrate on this element of the volume. Unfortunately, I think that aspects of McLaren's medical historiography are the weakest in the work. In particular, he sometimes picks up on medical discourses, removes them from the context of their original production, and uses them to illustrate some item of the history of sexuality. For example, the section on abortion (pp. 74-79) considers discourses from the social reformer Stella Browne, an unplaced commentator Alice Jenkins, figures from Austria and Germany on abortion rates, Dr Janet Campbell, Marie Stopes in The Times, the physical culturist Bernarr MacFadden, a paper from W D Cornwell in the Canadian Medical Journal and a number of observations made by contemporary historians. Instead of this mishmash of sources used to discuss abortion, I would have preferred an account which mapped the lay of the land, and showed how different fields of discourse based their ideas on a number of different, field specific interests (which could, of course, vary within the field between different actors). In other words, I would have liked to have seen more of the mechanics of the construction which the author writes about in the introduction. This is not, of course, a problem limited to McLaren alone: many social and cultural historians remove medical discourses from their original contexts of construction in this way. While McLaren is interested in the construction of sexuality in a wider, social sense (what sex meant to the average person), he does not consider in nearly so much detail how the medical texts were themselves constructed. (The exception to this is the chapter on Freud where he situates Freud's work in the sexological tradition which numerous scholars have

suggested informed the master's publications.)

Nevertheless, I do not think that this esoteric plea for constructivist accounts of the development of medical knowledge is a severe problem for McLaren. He does direct the reader to other sources which focus on these issues. If we accept that he has developed a large historical synthesis of much material in order to construct a coherent narrative about sexuality in the twentieth century, and that he has packaged it in an extremely readable form (although in a lurid cover), then we can have something to direct our students to for an easy to read, overarching analysis of a complex issue.

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John Burnett, Liquid pleasures: a social history of drinks in modern Britain, London and New York, Routledge, 1999, pp. viii, 254, £14.99 (paperback 0-415-13182-0).

Betsy Thom, Dealing with drink: alcohol and social policy: from treatment to management, London and New York, Free Association Books, 1999, pp. xi, 266, £15.95 (paperback 1-85343-450-7).

Despite an obvious contiguity of subject matter, one is immediately struck by the contrasting approaches taken by these two authors. The main difference is that John Burnett, as his title suggests, concentrates mainly on the pleasures of drinking, while Betsy Thom focuses on the negative consequences of alcohol consumption, and the development of policy and services in this field. Furthermore, Burnett's book has a broader coverage, exploring non-alcoholic as well as alcoholic drinks and adopts a longer historical perspective, whereas Thom is primarily concerned with "contemporary history". Their research methods also differ.

Thom's study is based to a considerable extent on primary sources in the form of interviews with key participants and observers and an analysis of official documents. Burnett's book, as one might expect given the available literature, relies more on published secondary sources.

Liquid pleasures is the kind of book which, no pun intended, literally lifts the spirits of an academic book reviewer. It is both readable and entertaining. Burnett leads us through the social history of various drinks: water, milk, tea, coffee, beer, wine and spirits. The breadth of the subject implies some compromise on detail. However, there is no shortage of statistics, detailed examples, and faintly amusing observations and anecdotes. The analysis is perhaps a little truncated, though the author collects his thoughts in the final chapter, identifying a number of key themes. He remarks that the history of individual drinks cannot be considered in isolation because they are to some extent complementary to each other. Two major periods of transformation in drinking habits are identified: the mid-seventeenth to the mid-eighteenth century with the rise of tea mainly at the expense of beer; and the 1960s onwards with the rise in alcohol consumption (notably lager, wine and cider), soft drinks and coffee. In both cases wider international influences were at work; in the latter period a degree of Europeanization of British drinking habits is observed. One of the more important conclusions made by Burnett relates to the health dimensions of drinking. At various times, each drink has been seen as a threat or a benefit to health. Beer was once regarded as a healthier drink than water because of poor sanitation, while tea was at one time viewed by some as a serious threat to public health. But the crucial point is that even where health implications are evident, drinking is embedded in a complex set of environmental, economic and social relationships. A failure to appreciate these factors is likely to limit the effectiveness of