

Book Reviews

Joan Lane, *A social history of medicine: health, healing and disease in England, 1750–1950*, London and New York, Routledge, 2001, pp. ix, 233, illus., £16.99 (paperback 0-415-20038-5).

The miracle of modern medicine is not so much its efficacy as its popularity in the face of the lack of it. Of course it is true that the amazing technical feats of twenty-first-century pharmacologists, immunologists and molecular biologists legitimately dazzle us today, but the vast majority of a doctor's time is spent treating patients with self-limiting conditions perhaps best left alone, or incurable chronic disorders. This is how primary care has functioned for the past three hundred years or so. Consulting the doctor is somewhat akin to prayer, a ritualized and socially acceptable search for psychological and chemical solace. The late Joan Lane's student text traces the development of medical practice in England from the industrial revolution to the National Health Service, the central thread following the increasingly pervasive role of medicine in an economically advancing consumerist society. The work does not explore why a particular style of medical practice has grown to embody the universal social welfare system in the UK. The story is largely about advances and successes and good men and true, an attractive, heartening message for students' first exposure to medical history but perhaps insufficiently challenging to enthrall the brightest.

Self-contained chapters trace the chronological development of the profession of medicine from the eighteenth-century personal practice model of jobbing apothecaries, surgeons and physicians, responding to well targeted class markets, through to the birth of the National Health Service. Along the way there is good coverage of the earliest forms of socialized medicine under the poor law, health care institutions, the hospitals, asylums, dispensaries and health centres that supported the flowering of the medical, nursing and midwifery professions. The book ends with the domination of the global health care industry in the post-Second World War period. Lane

is good on the contextual stimuli for changing practice—war, centralized government control of welfare, the Victorian drive for sanitary living and social order. The crucial role of the pharmaceutical industry in shaping practice, although a little underplayed here as in much medical history, is given thoughtful coverage too.

The strength of the book lies in its accessible, readable style and Lane's evident thorough knowledge of the local Warwickshire and wider Midland scene she lived and worked in. Some of the local characters she introduces, Erasmus Darwin, William Withering and Henry Lillie Smith, the St Paul of the dispensary movement, are nationally important. Others, like the Worcestershire Johnstone family dynasty of practitioners, provide local illustration of national phenomena.

There are a handful of minor infelicities. It was Depwade Union which employed guards to protect their new workhouse house from riotous vandals (p. 61); Warburton's licensed house was in Hoxton, not Hackney (p. 102) and the allusion to the poet's Kit Smart's personality-eroding psychosis as a fashionable refinement is perhaps overly dismissive. The chapter on the Victorian public health agenda boils down to a narrow preoccupation with clean air and water for infectious disease control. In the final chapter, the socialized National Health Service is perceived as the end-state of medical practice, rather than what it is likely to prove, a transitional phase before the consumerist mixed economy reasserts its supremacy.

Despite these quibbles, this is a sound basic teaching text for schools and undergraduates. The *vignettes* and contemporary quotes rounding off each chapter are apt and entertaining, the "further reading" list pertinent. Medical students especially will like this book, since doctors emerge largely unscathed. Their mythic progress from necessary irritant tradesmen to beneficent cogs in the state's well-ordered medicine machine remains largely unchallenged.

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