

### Book Reviews

Bernard Dixon's *Beyond the magic bullet* is an extended essay on the failure of modern medicine to cope with the important problems of health care. This failure, he contends, is the result of the confrontation of an inappropriate idea and the real world. "The dazzling achievements of [the idea of] specific aetiology have been followed by a situation where all our major health problems . . . represent areas where the theory has failed" (p. 3), and elsewhere "the notion that there is a specific cure for everything . . . has retarded our thinking about alternative approaches to health and disease." (p. 226). Except when he enters the historical arena, where the errors are too numerous to mention, Dr. Dixon buttresses his contention with an impressive array of well-researched evidence that displays the vast amount of money, resources, dedication, and intellectual output that is channelled into searching for *the* cure for cancer or *the* cause of heart disease. Conversely he shows how little effort, even in the third world, is directed towards sanitation schemes and health education programmes.

Dr. Dixon's idealist case is plausible and utterly false. To begin with the *idea* of specific aetiology does not *necessarily* negate the possibility of what he calls "the interpretation of ill health in terms of bodily or social disharmony" (p. 3). Quite the reverse: for a long time now anthropologists have been at pains to point out that the people they study have remarkably well-developed ideas of specific aetiology, witchcraft, soul loss, possession, etc., coupled with therapeutic systems whose aim is the promotion of bodily harmony and social integration.

It is hardly the idea of specific aetiology alone that maintains the bizarre deployment of resources sometimes found in the third world. Dr. Dixon is being peculiarly disingenuous when he states ". . . in Asia, Africa and South America improved sanitation is infinitely more important than supplies of the newest antibiotics from multinational drug companies" (p. 227). The unscrupulous behaviour of some multinationals, which a journal as bland as *The Listener* can catalogue in horrifying detail, can hardly be interpreted in terms of a failed idea, a sort of misguided philanthropy.<sup>1</sup> Any reader of this book will find it a repository of alarming facts about twentieth-century medicine. Only the most intransigent Platonist will take comfort from the author's interpretation of them.

<sup>1</sup> Bill Breckon, 'In sickness or in wealth', *The Listener*, 1979, 102: 290-292.

THOMAS McKEOWN, *The role of medicine. Dream, mirage or nemesis?* Oxford, Basil Blackwell, 1979, 8vo, pp. xvi, 207, £12.00 (£3.95 paperback).

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Thomas McKeown's theses must by now be well known to the medical, demographic, and historical professions. These theses are, to make a bold *précis*, that the major determinants of health are outside the medical system, that nutritional change was primarily responsible for the population increase of the eighteenth century, that this latter fact is not fully recognized because the former is not, and this is so because of the undue preoccupation in medicine with disease mechanisms instead of causality. He re-presents these familiar contentions with a clarity, force, erudition, and humanity that ought to, but probably will not, command attention. With regard to the

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historical argument it is surprising to find McKeown not giving an inch to recent work which suggests that an important factor in population change in the eighteenth century may have been increased fertility (through earlier marriage) rather than decreased mortality alone. Whatever the case, his overwhelming arguments for the influence of environmental change on health in the nineteenth and twentieth centuries cannot but be convincing. Here, however, McKeown parts company with other medical men who have thought about the matter. It follows he contends that such conclusions demand radical questioning of the status and role of the medical profession and the allocation of resources. A proposition that is likely to leave him as a prophet with honour in his own profession.

A. LOGAN TURNER, *Story of a great hospital. The Royal Infirmary of Edinburgh 1729-1929*, [facsimile of 1937 ed.], Edinburgh, James Thin, 1979, 8vo, pp. xvi, 406, illus., £13.50.

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A. Logan Turner's *Story of a great hospital* was first published in 1937 and has been reissued to commemorate the founding of the Royal Infirmary of Edinburgh in 1729. The reappearance of this scarce and useful volume is to be welcomed. To begin with it is clear that Logan Turner's project is quite out of harmony with current historiographic trends in the history of medicine. His aims, as his title suggests, were to present the contemporary medical community in Edinburgh with a distinguished pedigree, a task none too difficult since the Infirmary had been staffed by such intellects and showmen as the Monros, Cullen, Christison, Syme, and Lister. Logan Turner, however, was meticulous in his method; he scrupulously followed the minutes of the Infirmary, the College of Physicians, and the College of Surgeons (though not the Town Council) to produce a precise and readable narrative. It is the attention to detail that will render the work most pleasing to current scholars though they may feel less comfortable with the straightforward interpretation they are offered.

Scottish Enlightenment studies, particularly in science, have snowballed in the last few years and now offer a context that was unavailable to Turner for viewing the founding of the institution. The major protagonists are rightly identified in his work, John Monro and his *enfant terrible* Alexander, George Drummond on the Town Council, and the College of Physicians. What is lacking is a picture of the broader economic and cultural framework within which a plan for a new hospital could flourish. Turner's determination to write the history of a *great* hospital also, at times, produced a scotoma in other areas of the interpretive field. All parties to the founding are credited, including the surgeons, who, for reasons Turner finds inexplicable, founded a surgical hospital in 1736. The reason was, as a less generous reading of the minutes shows, that they were at loggerheads with Alexander Monro over the right to attend patients with all the privileges that bestowed. Similarly Turner frequently read back into the past the later glories of the medical school. Clinical teaching was instituted in 1748, but it remained an insignificant part of the curriculum until later in the century. Students came to Edinburgh for anatomy in the winter, and flocked to