confirms the significance of extra-political efforts in combating epidemics, Li Yushang's work serves as an interesting contrast. By focusing on the fight to combat schistosomiasis in the shadow of political mobilisation in the People's Republic of China, Li argues that strong interest in the progress of the effort from leaders like Mao Zedong and the lack of effective medicine available made local cadres exaggerate the success of treatment out of ambition and pride, when the health issue was turned into a political mission. The other two chapters in this section study the case of SARS in 2003. Marta Hanson examines the Chinese medical interpretation and treatment of SARS coupled with integrated knowledge of biomedicine and Chinese herbal medicine. She accounts for the Western media's 'blind spots and blindfolds' (p. 231) around the Chinese medical response that prevented Western journalists and analysts from 'seeing the fuller, more compelling story of the interactions between biomedical and traditional Chinese medical institutions, researchers, and practitioners' (p. 235). This blindness, which had a long historical bias that stretched beyond a biomedical framework, consequently laid a media blindfold over the eyes of the public. Also, by studying the case of SARS with close scrutiny on the roles of the World Health Organisation and national governments, Tseng Yen-feng and Wu Chia-Ling conclude that public health authorities at both the national and transnational levels overrated the risk of this disease in the name of 'good governance'. This attitude reflected the 'decision-making processes of health authorities' (p. 255) which were underpinned by the irrationality of 'treating national borders as meaningful lines for locating a virus' (p. 258) because the decision-making process of the health authorities was often based on subjective risk assessment and political priorities cloaked in the name of scientific knowledge.

The only question left behind in the reader's mind after finishing the book is what interesting issues could have been raised if the lacuna of the Sino-Japanese War of 1937–45 were covered in this volume. This under-researched period not only saw the establishment of important medical systems when simple survival was at stake, but also altered traditions and their interactions with transnational influences, since what medicine meant to people and how efficacy was evaluated changed. This deficiency aside, *Health and Hygiene in Chinese East Asia* offers the reader a great deal of information for thought and the means to evaluate the various public health issues that it covers.

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**Charlotte E. Henze**, *Disease, Health Care and Government in Late Imperial Russia*, BASEES/Routledge Series on Russian and East European Studies (London and New York: Routledge, 2011), 232 pages, $158.00, hardback, ISBN: 978-0-415-54794-9.

Disease as an important tool for economic, cultural and political analysis has long been recognised by historians. In particular, historians of social medicine have paid much attention to cholera epidemics in nineteenth-century England, France and Germany. Although a number of studies on public health in pre-revolutionary Russia have dealt with cholera epidemics and various facets of its socio-political impact, Charlotte Henze's book is the first to concentrate entirely on the history of cholera in Saratov throughout the nineteenth to the early twentieth century. The choice of the locale is rightfully justified

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since Saratov, an important shipping port on the Volga, one of Russia's major trade routes, with its socially, culturally and ethnically diverse population, including a large German community, experienced all major cholera pandemics of 1823–1914. With this central focus, Henze is able to construct a social, political and public health history of the city of Saratov. She uses the cholera outbreak of 1892 in Saratov as a means of exploring living conditions and medical and administrative infrastructures in the city on the Volga. She applies the same approach to address broader issues of Russia's socio-economic developments at the age of modernisation associated with rapid urbanisation, increasing migration of impoverished rural population and growing social tension.

The book is divided into five chapters. The first chapter traces the history of cholera in Russia before 1892, focusing on the multiple outbreaks during 1823–59. It also analyses anti-epidemic policies after Russia's defeat in the Crimean war, when Russia entered the reform era that drastically changed the existing economic and social structure of the country. Chapter 2 documents Saratov's appalling sanitary conditions and inadequate public health provision and administration, which in large measure were responsible for disaster in coping with the cholera epidemics of 1892. Chapter 3 provides detailed coverage of this epidemic. It analyses anti-epidemic measures, set up by the central government to combat cholera arrival to Russia, discussing briefly the reception of Robert Koch's discovery of *vibrio-cholerae*. It also examines the responses of local administrative and medical authorities, as well as the notoriously famous 'cholera riots' and underlying social constraints and conflicts. Chapter 4 is devoted to cholera's impact on Saratov, the most important being the growing self-identity and self-confidence of local physicians. Improvements in the sphere of city renewal and public health care are attributed to economic factors rather than to direct consequences of the cholera outbreak. The subject of chapter 5 is cholera's return to Saratov in the early 1900s. The city was better prepared for the epidemics in terms of medical and public health care as well as administrative logistics. The new outbreak revealed the new realities of anti-cholera combat at the age of bacteriology, and old social contradictions of the coming turbulent 1905.

The book convincingly covers Saratov's cholera history. References to similar developments in combating cholera in Western Europe are valuable and highlight the peculiarities of the Russian situation. Although the severity of the sixth pandemic in Russia is undisputable, extensive areas of Greece, the Balkans and the Ottoman Empire were also severely affected during the first decade of the twentieth century. The Italian wave of 1910–11 was quite heavy in Venice, Aquila, Palermo and Naples, so we cannot say there was none recorded in Europe after 1892. A more elaborate comparative perspective is welcome.

The book touches upon some important political and social issues; however, it contains little that adds to our knowledge or alters our understanding of the processes that eventually led to the unprecedented social and political upheavals of 1905 and 1917, which ended in the collapse of imperial Russia. Does the cholera epidemic of 1892 therefore provide an appropriate criterion for assessing the viability of the autocratic regime, a thesis which Henze has particularly emphasised? Another reiterating thesis is Russia's confrontation with modernity and the ultimate inability of the autocratic regime to cope with challenges such as cholera outbreaks. This is, I believe, an overstatement of the case, and overtones some of the complexity mapped out in the text, returning us to a rather standard treatment of Russia's development during the late imperial period. Lastly, important advances in Russian military medicine in combating epidemic diseases

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including cholera translated to the civil population remain unexplored and need to be addressed if the government strategies to prevent epidemics are to be fully understood.

Overall, the study is useful insofar as it contributes to Russia's history of cholera and is stimulating for provoking discussion on some important episodes in the history of late imperial Russia, and has undoubtedly confirmed the importance of examining the impact of individual disease and the issues surrounding public health as a means of exploring key debates in social and political history. Given the dearth of scholarly studies of epidemics and the health care system in Russia, this volume is particularly noteworthy.

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**Bradley Lewis**, *Narrative Psychiatry: How Stories Can Shape Clinical Practice* (Baltimore, MD: The Johns Hopkins University Press, 2011), pp. xv, 214, $50.00, hardback (cloth), ISBN: 978-0-8018-9902-7.

Acknowledging the fact that stories as such are a fundamental element for physicians and psychiatrists, this book aims to focus on the narrative process as a fundamental aspect of treatment. The author, Bradley Lewis, is professor of medical humanities and cultural studies at New York University's Gallatin School. Right from the start, Professor Lewis writes that 'Psychiatrists listen to stories more than anything else they do' and most medical cases are usually summarised as 'stories' (p. vii). This book, *Narrative Psychiatry*, links the art of listening to stories by patients with the science of decoding narratives, 'at the interface of clinical and theoretical work' (p. viii). Both fields – that is, narrative studies and new psychiatry – have evolved impressively during the last two decades.

Emerging from the 'new psychiatry' trend, *Narrative Psychiatry* is divided into ten chapters (p. ix). Chapter 1 ('Listening to Chekhov') is perhaps the most surprising and also the most provocative of the book, although the author refers as well to the lesser-known works of physician-writer Abraham Vergese who argued that 'our patient's stories come to depend heavily on repetition of what we say' (p. 13). As Professor Lewis explains, Chekhov was an author and a physician and therefore he combined 'the storytelling craft and medical practice' (p. 13). The second chapter on 'Narrative Medicine' situates the emergence of narrative psychiatry within the new clinical models of medicine which burgeoned during the 1970s, when 'medical scholars began opening their knowledge base to inquiry coming from philosophy, anthropology, and literature' (p. 20). Each of these interdisciplinary approaches is then discussed in the following pages with an impressive number of sources and references; for instance, the concepts of 'stories of sickness','healing as storytelling' and 'storytelling as healing' brought by physician Howard Brody in 2003 (p. 26). Chapter 3 provides and articulates the main concepts for doing narrative psychiatry: 'characters', 'plot', 'metaphors', 'repetitions', 'time' and 'point of view' (p. 47). Some passages can really be fascinating, for example this opposition and 'comparison between identity in life and character in fiction', which at some point become similar since they both use stories and narrative (p. 47).

Most of this book proposes selected case studies of stories that are briefly analysed and interpreted; chapters 4–8 articulate narrative psychiatry with many different approaches such as 'Family therapy', 'Spiritual therapy', or 'Expressive therapy'. The last chapter

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