

Book Reviews

GLENN GRITZER AND ARNOLD ARLUKE, *The making of rehabilitation. A political economy of medical specialization, 1890–1980*, Berkeley, Los Angeles, and London, University of California Press, 1985, 8vo, pp. xxiii, 214, £27.50.

This is one of the few attempts since Rosen's *The specialization of medicine* (1944) to comment on medical specialization through a focus on one particular area of medical practice. It offers a detailed account of how the people now providing what are known in America as rehabilitation services came to be organized into particular occupations with limited jurisdictions and specific positions in the health division of labour. Through this case study the authors challenge the view of medical specialization and subspecialization as the "inevitable" result of new technologies or as the "natural" consequence of the growth of scientific knowledge and skills. Like Gerald Larkin, through his examination of similar areas of British medical and para-medical practice (*Occupational monopoly and modern medicine* [1983]), Gritzer and Arluke perceive the occupational division of medical labour as the organizational outcome of "commodity services" competing in and for medical markets. Accordingly, they illustrate how the approach to specialist occupational autonomy hinges on the successful exploitation of historical events (such as the demands of war), and on successful strategies conducted, horizontally, against competing service commodities, and vertically, in relation to existing medical practices, on the one hand, and competing alternative medical practices (such as chiropractic and osteopathy) on the other.

As a well-researched history of the emergence, proliferation, organization, and struggles for market survival of the practitioners of the array of past and present "corrective therapies" in America (electro-, radio-, physio-, vocational, occupational, educational, etc.), this study offers as much to historians as to sociologists. Wisely, the authors include three appendices which provide a convenient chronological guide to the entangled medical and allied organizations involved, and to the many re- and re-titled official journals. But with the current situation of rehabilitation medicine apparently uppermost in the authors' minds (not least the interesting trend among the para-medical occupations away from hitherto sought-after legal and medical protection), and with over half of the book concentrated on the period after 1941, much of the early history is insufficiently explored and understood. Less excusable, given the authors' complaint against the "natural growth model" for projecting specialization as if it occurred "in a social and political vacuum" (p. 8), is the lack of historical contextualization. The two world wars figure prominently, but little is said of the role of industry or of sports, and nothing is made of the heavy involvement of women in the "allied occupations" discussed. Perhaps the greatest shortcoming of this book, however, is its failure to qualify the *general* value of the "market model" for comprehending medical specialization. One is left with the strong impression that rehabilitation medicine is the model's soft option; applied to other areas of medical specialization, the model may be as inappropriate and restrictive as the crude technological determinism that the authors attack. As Eliot Freidson admits in his foreword to the volume, it may not be so easy to discount the role of "a certain technical logic" within other areas of medicine and surgery; indeed, "just as there is more than one way to skin a cat, so there is more than one way to organize a division of labor." Likewise, there will always be more than one way to approach the history of medical specialization. Both the merits and the limitations of this book should encourage others to find out how.

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CLAUDE BERNARD, *Memoir on the pancreas and on the role of pancreatic juice in digestive processes*, translated by John Henderson, London, Academic Press, 1985, 4to, pp. x, 131, illus., [no price stated].

In the early nineteenth century, Britain was far behind France and Germany in the development of physiology. At that time, Claude Bernard was arguably the most distinguished experimental physiologist. His pupil, Paul Bert, said of him that in twenty years he found more

dominating facts than all the other physiologists in the world. Michael Foster, Sharpey and Burdon Sanderson were among those who felt more should be done in this country to encourage physiological work. Accordingly, on 31 March 1876, they founded the Physiological Society, happily still extant. The Society has published monographs on physiological classics, a list of which appears at the end of this volume, the forty-second in the series.

Bernard began his career in 1840. This memoir represents about eight years of research, first appearing in book form in 1856. It has been excellently translated by John Henderson of the Department of Physiology, St George's Hospital Medical School, London. All the illustrations have also been reproduced, being of first-class quality.

In his introduction, Bernard stresses the role of mammals in his experiments. The first chapter discusses the anatomy of the pancreas in man, dog, cat, and rabbit. The word "pancreas" is from the Greek (all flesh), being so-called because it is a fleshy organ. The following chapters deal with the collection of pancreatic juice and its digestive influence on fat, starch, and albumen. The final chapter compares the physiology of the organ in birds, reptiles, fish, and invertebrates.

On page 76 *et seq.* eight autopsied cases in man are fully described with interesting commentaries by Professor W. B. Robertson of the Department of Histopathology at St George's. The memoir ends with the observation that all the results of an experiment must be observed, both those connected with the pre-conceived idea and those without any relation to it. Despite this, Bernard failed to note that glycosuria follows total pancreatectomy—possibly due to the fact that all his animals died of post-operative peritonitis. It was forty-three years later—1889—that glycosuria was first described by von Mering and Minkowski.

There is a table of contents, an index, and a list of references. This is a beautifully produced volume of fundamental research that can be unreservedly recommended to physiologists and to the interested general reader.

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KITTI JURINA, *Vom Quacksalber zum Doctor Medicinae*, Cologne and Vienna, Böhlau Verlag, 1984, 4to, pp. ix, 331, illus., DM. 168.00

The title of this book gives only a brief guide to the riches it contains. It is, in effect, a study of the whole range of medical life in, for the most part, German-speaking Europe during the fifteenth and sixteenth centuries. Its subjects range from booksellers' catalogues to healing saints, from the development of uroscopy to the woes of patients. Dr Jurina has ranged widely among primary texts, and her comments are of particular value in redressing the imbalance in traditional medical historiography towards Italy and Italian universities. If at times some of her suggestions seem lacking in sophistication, this should not be held against an essentially pioneering work.

But it is less the text that commands attention than its illustrations, over 400 of them. They are drawn from manuscripts, incunabula, printed books, and paintings, and together constitute a remarkable visual repertory for the renaissance historian. There are portraits of learned physicians, Paracelsians as well as Galenists; depictions of operations and bedside consultations; caricatures; and scenes of the bath. One can observe, for example, how the illustrators of medical satires in their turn parodied the pompous frontispieces of medical textbooks. The range of material also illustrates how far an interest in medicine pervaded German society, for some of the fugitive sheets and pamphlets were clearly designed to be understood by those who could not read for themselves. Artistic description supplemented, if not at times replaced, the verbal. Conversely, in pl. 351 the medical imagery is used to give point to a visual satire on a theological theme.

This interest in the interrelation between text and image was explored at length for theology by R. W. Scribner in his *For the sake of simple folk*, and Dr Jurina has performed a similar service for medicine in Germany. What is less clear from her discussion is the extent to which the emphasis on additional visual imagery is confined to Germany and to German printers. One thinks, for