

Progressive Era faith in science, industry, invention and ingenuity. The passion for instruments and technology found its fullest expression in surgery. In the case of tuberculosis this meant artificial pneumothorax and later chest surgery. One such surgical procedure, thoracoplasty, became so popular that it was almost a point of pride to have had one. The therapeutic effect was another story.

Another early twentieth-century development which affected responses to tuberculosis and the ways in which it was represented was the Progressive Era's optimism in the power of the state to solve social problems through legislative control. Ott explains how "Mapping, reporting, and restrictions upon various behaviours characterized state management of the disease" in these years (p. 133). She also notes that hundreds of federal, state, local and company regulations were passed in order to control tuberculosis but very few of them seem to have been enforced. Rather, they appeared to serve a symbolic function.

Her main interest lies in the changing representations of the disease, from phthisis and consumption to tuberculosis. She states her case at the beginning of the book by explaining that what we call tuberculosis today was not the same disease in 1850 that it was in 1900 or even in 1950. Perhaps more than the other historians mentioned above, she writes with an eye to the present. She certainly devotes more space to the post-1950 perceptions of the disease. Her aim is to explain the focus and shortcomings of the present American campaigns against tuberculosis. She explains how nineteenth-century consumption was a constitutional affliction, one in which the whole body was the site of the disease. Twentieth-century tuberculosis was a technologically based entity, grounded in bacteriology and identified by such tools as tuberculin skin tests, sputum examinations, stethoscope, thermometer, and chest x-rays. The legacy of this for the modern era was a total concentration on eradicating the bacillus. She argues that the reductionism of germ theory has made present programmes and

therapeutics highly vulnerable. If germ-directed drugs fail, there is little alternative. Yet to explain the present in this way is simplistic. In her chapter on the early twentieth century, she argues that the "concept of bacterial causation competed with stronger beliefs in environment and a personal constitutional proclivity and so never totally dominated etiology and therapeutics" (p. 54); and again on p. 68 that "germ theory never dominated the field of tuberculosis".

She also sees late twentieth-century tuberculosis, the "post industrial disease", to be very much rooted in victim blaming. She provides good evidence to support this, but underestimates the continuities with the previous periods. "Victim blaming" is shown by Feldberg, for example, to have a long history in the epidemiology of tuberculosis. According to Ott, "Current analysis uses epidemiological categories of risk and responsibility that tend to be morally and politically rather than scientifically firmly based" (p. 158). Here she slips into the belief that epidemiology can be "scientifically" based, and yet the whole thrust of her account is to advocate an awareness of the cultural complexities and limitations of epidemiological tools and the pluralistic cultural meanings of disease. Indeed, she has succeeded in doing this very well, and her book constitutes a major contribution not only to the history of tuberculosis but to the history of medicine in general.

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**Robin Marantz Henig**, *The people's health: a memoir of public health and its evolution at Harvard*, Washington, DC, Joseph Henry Press, 1997, pp. x, 224, £24.95 (0-309-05942-3).

Defining a niche for this account of twentieth-century public health is difficult. It breaks no new historiographical ground, and there is little here to enhance the knowledge of the historian of public health. Although the work is well written and engaging, it is too

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superficial for classroom use. But I did enjoy it, and finally decided it would be a good book to recommend to students considering public health careers. The glory and complexity of the public health profession are laid out in readable vignettes that should inspire a new generation of public health advocates.

The book's author, a journalist whose previous most recent book concerned emerging viruses, wrote this memoir in commemoration of the 75th anniversary of the Harvard School of Public Health. While not a history of that institution, the text takes every opportunity to highlight the contribution of Harvard professionals to the major public health issues of this century. It is divided into five major sections which focus in turn on microbes, chemical hazards, social dysfunction, behaviours such as cigarette smoking and drunk driving, and issues around the provision of health care. Thus Robin Henig successfully encapsulates the changing face of public health over the seventy-five years of the school's existence, telling the story with brief sketches that cover the range of malaria, the Donora air pollution disaster, the formation of physicians' groups against nuclear war, and the "risk factor" concept which emerged from the Framingham studies. While the serious reader will find these accounts skimpy, they do tend to be accurate and Ms Henig provides appropriate footnotes for guidance to her sources. Further, the picture that emerges of the purview of public health moving from infectious disease control to concerns about violence, poverty, the structure of health care, and cost of medical intervention accurately reflects the panoply of research interests at the modern school of public health.

A most attractive feature of the book is the author's use of oral history. She incorporates material from interviews with many current and emeritus faculties at the School of Public Health, excerpts made more interesting by photographs that dot the text. Her admiration for their courage and nobility is not subtle. Here again one finds the public health professional whose job, according to one source, "is to be indignant on behalf of

everyone" (p. 4). She quotes the words Harvard's president says of graduating public health students at each commencement—they are now "ready to advance the welfare of peoples everywhere by the prevention of disease and promotion of health" (p. 7). This unabashed hero-worship is rather refreshing after regarding the critical work on public health efforts which has appeared in recent years, including pieces written by myself. It is not a bad thing for historians of public health to be reminded that this is a field with good intentions, frequently impressive results, and a corps of hardworking, intelligent men and women who make excellent role models for today's youth.

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**Tomas Plänklers, Michael Laier, Hans-Heinrich Otto, Hans-Joachim Rothe, Helmut Siefert (eds), *Psychoanalyse in Frankfurt am Main. Zerstörte Anfänge, Wiederannäherung, Entwicklungen*, Tübingen, Edition Diskord, 1996, pp. 798, illus., DM 90.00 (3-89295-602-2).**

*Psychoanalyse in Frankfurt am Main* presents papers given at a meeting on the occasion of Sigmund Freud's fiftieth *Todestag*, as well as a couple of additional articles. Most of the talks were given by members of the Study Group for the History of Psychoanalysis in Frankfurt, and are devoted to the history of the shortlived, but influential Frankfurter Psychoanalytisches Institut (1929–1933), to that of the Sigmund-Freud-Institut, founded by Alexander Mitscherlich in 1959, and the Rhein-Main-Neckar Group (1974), which became the Frankfurter Psychoanalytische Vereinigung (Zweig der DPV) (1980), changing its name in 1994 to Frankfurter Psychoanalytisches Institut, with explicit reference to its predecessor (see the articles by Eugenia Fischer, René Fischer, and Hans-Heinrich Otto). Further sections deal with 'Psychoanalysis at the Johann Wolfgang Goethe University' and 'Psychoanalysis and its applications'.