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juxtapositioning of chapters concerned with the work of two prominent German contributors—Adolf Mühry (Chapter 5) and his critic, August Hirsch (Chapter 6).

The remaining thematic sections of the volume examine two very different dimensions of the history of medical geography. 'Colonial discourses' deals with health-related perceptions of place, variously from the popular perspective of migrants to the (post-colonial) American West (Chapter 7) and from the perspective of professional and academic élites in relation to "tropical" Australia (Chapter 8). By contrast, the three contributions to 'Cartographic representations' explore the field of medical cartography and its particular relationship to the scholarly genre of Humboldtian science (Chapters 9–11). Finally, in 'Epilogues', brief essays by a prominent geographer (Anne Buttimer, Chapter 12) and a renowned historian (Ronald Numbers, Chapter 13) serve to add further, interdisciplinary, perspectives on the main themes of the volume.

With the evident scholarship and diversity of subject matter making for stimulating reading, it may seem churlish to identify any shortcomings in the work. Indeed, the limitations are few and generally of a trivial nature. At one level, the thematic structure imposed on the essays is rather loose and, in the absence of any prefatory statement of editorial rationale, the placement of some essays could be considered arbitrary. At another level, and admittedly beyond the core concerns of the work, some contributions may give the impression that the first half of the twentieth century was a bleak time for medical geography. In its former high-profile incarnation perhaps, but not as an underpinning approach to epidemiological issues and problems. To view modern medical geography as having risen almost phoenix-like from the ashes of the Second World War marks, I suspect, a fundamental difference in disciplinary perspectives regarding the nature of, and influences on, the contemporary subject.

Such contentions aside, *Medical geography in historical perspective* is an exemplary collection. Scholarly, well written and with an eclecticism that reflects the rich intellectual heritage of the subject, the volume represents a benchmark for future researches on the history of medical geographic thought and practice. It deserves the widest readership.

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Frank A Barrett, *Disease and geography: the history of an idea*, Geographical Monographs, vol. 23, Toronto, York University—Atkinson College, 2000, pp. xv, 571, Can. \$60.00, US\$50.00 (paperback 1-55014-396-4). Orders to: Becker Associates, Box 507, Station Q, Toronto, Ontario, M4T 2M5, Canada.

Frank Barrett's *Disease and geography: the history of an idea* is a work of remarkable industry and toil. The results of many years of diligent reading and research, it charts the history of the diverse connections between geography and medicine from ancient times to the mid-twentieth century. The work is conceived in a manner reminiscent of Arthur Lovejoy's "history of ideas". Barrett's tactic is to survey the major published works on geography and disease, gathering together scattered fragments from a diverse range of sources and imposing a coherent structure on them. The result is an impressive achievement spanning more than 2,000 years of western history.

Barrett begins his story in Ancient Greece, focusing primarily on the Hippocratic tradition embodied in *Airs, waters, places*, and later reshaped under the influence of Galen in the second century AD. Thereafter our attention is successively directed to Ancient Chinese and Indian

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thought on the subject, to the European Middle Ages characterized here as “The Age of Faith”, to the impact of the European voyages of reconnaissance and the neo-Hippocratic reassertions of the eighteenth century. Thereafter Barrett’s strategy is to work biographically. Identifying key figures—Hoffman, Lind and especially Finke for the eighteenth century, Boudin, Tschudi and Schweich for the early nineteenth, and so on into the mid-twentieth century—Barrett provides thumb-nail biographical sketches and proceeds to summarize their main works, appending commentary on reviews where he could find them. A concluding survey of medical cartography provides a thematic overview of that subject.

Industrious though Barrett’s work undoubtedly is, it none the less suffers from a number of serious drawbacks. Primarily, in chapter after chapter, Barrett feels the need to judge his historical subjects on the adequacy of how they define the relations between “medical geography” and “geographical medicine”. Witness: Jean-Pierre Bonnafont is castigated because he “does not define what he means by medical geography” (p. 195); Ferdinand Becker is censured because he “confuses the distinction between medical geography and geographical medicine” (p. 213); Jean Christian Boudin is reproved because he considers that “medical geography is a ‘branch of medicine’ ” (p. 218). These are not isolated cases: a myriad others are reprimanded for their perceived definitional incompetences, while others are lauded for sustaining the distinction. August Hirsch, for example, gets it wrong; Adalbert Mühy gets it right. In one form or another, terminological fixation persistently reasserts itself. James Lind, we are told, did not use the term “medical geography” but his work “is fundamentally medical geography” (p. 135). The retrospective application of Barrett’s definitions on the historical record gives the work an apologetic feel in many places; it is as though the author is engaged

in a form of disciplinary self-justification by prosecuting the case for which zone of the academic grove (whether medicine or geography) is the essential home for certain kinds of activities.

A second troublesome feature of Barrett’s analysis is his tendency to slip into an outmoded “warfare” account of the relationship between Christianity and medical science. When he reports as a key finding of his inquiries that the “growth of Christianity thwarted the development of medicine in general” (p. 524), this can be sustained only at the expense of ignoring the corpus of revisionist work—for instance by Gary Ferngren and Darrel Amundsen—on the historical relations between medicine and religion. The desacralizing of medical discourse, for example, simply cannot be read as a rejection of traditional religion either in the Greek or early Christian eras. Finally, the entire work proceeds by summarizing the writings of a wide range of individuals. Long extracts, detailed synopses, and lengthy abstracts, frequently annexed to biographical sketches, characterize vast stretches of the book. What is lacking is a clear interpretative thrust. Little theoretical engagement means that the text is rather more a chronological digest of medical-geographical writings than a work of historical interrogation sustained by a compelling line of argument. Having said this, *Geography and disease* will prove to be an invaluable resource for students of medical history by virtue of its exhaustive surveying of a fugitive, and understudied, literature in the European medico-geographical tradition.

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Roberta E Bivins, *Acupuncture, expertise and cross-cultural medicine*, Science, Technology and Medicine in Modern