

Book Reviews

of epidemic disease in New York City from 1800 to the present. Elizabeth Blackmar, in a summary of her broader study of New York housing, *Manhattan for rent, 1785–1850*, discusses the unique relationship between the urban housing market and public health. Alan Kraut reprises elements of his recent book, *Silent travelers: germs, genes and the immigrant menace*, in an essay on immigrants, nativism and public health in New York City during the late-nineteenth and early-twentieth centuries.

The book's second section, 'When epidemic strikes', focuses on three epidemic diseases of the twentieth century as experienced by New Yorkers, smallpox, poliomyelitis, and HIV/AIDS, with essays by Judith Walzer Leavitt, Naomi Rogers, and Ronald Bayer, respectively. The essays on polio and AIDS are drawn from book-length studies by Rogers (*Dirt and disease: polio before FDR*) and Bayer (*Private acts, social consequences: AIDS and the politics of public health*).

The final section, 'The city responds', discusses how New Yorkers of the nineteenth and twentieth centuries responded to the threat and reality of epidemic disease. Elizabeth Fee and Evelyn Hammonds remind us, once again, that a public health official of the turn of the century, such as Dr Hermann M Biggs, had to be as adept in politics and social discourse as he was in more scientific endeavours. Daniel Fox, in an essay on the politics of public health in New York City since 1920, describes how the domains of municipal and public health politics became separate entities over this period.

Hives of sickness succeeds in summarizing some of the current historical research on the social construction of epidemic disease within the context of New York City. It is an example of how public health crises may be studied in order to accomplish a more nuanced understanding of the cultural, religious, political, social, and economic histories of cities.

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William Muraskin, *The war against hepatitis B: a history of the International Task Force on Hepatitis B Immunization*, Philadelphia, University of Pennsylvania Press, 1995, pp. vi, 248, \$29.95 (0-8122-3267-4).

William Muraskin, who has written extensively on the history of hepatitis B in the US, here launches himself onto the international stage with a crusading zeal to equal that of his protagonists, a group of idealistic scientists who banded together in 1986 as the Task Force of the title, to persuade all the powers that be to use hepatitis B vaccine for the poor of the world. Since the vaccine was hideously expensive, and the effects of the disease long-term rather than impacting visibly on children, governments and international agencies were reluctant to act.

The opening chapters introduce the problem and characters; two central chapters describe pilot projects in Indonesia and Thailand; concluding chapters relate the Task Force's relationship with the World Health Organization (WHO), and WHO's endorsement of a policy of universal hepatitis B vaccination in 1992. Major strands of the story are: first, a drastic lowering of the vaccine price, to make it affordable for developing countries, partly by vaccine technology transfer; and second, overcoming resistance of governments and agencies to delivering vaccine to the masses, by diplomacy and demonstration through successful projects. The lowering of the vaccine price alone is an amazing story, the solution to a puzzle which had long troubled this reviewer.

Detailed archival material is usually unavailable to contemporary historians, but Muraskin was given access to the files of the Task Force, a rare stroke of fortune. He makes full use of this resource, supplemented by interviews with all the key actors, to produce a richly detailed account of the minutiae of networks and negotiations through which policy actually works and is altered, and research and pilot programmes are translated into more universal policies (though

parallel non-Task Force initiatives such as The Gambia Hepatitis Group are neglected). Only at ground level do the files fail. The women's movement in Indonesia or village health workers in Thailand are seen from above, from memos and reports by outsiders. Thus a reference to an Indonesian village split by unbridged ravines, creating difficulties for vaccinators (p. 104) appears as a rare, refreshing, insight bringing the local picture to life.

Because of the author's closeness to his sources, at times there is a feel of reportage rather than reflection. Muraskin may be conscious of this tendency as he refers—albeit fleetingly—to debates against which this history should be situated. Thomas McKeown's critics are mainly dealt with in a footnote, where unfortunately Simon Szreter's article is mis-cited as appearing in *Social History* without the *Medicine* (n. 37, p. 75). McKeown's contribution is presented in relation to a burning issue in current health politics—vertical versus horizontal interventions—with extreme critics portraying vertical programmes as new imperialism. Muraskin argues that the Task Force saw hepatitis B vaccination (an archetypically vertical policy) as the means of saving many lives: empowerment of the poor, though a laudable goal, would not rapidly deliver the vaccine (pp. 64–5). June Goodfield's history of global vaccination programmes (cited here), and Muraskin's own contribution, open up a wider territory for familiar historiographical debates.

Flawed by its immediacy and partisanship, this book is also inspired by these same qualities. It is a unique contribution in an area of recent history of importance in its own right, but also as an instance of more general policy history. The book will be of use to health policy and health promotion scholars as well as medical historians interested in third world issues.

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Suzanne Poirier, *Chicago's war on syphilis, 1937–40: the times, the Trib, and the clap doctor*, Urbana and Chicago, University of Illinois Press, 1995, pp. x, 271, illus., \$42.50 (0–252–02147–9).

Recent historians have understandably been fascinated by the complex interplay of medical, moral, and social arguments surrounding venereal disease—issues which have appeared particularly relevant in the light of AIDS. Suzanne Poirier provides a further analysis of these responses in her study of the Chicago Syphilis Control Programme, hailed in 1937 as the flagship of Surgeon General Thomas Parran's "New Deal" for syphilitics. Her account charts the fortunes of the programme from its jamboree-style launch, through its ambitious implementation of enforced and voluntary testing, to its decline and restructuring at the start of the Second World War. Poirier never attempts to simplify the contradictions inherent in efforts against venereal disease, but finds tensions everywhere: between federal, state, and local policy-makers; between public and private practitioners; between professed egalitarianism and apparent stigmatization; between compulsion and voluntarism. Her presentation of the programme's history through the voices of officials, journalists, and one eccentric employee is an attempt to capture these nuances. Dr Ben Reitman, the ex-hobo confidant of gangsters and prostitutes, combined a pragmatic view of sexuality and prophylaxis with a frequently judgemental attitude towards his low-life patients. The editors of the *Chicago Tribune*, eager to endorse an enlightened programme of syphilis control, were nevertheless embarrassed by their traditional antagonism towards the New Deal Government. Poirier's eclectic approach, and her willingness to draw out untidy issues, are two strengths of the study. Another is her detailed and very readable style; we are offered a vivid picture of the day-to-day work of street testing-stations, public lecturing and down-town Chicago—a picture sharpened by her use of the sensational voice