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He takes nothing away from the placebo effect or the healing power of nature but reminds us that for many who worked long hours in poor conditions the hospital presented a rest of sorts and regular food. He is probably right that the 'meat, broth, bread, rice and cheese' must have become very tedious over a stay of several months. Greens and other vegetables were apparently off the menu until 1844 when the Matron tried adding them to the broth 'by way of experiment'. We don't learn of the success of this trial by ordeal, but the addition of a refrigerator in 1889 may have improved what was on offer. There is also the familiar complaint of the food being too cold after its journey up to the wards. These and other nice details help paint a picture of what it might have been like to reside there.

Concerned about the behaviour of patients and the debilitating effects of uncontrolled drinking, patients were issued with brass identity tags, which they were required to wear when outside the hospital. Any publicans foolish enough to break the rules and sell booze to the readily identifiable patients were liable to lose their license. Along with the fashionable patients who came for the season and gaming tables these poorer contemporaries were also part of the identity of the city. Their story is less frequently told than that of the grandees.

All classes feature in the book's excellent illustrations, including some from the author's own collection. Rolls makes wonderful use of William Hoare's painting of *Dr Oliver and Mr Perice Examining Patients afflicted with Paralysis, Rheumatism and Leprosy* (1761), using it as the basis to discuss these illnesses and the contributions of the examining physician and surgeon. It is an earnest canvas that recalls the hopefulness of patients seeking treatment and the power of the admitting medics to turn away those they did not think suitable. He also casts his professional eye over some of the more satirical images, which despite their caricatural excesses provide well-observed records of suffering.

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**Allen M. Hornblum**, **Judith L. Newman** and **Gregory J. Dober**, *Against their Will: The Secret History of Medical Experimentation on Children in Cold War America* (New York: Palgrave Macmillan, 2013), pp. x, 266, \$27.00, hardback, ISBN 978-0-230-34171-5.

In the 1950s, 'moronic' children at the Walter E. Fernald School in Massachusetts were given the opportunity to join a science club. Excited, a number of enthusiastic pupils enrolled unaware that they would be providing the raw human material for a range of institutional experiments involving the endless consumption of oatmeal, isolation and a relentless routine of daily injections and providing urine and faeces samples. Decades later, it transpired that their oatmeal had been mixed with radioactive milk; an initiative knowingly sponsored by Quaker Oats and the US Atomic Energy Commission. Against their Will: The Secret History of Medical Experimentation on Children in Cold War America explores how the social value of certain disadvantaged population groups became undermined by early twentieth century eugenics. The authors maintain that this encouraged aspiring, often fame-hungry, medical researchers to use the institutionalised for the study of human illness. In addition, the Cold War created an environment that supported and sanctioned human experimentation. This underpinning meta-narrative fails to fully engage with the inherent complexity of twentieth century medical ethics or

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to comprehensively situate the experiments investigated against the dramatic shift in bioethical behaviour and regulation that occurred in that century. Nonetheless, Hornblum, Newman and Dober offer a thoroughly researched and well-written account of a highly sensitive and emotionally charged topic that recounts the perspectives of a range of involved actors including experimental victims, parents, institutional staff and medical researchers.

Against their Will makes strikingly clear that throughout much of the twentieth century, a significant number of researchers saw the residents of America's overflowing institutions (including asylums, prisons and reformatories) as suitable test subjects. They identified human biomaterial in groups ranging from the severely mentally incapacitated to the shy and stuttering. According to the authors, these groups constituted an 'undesirable' class whose value to the community could only be redeemed if they contributed to society by assisting in scientific advancement. Trained in the 1920s and 1930s at major American universities in a curriculum steeped in eugenic theory, leading Cold War scientists saw no scruples in using those deemed unproductive and socially useless to make scientific and social progress, the authors maintain. The twentieth-century elevation of the brave medical scientist into public hero also played an important role in shaping moral attitudes towards experimenting upon the institutionalised. These explanations could have been more convincingly expanded upon, yet what is made clear is that many researchers, for a variety of reasons, demonstrated a lack of empathy and concern towards the well-being of their experimental subjects that seems morally reprehensible today.

Medical scientists had expressed interest in the institutionalised since at least the nineteenth century when they came to realise that prisoners could be used to undertake investigations into diet and nutrition. They recognised that institutionalised groups could be easily segregated into control groups and that their diet, behaviour, regimen and medicines could be closely monitored and regulated. Yet it was only in the twentieth century that certain institutions were truly transformed into laboratory-like environments where medical conditions that had long evaded the investigative repertoires of vivisectionists could be examined using living human beings as material. While the presence of medical investigators in institutions is, in many ways, unsurprising, the authors convincingly argue that the use of children for experimentation became accepted and implemented across Cold War America at a staggering level.

In penning Against their Will, Hornblum, Newman and Dober intend to shock. Their study is replete with accounts of young children being systematically castrated, sterilised, brainwashed, dosed with LSD, injected with radioactive material, subjected to mentally damaging psychological experiments and contaminated with dangerous diseases. In examining these medical excesses, the authors successfully challenge the misconception that eugenics and human experimentation was solely a preoccupation of the Nazis. On the contrary, America had a vibrant research programme that rejected, or chose to ignore, the Nuremberg codes of medical ethics devised shortly after the Second World War. The authors consult an impressive array of sources including medical journals, oral history, official records and personal records. These reveal the varying points of view of medical scientists (ranging from overt enthusiasm for experimentation to unease), occasional public outbursts by family members and individuals concerned about children being experimented upon without parental consent and the permanent physical and psychological damage that seriously impacted on the quality of life of institutionalised children raised in the Cold War era. In addition, the authors do not shy away from engaging with the perspectives of some medical scientists who genuinely believed that their actions

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were justifiable as they advanced medical knowledge and saved the lives of countless other adults and children reaping the benefits of a therapeutic progress. Having said that, the therapeutic value of many of the experiments remained strikingly uncertain, a problem emphasised by Hornblum, Newman and Dober.

Against their Will is an emotive study of how the quest for scientific fame often overruled medico-ethical principles. By castigating and reprimanding doctors for misusing their power to select and manipulate the institutionalised, their study persuasively challenges the myth of the rise of the heroic microbe hunter. Problematically, the reader is left with the impression that virtually all Cold War medical scientists in America eagerly experimented on the young. To balance this perspective, it might have been useful to fully assess whether a cadre of medical men existed who rejected the dubious activities of their colleagues and who found alternative ways of gaining information. Certainly, although briefly mentioned, the impact of Henry Beecher's controversial 1966 article which brought important medico-ethical issues to public attention could have been used more effectively to explore how and why child experimentation gradually became deemed less acceptable. The weakness of Against their Will is that, serving as an exposé, it mostly seeks to condemn instead of comprehend. Nonetheless, Hornblum, Newman and Dober have produced an important, well-written and meticulously researched account of a controversial period in America's medical past that will undoubtedly serve as a catalyst for future academic research.

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**Mayumi Hayashi**, *The Care of Older People: England and Japan, A Comparative Study*, Studies for the Society for the Social History of Medicine 11 (London and Brookfield, Vermont: Pickering and Chatto, 2013), pp. xiii, 291, £60/\$99, hardback, ISBN: 978 1 84893 417 7.

The funding of long-term care for older people in England and Wales is currently in a state of crisis and recent government proposals are seeking a way to resolve a situation whereby older people are required to pay for their care until almost destitute. The situation is compounded by continuing reports of substandard care, both in residential institutions and in people's own homes. Abuse and ill treatment of frail and vulnerable older residents in care homes and hospitals make recurrent news headlines. Residential care for older people has suffered from disproportionate under-funding since the 1948 National Assistance Act and remains a low priority in welfare provision. The local authority budget for adult services has come under increasing strain due to the re-branding of long-term care by the NHS as social, means-tested care, with the gradual withdrawal from hospitals, since the 1990s, of the provision of long-term care for patients suffering from chronic disease. Japan is also undergoing difficulty in funding care for older people. However, most of the problem stems from its status as the fastest ageing society in the world and its population having the highest longevity.