

scruple then every prescription where this occurs has a serious error, and so, in a sense, invalidates Brownrigg's treatment. A drachm (3)=60 grains, whilst a scruple (ʒ)=only 20 grains—an error of 1:3. Of less importance is to have equated the apothecary ounce (ʒ) with that of the avoirdupois (oz) as there is a difference of 42.5 grains between them.

It would thus seem that the editors have an unfortunate lack of familiarity with the nomenclature and signs of the older medicines and prescriptions. This has the undesirable effect of the reader wishing to check with the original manuscript because of lack of confidence in the interpretation.

Not wishing to end on too sour a note, it is pleasing to a pharmaceutical historian to see a reference to a prescription seen "in Mr Garnière's chemist's shop in London" which in fact was in Pall Mall. The date seems to be in the early 1730s so this could have been either Isaac or his son Thomas who belonged to a family who had Royal Apothecaries, Apothecary-Generals and apothecaries to the Chelsea Royal Hospital amongst its members.

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Jean-Claude Beaune (ed.), *La Philosophie du remède*, Seyssel, Éditions Champ Vallon, 1993, pp. 384, Frs 175.00 (2–87673–179-7).

This book contains the papers presented at a 1992 colloquium organized by the department of philosophy of the University of Lyons. It is seemingly a companion volume to the published proceedings of an earlier symposium, entitled *La Nécessité de Claude Bernard* and held under the same auspices. Like its predecessor, the meeting took place partly in the Claude-Bernard Museum at Saint-Julien-en-Beaujolais, but Bernard himself is barely mentioned by the thirty-five participants. Indeed, he is explicitly reproached by one of them for having over-emphasized the "how" of therapeutics at the expense of the "why", a charge which he had anticipated in one of his famous *Lectures on the phenomena of life common to animals and*

plants: "Determinism is . . . the sole scientific philosophy that is possible. In truth, it does forbid us the search for the why; but why is illusory. On the other hand, it exempts us from doing like Faust, who after affirmation, plunges into negation".¹

There is a Faustian quality about many of the contributions. Several authors appear to have sold their souls to philosophical devilment in attempting to meet the editor's stated aim of concentrating on the historical and epistemological ambience of medico-pharmacological intervention. As might be expected, a francocentric intellectualism is prominent in those sections of the material devoted to definitions, culture and philosophy respectively, and is also readily detectable in the historico-scientific section. The choice of topics is arbitrary throughout. Thus, for example, while there is surprisingly little on the adverse effects of treatments, a placebo paradigm is identified in Nietzsche's *Ecce Homo*, and the final word is given to a psychoanalyst citing Lacan (who else?) in support of the notion of delusion as self-cure. The great physiologist would surely have found no grounds here to modify his belief that "le meilleur système philosophique consiste à ne pas en avoir".²

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¹ C Bernard, *Lectures on the phenomena of life common to animals and plants*, translated by H E Hoff, R Guillemin and L Guillemin, Springfield, Thomas, 1974, p. 288.

² C Bernard, *Introduction à l'étude de la médecine expérimentale*, Paris, Garnier-Flammarion; 1865, p. 306.

Peter Keating, *La Science du mal: l'institution de la psychiatrie au Québec, 1800–1914*, Montreal, Éditions du Boréal, 1993, pp. 211 (2–89052–529–5).

Peter Keating's *La Science du mal* is a concise and well-organized book that describes the history of psychiatry in the Canadian province of Quebec between 1800

and the First World War. This book is important not only because it deals with a topic that is relatively unexplored, but also because of the obvious ties and similarities between Quebec psychiatry and French psychiatry during the same period. At the same time, Keating—following Gladys Swain's lead—challenges theories that have guided historians of French and Anglo-American psychiatry. Specifically, he questions the view that the theory of moral treatment necessarily implied the emergence of the asylum as a medical and social institution. Moral treatment was an approach to psychiatric therapy that became popular in the early nineteenth century. It rejected pharmacology and physical restraint and stressed instead kindness and respect towards patients as well as optimism that the insane could indeed be cured. Many historians have insisted that nineteenth-century psychiatrists embraced moral treatment because it authorized placing patients in special new institutions—or asylums—where moral treatment was most practical and where physicians could impose their authority. Keating argues instead that in Quebec moral treatment was actually practised in hospitals *before* asylums were erected and that the first genuinely psychiatric asylum there was built at least in part to house a growing number of seemingly incurable patients. In other words, Keating maintains that the theory of moral treatment was not the “‘ideology’ of an emerging profession” (p. 28) as some like Jan Goldstein have contended. Rather its popularity derived from the sincere clinical attempt of early psychiatrists to classify mental disorders and understand their pathology.

But this controversial conclusion is not the only contribution that Keating makes to the historiography of psychiatry. By showing that Quebec psychiatry was heavily influenced by French degeneracy theory between the 1880s and World War One, he supports the view of some scholars that degeneracy theory was critical to the success of psychiatry as a medical specialty. With its demise by the

1920s state hospital psychiatry lost much of its prestige and became the troubled specialty it essentially is today. But there is no doubting Keating's point that, at least in Quebec, degeneracy theory put psychiatry on the medical map.

There is little to criticize in Keating's book. He has done a fine job consulting primary and secondary sources, although his references to the larger medical context in nineteenth-century Quebec could be more detailed. His book should inform and provoke other historians engaged in the study of psychiatry's past.

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Hasso Spode, *Die Macht der Trunkenheit: Kultur- und Sozialgeschichte des Alkohols in Deutschland*. Opladen, Verlag Leske-Budrich, 1993, pp. 388, illus., DM 48.00 (3-8100-1034-0).

In a time of both the “war against drugs” and the liberalization of drug consumption in western societies the long-term perspective of historical studies in this field can be a valuable contribution to the current debates on the right policies in drug problems. This applies also to Spode's comprehensive social history of the consumption of alcohol in German lands. Based on a large amount of primary sources (particularly from the nineteenth and early twentieth centuries) and a critical perusal of the older German “cultural historiography”, he traces attitudes towards drinking from the archaic feasts of the Teutons to the temperance societies in the German Empire.

Throughout his study, Spode tries to bring out the political and socio-economic contexts of his topic. Much space is also devoted to changes in eating habits, table manners, and social etiquette, which makes his work interesting to historians of nutrition and of ethics. Coffee has its own chapter, being seen as the great sobering agent and thus antagonist to alcohol. Along these lines, and following on