

finally preserved the banding chromosomes as a useful representation of the whole picture. This was useful for patients, clinicians and geneticists alike.

The history of genetic mapping develops as successive techniques were invented. The text is full of suggestive rhetorical and conceptual terms, which explain in a very precise manner how the laboratory bench came to have epistemological superiority over the clinical gaze. The narration effectively accounts for the advances in diagnosis that created the genetic culture of our time and its repositories. The history of medical genetics is presented in detail as a space composed of experimental knowledge and clinical practices that has never fulfilled its promise, but still went beyond scientists' expectations. The arguments are convincing, and the combined scholarship in history, sociology and medical genetics itself makes such a complex trajectory fully understood.

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Deborah Dolan Hunt, *Fast Facts About the Nursing Profession: Historical Perspectives in a Nutshell* (New York: Springer, 2017), pp. xvii + 154, \$35.00, paperback, ISBN: 978-0-8261-3138-6.

Fast Facts about the Nursing Profession is a brief, accessible and very informative text in the Fast Facts series, which provides practitioners with vital information leading to success in clinical practice. Unlike other volumes in the series which concentrate on clinical education and practice, this handbook is not a 'how to' book, but a history of nursing long before it was considered to be a profession. All contributors to the book are nursing instructors at American universities. Fast Fact chapbooks are designed to fill a gap in health education. In this case, the gap is the lack of historical content in contemporary nursing programmes. A foreword by Marilyn Klainberg states the purpose of the book, which is to introduce the historical and global foundations of nursing to those in the profession today. Klainberg maintains that contemporary nursing is a product of its history which has been shaped by global events such as politics, wars, religion, travel and the environment.

Stressing that the current literature on the history of nursing is not written from a global perspective, this book is intended to fill that gap. A preface by Deborah Dolan Hunt is a plea for including historical content in nursing curricula. Hunt acknowledges that the history of nursing is omitted for obvious reasons: time constraints, and an already overloaded range of courses. However, she maintains that students would understand their profession on a much more meaningful level if some history was studied. For over five thousand years, nursing, Hunt suggests, is and has been central to medical care. Nurses have played a unique role in the history of medicine, and arguably, a crucial role during periods of disruption such as wars, particularly the American Civil War, the Crimean War, the two World Wars, and the Korean War.

Brigid Lusk's chapter, 'The Relevance of Nursing and Why It Matters Today', raises difficult and critical questions about the history and professional identity of nurses, stating that, in contrast to physicians, nurses have often denigrated their own history to promote their standing. Examples of this trend include nurses criticising their own work during the twentieth century – 'they did little except maintain cleanliness and comfort' (p. 11) – and the allegation that the only 'real nurses' are those with a university education. The image of the nurse has been hurt by this 'rhetoric of rupture' (p. 11). This book seeks to

rectify this disturbing trend by providing a balanced account of nurses' training and work in the past. For example, Hunt states that a little known fact is that nurses received more medical training than doctors in 1900 in the United States. Nurses went through three years of training while physicians attended twelve weeks of lectures that were delivered twice. An interview with the late Jean Whalen, PhD, RN, previous president of the American Association for the History of Nursing, underscores the importance of nursing history as an integral part of a nursing degree. She provides practical strategies for the implementation of such a course, including suggested methods of delivery and possible discussion subjects including, for example, how the treatment of diseases has changed with time.

The text is chronologically organised into three main parts. Part I: 'The Origins of the Nursing Profession' in six chapters, surveys nursing from ancient times to the nineteenth century before Florence Nightingale. Of particular interest to those who are already knowledgeable about early Western medicine is the coverage of medical traditions of the East including those of Chinese, Arab, Egyptian and Indian medicine. Also considered are nursing traditions in the ancient societies of Mesopotamia, Israel and Greece. The relationship between religion and medicine, including Buddhism and Hinduism, complement the more well-known influences of Judaism and especially Christianity in the medieval period. The last chapter in this section examines the foundations of nursing during the early 1800s, focusing on notable nurses during the American Civil War and the Crimean War. Among these notable nurses were Dorothea Dix (1802–87) and Mary Seacole (1805–81). Dix, who was the superintendent of nurses for the Union Army was in charge of over three thousand nurses. Seacole was a Creole nurse from Jamaica whose role in the Crimean War has been largely overshadowed by that of Florence Nightingale. She cared for patients with cholera and dysentery using herbal remedies she had learned from her mother.

Part II, 'Florence Nightingale and Beyond', contains two chapters. Chapter 7 focuses on Nightingale's impact on the nursing profession, while Chapter 8 sketches milestone of the twentieth century. The importance of Nightingale's contributions to the foundation of modern nursing in the context of the Crimean War are legendary. The 'lady with the lamp' introduced ventilation, and improved nutrition and sanitation to the Scutari hospital, reducing the death rate by two-thirds. Hunt argues that Nightingale is the founder of modern nursing for several reasons beyond her contributions in the Crimea. She founded the first proper training school, the Nightingale School of Nursing (1860) and developed a modern philosophy of nursing in addition to introducing new practices. Nightingale's philosophy and methodology of nursing, consisted in brief of a four-step process of observation, identification of required change of environment, the implementation of environmental changes, and the identification of the patient's state of health.

Part III, 'Nursing Profession in the 21st Century', divided into six chapters, analyses contemporary nursing. It tends to be more American-focused than Parts I and II. The major topics covered are education, research, healthcare policies and the impact of the Affordable Healthcare Act on nursing. Donna M. Nickitas' chapter, 'Pioneers in Nursing Education and Social Activism', by Lavinia Lloyd Dock, Isabel Hampton Robb and Mary Adelaide Nutting, elucidates the contributions to nursing education and social activism in the United States by three pioneering nursing educators and feminists. Among her many contributions, Dock was instrumental in legislation which placed nurses, rather than doctors, in charge of their profession.

Fast Facts provides a veritable mine of historical information for nursing students organised around a short narrative, time lines, bulleted learning objectives, 'fast facts

in a nutshell' and chapter summaries. Clearly and intelligently written, *Fast Facts* is replete with well-known information and more esoteric facts about the subject under consideration. The book is an important contribution to this series.

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Ishizuka Hisao, *Fiber, Medicine, and Culture in the British Enlightenment* (New York: Palgrave Macmillan, 2016), pp. 276, illus., \$99,99, hardback, ISBN: 978-1-349-93268-9.

Long before the cell, the fibre played – as a conceptual tool, an object of empirical investigation and a cultural phenomenon – a central, unifying role in early modern debates about the order of organised bodies that took place in various emerging disciplines, such as comparative anatomy, physiology, medical pathology and therapeutics, psychology, and anthropology. Accessible to a broad readership, Ishizuka's latest book makes an important contribution to the study of this concept in the early modern world. With a focus on the British Enlightenment, Ishizuka examines and systemically relates all three aspects of fibres within a single long-term study that stretches from the second half of the seventeenth to the first decades of the nineteenth century.

The book is divided into three parts that are again subdivided into sequentially numbered chapters. At the end of each chapter, the reader finds a short summary and a list of the cited literature. The book ends with a general conclusion, a complete bibliography and a combined index of subjects and persons. The first part retraces the 'emergence of the fiber-body' between 1650 and 1700, the second part centres on the different models of fibre-bodies in eighteenth-century medicine, and the third part focuses on the relation between these bodies and the 'culture' to which they belong.

In the first part, Ishizuka's main protagonist is Nehemiah Grew (1641–1712), a plant anatomist who argued that fibres were the smallest building blocks of the bodies of plants and animals. With the help of microscopes, Grew visualised in various illustrations, like his Italian colleague Marcello Malpighi, the entire body of plants as a vessel of interwoven fibres of different kinds. Ishizuka discusses some of these illustrations.

At the end of the first part, he points to a conceptual shift that began in the second half of the seventeenth century, but only unfolded its discursive dynamics in the following century. It was a shift from representations of fibres as passive structural building blocks that form vessels and various membranes to models of fibres as *minima naturalia* that could move themselves, react to outer stimuli and interact with each other within the networks of entire fibre-bodies. In Ishizuka's own words, this was a 'radical step within medical theory to recognise the significance of the fibers as not only the component of the vessel but also the essential agent to the solids as a whole' (p. 18).

In the beginning of the first chapter of the second part, Ishizuka locates this shift in the work of the Italian iatrochemist Giorgio Baglivi (1668–1707), and the distinction he made between muscular and membranous fibres. Without discussing Baglivi's fibre-model in detail, Ishizuka mentions briefly the concept of self-active fibres, formulated in 1651 by Francis Glisson (1596–1677), and moves on to the medical physiology of Herman Boerhaave (1668–1738) in order to highlight the transition from 'ancient humoralism' to 'modern solidism' (p. 243), for which fibres, and not liquids, were the main agents of organised bodies. Ishizuka also refers to the different usages of metaphors of weaving and