really seek to avoid breast-feeding where at all possible? There are plenty of other interesting questions raised and the resulting discussions among both demographers and social historians should be eagerly anticipated.

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**E A Heaman,** *St Mary's: the history of a London teaching hospital*, Montreal, McGill-Queen's University Press, and Liverpool University Press, 2003, pp. xxi, 519, illus., £30.00 (hardback 0-85323-968-1), £15.00 (paperback 0-85323-978-9).

A major contribution to the literature of medical institutional histories, E A Heaman's history of St Mary's should be welcomed by anyone interested in the development of medical training and care in Great Britain, as well as those concerned with how particular London hospitals and schools have evolved. Heaman sets out her agenda clearly, in the Introduction: "I wanted to do more than to commemorate the school; I wanted to identify the forces and influences that led to its creation, that sustained and shaped it over the years, and that made it unsustainable at the end of the twentieth century" (p. xviii). She has succeeded admirably.

The organization of Heaman's account—a smooth integration of a chronological with a thematic approach—is apparent in the table of contents. The five parts of the book ('Foundations', 'From the late Victorian period to the First World War', 'The interwar period', 'The rise of science', and 'St Mary's at the century's end') are well titled, and numerous subtitles within chapters are good signposts on a long and winding path. The list of 'Figures and chart' in the front matter is good to have, but the absence of a comparable list of photographs is unfortunate, especially in light of the lavish use of illustrations. (A further disappointment is the failure to give greater detail in the photo captions. When was the old physiology laboratory, shown on page 80,

photographed? And the picture of 'Modern surgery' on page 436 desperately needs fuller description.)

A central thread of the story is St Mary's adaptability. The titles of chapters 4 and 7 ('The changing hospital') in a way describe the whole book, and there are frequent reminders that "change" was a constant. Heaman examines the institution from a variety of angles, and although the bookperhaps perforce—focuses largely on those (male) figures who dominated St Mary's hospital and school in the early and middle years (the story could not be told without detailed attention to Sir Almroth Wright; Charles Wilson, Lord Moran; or Sir Alexander Fleming), students and student life receive a reasonable amount of attention. The unusual degree of emphasis on athletics (especially in chapter 9, 'Moran's Mary's') helps explain what made the culture of St Mary's distinctive through several decades. Some might want to argue that women students and (later) staff do not get their due, but given historic realities, Heaman has done a fair job. Nurses and nursing also get somewhat short shrift, as does the patient's perspective.

Another strength of the book are the reminders that historic events must be examined in context: "success or failure is no necessary proof of the wrongness or rightness of any of these men or their theories" (p. 123); "pathological lab work ... had begun to expand enormously before Wright developed his vaccine therapy . . . . Wright benefited from rather than initiated the rise of the pathology lab" (p. 134). This book is then, happily, no uncritical encomium of St Mary's or its central figures. Appropriately enough, however, there are occasional references to something or someone that put St Mary's in the forefront: "During the early 1980s St Mary's became the first medical school to integrate an attachment in general practice with the pre-registration house jobs in medicine and surgery" (p. 379).

The wider world of medical politics receives good coverage, and Heaman supports well her contention that "Health came to occupy the mainstream of politics" (p. 191). What

may be some of her best discussion of this topic comes towards the end of the period covered, in chapter 13.

No book is likely to escape the publishing house error free; this one has its own crop—flaws in orthography, grammar, and diction (e.g., on pp. 62, 299, 301, 329, 429, 439). The most glaring mistake is in Roger Bannister's otherwise fine Foreword, when he refers to "America's great medical school, the Massachusetts Institute of Technology" (p. xi); MIT has never had a medical school.

The author's style is marred by occasional overwriting: "[T]his chapter bears the unhappy burden of conveying narrative inadequacy: individual disciplines become alien and incomprehensible to the general reader, and the 'big picture' becomes one of intellectual incoherence" (p. 299). The author exhibits a distracting fondness for abstract nouns ("representativity", p. xxi; "nursification", p. 111; "contestation", p. 209) and sometimes awkward diction; surely there are smoother ways to express what was an important shift in focus at St Mary's than 'The school scientized' (title of chapter 11).

On the whole, however, the book not only is easy to read but does what the author aimed to do, namely make a contribution to existing historiography "by insisting that no history of a medical institution can be complete that does not explore both the science and the politics of medicine" (p. xx).

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**John A Kastor,** *Governance of teaching hospitals: turmoil at Penn and Hopkins*, Baltimore and London, Johns Hopkins University Press, 2004, pp. x, 356, illus., £40.00 (hardback 0-9018-7420-3).

If historical work on medical innovations to date has demonstrated a consistently lagged response among practitioners to scientific revolutions, this book proves that the medical profession is equally slow to respond to changes in the managerial sciences. The primary focus of this study of innovation is to determine the factors that bring about, or even hinder, changes in governance at medical schools and their affiliated teaching hospitals. To address these matters, John A Kastor, whose previous books include a study of medical school mergers in Boston, New York and California, focuses on the academic medical centres of the University of Pennsylvania and the Johns Hopkins University, two institutions that experienced dramatic change in governance during the late 1990s.

As this chronology suggests, the book is a work of contemporary history. Given the nearness of these events to us, Kastor has spent little time in archives and many more hours interviewing hundreds of people who were directly involved in the governance of these two venerable medical schools. While several points remain unresolved and even highly contentious, in conclusion, Kastor identifies three key factors that influenced changes in governance at Penn and Hopkins, namely structure, personality conflicts, and current events.

The first section of this volume recounts the rise, fall, and subsequent recovery of Penn, America's first medical school. In particular, one chapter records how the school's CEO/Dean, William Kelly, after spending millions of dollars purchasing hospitals and healthcare practices in what was one of America's most lucrative healthcare markets, coped with huge financial losses following the expiration of an extremely favourable Blue Cross contract and implementation of Medicare's Balanced Budget Act adjustments. The second section deals with events at Hopkins, where conflict between James Block and Michael Johns, leaders of the teaching hospitals and medical school during the mid-1990s, devastated morale and progress and forced a fundamental change in governance at what remains one of America's most renowned medical centres. Finally, a short conclusion outlines a number of important lessons Kastor has distilled from these two case studies.

Supreme among the book's various "lessons" is the belief that success depends on people,