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correspondence, including 133 previously unpublished (though not all those previously published appeared in full). In this setting of an intense emotional attachment, Freud had the confidence to let his thoughts go, to allow prejudice, intuition, and imagination, as well as evidence and argument, to construct theory from his patients, current psychopathology, and—perhaps especially—his own emotional life. Since these letters cover the great moments of psychoanalysis's self-creation, they are indeed almost without rival as a record of intellectual creativity. There is also humour, some intended and some not, and many intimate touches about family life.

In his introduction, Masson states he has "avoided the temptation to speculate or to interpret" in his annotations. Whether he has indeed done this, particularly in the light of his very strongly held view about Freud's lack of intellectual integrity over the seduction theory of the origin of neuroses (argued in The assault on truth: Freud's suppression of the seduction theory, 1984), has been seriously questioned by Sander Gilman ('Dubious relations', London Review of Books, 7: no. 11., 20 June 1985). I think it is still unclear whether the publication of all of Freud's letters will substantially alter our understanding of the origins of psychoanalysis. There is already considerable disagreement about how to read what was published earlier. To interpret letters, where expression is complicated by all the idiosyncracies of personality, mood, pressures of time, sub-texts of intention or emotion, and sheer play, is an extraordinarily difficult matter. Freud and Fliess also drew upon a great range of medical and psychological literature, not to mention their experiences with patients in cultural settings quite remote from our own. Being fascinated and stimulated by the letters is one thing; using them to reconstruct a single, persuasive account of some "real" way in which psychoanalysis was created is another. Certainly, the letters do not speak for themselves, and any annotation beyond the formal identification of factual references must be considered interpretative.

The letters should finally confirm that Fliess was much more than just a convenient recipient for the more brilliant Freud's overflowing intellectual and medical ambitions. Freud needed Fliess emotionally; but, in ways that are difficult for us to recapture (not only because of Fliess's missing letters, but also because we are unwilling to accept how far Freud was a man of his time and place), he needed him intellectually.

Roger Smith University of Lancaster

MARTIN S. PERNICK, A calculus of suffering. Pain, professionalism and anesthesia in nineteenth-century America, New York, Columbia University Press, 1985, 8vo, pp. xv, 421, illus., \$45.50.

This mild-mannered book takes on the iconoclastic task of placing the introduction of anaesthesia, the "triumph over pain", within the social and professional context of mid-nineteenth-century American medicine. In the process, anaesthesia is displaced from its once heroic role as a leading indicator of medical progress to become one more mediator of intraprofessional conflict and professional authority. Pernick uses the debate over anaesthesia for a careful exploration of value conflicts within a divided medical profession. While heroic practitioners and naturalistic healers both, if for different reasons, tended to avoid anaesthesia, conservative physicians developed a new utilitarian ethic, a balancing of the costs (the dangers of anaesthetics) and the benefits (the relief of pain) in each individual case. Pernick presents the conservative synthesis—the "calculus of suffering"—as a compromise position that permitted the judicious use of anaesthetics while preserving and enhancing the professional status of the surgeons.

Pernick's argument is an endorsement of moderation in both medical behaviour and historical interpretation. If anything, he seems overly generous to the surgeons by arguing that their actions were a result of a more or less rational calculus: to this reviewer, they seemed rather to be "muddling through" on the basis of a mix of personal experiences, social prejudices, and professional interests. In the process, however, they collectively produced a social hierarchy of sensitivity to pain: manly men seldom needed anaesthesia, sensitive (white)

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women needed a little, and, more frequently, immigrants needed less than the native-born, while black men and women had a natural immunity to pain. In general, the available surgical records of hospitals in the late nineteenth century show these theoretical ideas reflected in the actual frequency of anaesthesia used for different groups of patients.

Pernick's account displays the many arguments adduced for and against anaesthesia, including the disputed "value" of pain, the role of anaesthetics in changing the power relations between physicians and patients, and the possible sexual threat to anaesthetized females. Much more could doubtless be said about the issues of sexual dominance, unconsciousness, and professional power; Pernick raises the issues but does not pay them extended attention. His calculus, and the one on which he lavishes most attention, is the trade-off between the relief of suffering and the (perceived) increased danger of surgery: at least some surgeons were willing to accept a five per cent increase in risk of death for painless major surgery. Pernick's evidence shows that the availability of anaesthesia did lead to an increase in surgical rates: immediately after the discovery of anaesthesia, the rate of surgery for men doubled, while that for women tripled. (In accordance with the calculus of suffering, women were more likely to be given anaesthesia than men; overall, anaesthetics made major surgery and intricate procedures more feasible.) Pernick also argues, however, that anaesthesia probably had little effect on the death rate from surgery and, interestingly, that rising surgical mortality was more a function of increasing industrial and railroad accidents than of the use of anaesthetics.

This engaging account of the introduction and use of anaesthesia rests on an extensive substructure of scholarly research. Whether the reader agrees with the precise weighting of theoretical arguments, there can be little doubt that Pernick has placed the discovery and application of anaesthesia at the centre of the social history of medicine, relating it clearly to contested issues about the process of professionalization and suggesting, at least, its possible implications for questions of class, race, and gender in relation to selective medical therapies and professional power.

Elizabeth Fee The Johns Hopkins University

LINDA L. CLARK, Social Darwinism in France, University of Alabama Press/London, Eurospan, 1984, 8vo, pp. xi, 261, [no price stated].

In this short volume, Dr Clark has attempted to tackle the enormously difficult problem of the relationship of evolutionary thought to political philosophy, assessing in turn the penetration of such ideas into Republican, leftist, and right-wing ideologies in France. Neither does the author stop there. She proceeds with a fast-paced discussion of the impact of such ideas on literature, sociology, anthropology, and eugenics, as well as on colonialism and international affairs. Her brief is undoubtedly overly ambitious: she maintains that her work will uncover the figures most concerned with social Darwinism; how they applied the study of biology to human society; and what relationship existed between social Darwinism and political, economic, and cultural life. No matter how laudable the aims are, the work is nonetheless marred by a persistent and nagging problem of definition involving conceptual problems that hamper her interpretative framework from the start. In sum, Dr Clark never convinces us that social evolutionary ideas in France have much to do with social Darwinism. She quite rightly begins her volume with a discussion of definition and seeks to sort out the various "evolutionisms" that she confronts. The first group, termed "social Darwinist", emphasizes the "struggle for life", race competition, and the legitimation of laissez-faire economics. The next two categories she terms "reform Darwinists" and "social Lamarckians"; it is not clear, however, from her succeeding analysis what the difference between these two groups is, as both stress the importance of "association" and "co-operation" over "struggle" and "competition". Moreover, the first category raises innumerable interpretative difficulties to which the author herself alludes, the most significant being that social Darwinism is not "a rigorously developed set of arguments framed by Darwin himself for or by his authorised representatives". Because of this lack of coherent and