

distinctiveness, and its limits, is engaged quite directly in the one paper that really ventures north of Hadrian's Wall. Drawing on national rather than purely local data, Matt Egan explores 'The "manufacture" of mental defectives' in Scotland between 1857 and 1939, suggesting (as I have previously argued was true for mental illness in nineteenth-century England and Wales) that it was the elasticity of official definitions which largely explains the rapid increase in the number of officially identified "mental defectives".

Specialists will find some useful, if limited, contributions on particular topics in this volume. The book is, however, badly served by its title, which promises a far more ambitious approach to its subject than it even begins to deliver.

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Elisabeth Dietrich-Daum, *Die "Wiener Krankheit". Eine Sozialgeschichte der Tuberkulose in Österreich*, Sozial- und wirtschafts-historische Studien, Band 32. Vienna, Verlag für Geschichte und Politik, Munich, Oldenbourg Wissenschaftsverlag, 2007, pp. 397, €49.80 (paperback 978-3-7028-0431-2).

Although tuberculosis was until recently one of the most frequent causes of death in many countries, national histories of the disease are few, and the existing historiography is dominated by studies of England and the United States. Elisabeth Dietrich-Daum's account of tuberculosis in the Habsburg Monarchy and Republic of Austria is thus a very welcome addition to the literature.

Tuberculosis entered the Austrian public health discourse in the 1780s as "*morbus viennensis*" or Viennese illness. From the outset it was acknowledged to be a great pestilence, and as the nickname implies it was widely considered a "social disease", associated especially with urban lifestyles and

living conditions. Dietrich-Daum aims to establish a general framework for the social history of tuberculosis in Austria and focuses broadly on three interrelated topics—medical-political discourse, epidemiology, and public health intervention. Although the work's chronology extends from the late eighteenth century to the present, the period from the 1870s to the 1920s is clearly privileged and takes up half the book. One reason is that the 1870s mark the beginning of reasonably detailed and accurate data on public health that enable the discernment of socio-economic and geographic patterns in tuberculosis morbidity and mortality in the Habsburg Monarchy. More importantly, however, the epistemic and therapeutic paradigms that developed then determined the country's public health policies on tuberculosis up to the antibiotic revolution of the late 1940s.

Readers acquainted with the history of tuberculosis will find many familiar elements in Austria's encounter with the disease: long-standing disagreement among medical experts about causes and treatment; a public opinion divided between near-phobic dread and utter disregard of the disease depending on socio-economic position and residence (city versus countryside); predominance of care institutions (above all, sanatoria) and services run by private charities; and variable engagement of official public health authorities, which are always inadequately financed. The epidemiological pattern of the disease—c.1910—is also familiar: higher mortality among the very young and the middle-aged, among men in general, and in urban areas—especially in working-class districts.

Although the tuberculosis mortality rate in Austria was one of the highest in Europe, and in spite of numerous, systematic investigations of the so-called "people's disease" by public and private health authorities, specific medical intervention came relatively late. The first sanatorium was not established until 1898, and there was no state-wide association dedicated to combating the disease until 1916. Concern about the debilitating consequences of

tuberculosis for the country's military forces during the First World War prompted energetic institution building and the first state-wide legislation regarding the care of tubercular patients. After 1918 this activism continued especially in socialist-run Vienna, which undertook a massive programme of public housing and built up a network of professionally staffed welfare centres that both cared for the tubercular and undertook to educate the public about the disease and its avoidance. After 1945 the story becomes very familiar indeed: mass prophylactic campaigns involving BCG vaccinations, tuberculin testing, and chest x-rays combined with antibiotic chemotherapy practically eliminated tuberculosis in Austria by the mid-1970s.

Between 1874 and 1974 tuberculosis mortality in Austria declined from 35.8 deaths per 10,000 to 0.8 deaths per 10,000; its proportion of total mortality fell from 11.2 per cent in 1874 to 7.8 per cent in 1936, and amounted to less than one per cent in 1974. As elsewhere in Europe the bulk of this epochal transformation occurred in Austria largely without therapeutic intervention. Dietrich-Daum reviews diligently the catalogue of plausible causes of the disease's decline, and concedes that it can not be explained with complete satisfaction. Rather than continuing to search for definitive causes, perhaps the historian of tuberculosis should concentrate on society's experience of and response to the disease. This well-informed and wide-ranging account establishes a solid foundation for such research in Austria, and makes a little-known part of Europe more accessible to the comparative historian of public health.

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Gregg Mitman, *Breathing space: how allergies shape our lives and landscapes*, New Haven and London, Yale University Press, 2007, pp. xv, 312, £20.00, \$30.00 (hardback 978-0-300-11035-7).

Every good picture tells a story, and there are a plethora of good pictures, maps and cartoons in Gregg Mitman's definitive history of allergy and asthma in the United States between the mid-nineteenth century and the near-present. In the early 1960s, Gordon Parks, the great news photographer and exponent of photo-montage, travelled to Latin America to portray the depths of social and economic injustice which scarred a continent believed by John F Kennedy and his advisors to be ripe for Communist subversion. An enthralled American public devoured Parks's narrative of the young Flavio da Silva in *Life* magazine.

Slum squatter conditions and foul air had reduced the boy from Rio to a state of malnourished bronchial immobility. Physicians and researchers in Denver recognized his condition, treated him for free and restored him to health. Contrasting photographs—Flavio with a grossly distended chest, dilated eyes and matchstick arms, and Flavio in a clean and cosy hospital bed, returning to health—hammered home a powerful political point. The story reinforced a narrative that validated Kennedy's massive aid programme to America's deprived southerly neighbours. "Flavio's Rescue", the *Life* caption read, "Americans bring him home from Rio slum to be cured". Meanwhile, in Harlem cockroaches and allergy thrived as never before. New Orleans was stricken by a horrendous asthma epidemic in 1961. Anti-histamines flooded the market and were dangerously over-prescribed. Drug companies circulated pharmacists with tear-out-and-keep indicators that identified selling seasons for every part of the country and triggered a massive back-lash in terms of near-deadly and counter-productive side-effects.

At the same time, the USA was witnessing the first full flowering of the super-hygienic middle-class suburban home, classically documented by Ruth Schwarz Cowan, and characterized by the designation of middle-class wives and mothers as guardians of sheets and curtains, air-conditioning systems, and dust-, bug- and (so it was vainly hoped)