

CDC and Capitol Hill in the case of blinded HIV testing. Economics often overlapped with political factors in terms of changes in political processes for funding. Sandy Smith-Nonini underscores this intersection in her discussion of the pressure of foreign and national political reforms on tuberculosis control funding, while Ruth Berkelman and Phyllis Freeman provide insights into the political culture of the CDC and the legislative process through which illnesses are funded. The impact of cultural factors on institutional response is viewed from several standpoints, such as through Lawrence Mass's observations on the media's slow response to hepatitis C or Spielman *et al.*'s examination of the US culture of multiple agencies focusing on one problem (Lyme disease).

The book provides ample opportunity for future research, from refining the initial models to examining these themes across countries. Overall, the chapters are scholarly and well-written, although a few are distractingly mired in details. Despite this minor criticism, the volume should be of great interest to both historians and modern researchers interested in the overlap between social processes and public health, and is deserving of critical attention.

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Ole Peter Grell, Andrew Cunningham and Bernd Roeck (eds), *Health care and poor relief in 18th and 19th century southern Europe*, History of Medicine in Context, Aldershot, Ashgate, 2005, pp. viii, 326, £49.50 (hardback 0-7546-5156-8).

This is the last in a series of four books, edited by Grell and Cunningham—with third partners in most cases—on the general subject of *Health care and poor relief in Europe 1500–1900*. The scope of the books—issued in 1997, 1999, 2002 and 2005—presents a twofold divide, chronological and religious (this “southern Europe” is made up of the Catholic countries of western Europe: Portugal, Spain, Italy, and

Austria; France being included in northern Europe). The series is a most welcome attempt to produce a comprehensive European history of a problem—the provision of health care to the mass of the population—which has lost none of its prominence, its evolution being the origin of some of the common features of today's medical care. At the same time, issues regarding the meaning of poverty, its management and solutions, have only slightly changed, mainly in terms of the subjects involved, but are still pressing in post-industrialized societies. A timely effort, then, worthy of praise, although affected by the fact that the series has been published by several different publishers.

This particular volume is composed of an introduction, eleven chapters that discuss care and relief in eighteenth- to nineteenth-century Austria (Martin Scheutz), Spain (Castile and Madrid—Pedro Carasa, and Barcelona—Alfonso Zarzoso), Portugal (Maria Antónia Lopes), and Italy (Rome—Martin Papenheim, Parma—David Gentilcore, Naples—Brigitte Marin, Bologna—Gianna Pomata, and Piedmont—Giovanna Farrell-Vinay), and the European travels of John Howard (Ole Peter Grell), plus index. The customary introduction by Andrew Cunningham links this to the general purpose of the editors of the series, as a farewell to the whole enterprise.

The first two chapters are analytical in nature, first there is an overview by John Davies aiming to underscore the common historical features of the diverse national processes studied; second, an ideological summary of the main questions on poverty and its relief—causes, interventions and responsibilities—by Nicholas Davidson. Certainly, these are probably the most difficult parts to write, as they require uncommon scholarship; both are overtly slanted towards Italian examples as well as to an English-language critical bibliography. There are slight differences of scope and perspective among chapters dedicated to national contexts, ranging from the driest of analysis for Castile, where hardly any empirical data are given, through full descriptions of social actors and events for Austria and Rome; to the beautiful account of Howard's journeys “of body and

soul". The chapter on Bologna deals only with the history of health care, while that on Parma is limited to the eighteenth century (precisely, 1740 to 1820). A disturbing lack of uniformity is found in the name of institutions: Carasa's "county councils" are Zarzoso's "*diputaciones provinciales*", while common Italian "congregazione di carità" in several chapters are "congregations of charity" in Farrel-Vinay's Piedmont, so that the last does not feature in the index. The index is particularly weak. It does not include a number of institutions that appear within the text (i.e. *diputaciones*, the Portuguese General Council for Benefaction, Commissione di Sanità, etc.) and the control of language is careless; "insane" is not listed, but "mental health, asylums" and "lunatic asylums" are given separate entries; the page numbers for "beggars" in the Austrian and the Neapolitan chapters are missing; and the cities visited by Howard are not included.

Despite these minor shortcomings, the book is generally a solid work, and is enjoyable to read. These studies show brilliantly the lasting activity of institutions created for religious reasons (in the mid-nineteenth century around two-thirds of the charitable institutions active in cities such as Naples had been founded before 1700), as well as the return of medieval agencies, when state development under Liberal rule broke the centralist approach to empower once again intermediate public agents such as communes and provinces. The concept of a single narrative of a progressive takeover of charities by the state is completely shattered. As both Davies and Davidson show, the burden of insufficient financial resources and the priority of urban charities are common traits in modern Catholic Europe. In the different local/national contexts—not to mention the unusual civil tradition in Portugal—debates on poverty were entangled with debates on the place of the Church in social life.

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Florian Steger and Kay Peter Jankrift (eds),
Gesundheit – Krankheit. Kulturtransfer

medizinischen Wissens von der Spätantike bis in die Frühe Neuzeit, Cologne, Böhlau Verlag, 2004, pp. vi, 270, €34.90 (hardback 3-412-13803-7).

The scope of this volume is ambitious, spanning a millennium, covering both western Europe and the east, and including topics as diverse as surgery in the Frankish states and "paleness" as an illness in early modern poetry. Three papers are in English (Peregrine Horden, John Henderson, Piers Mitchell), with German summaries, but unfortunately English summaries are not given for the German contributions, something which would have broadened the appeal of this volume for those with a phobia for German. Nevertheless, it is worth venturing in, as there is much of interest here.

The volume is organized chronologically, and divides into three sections: late antique, medieval, and early modern. Mischa Meier's paper centres around the intriguing hypothesis that the writing of history altered in response to the experience of plague in the late antique world. She focuses principally on eastern authors but concludes with Pope Gregory the Great and Gregory of Tours in the west. Gernot Kirchner picks up where Meier ends, discussing Gregory of Tours' concept of healing, the literary models he draws on, and his attitudes towards doctors. As with Meier's paper, the principal emphasis is on the literary representation of illness and healing rather than medical practice. Peregrine Horden, in contrast, starts with the development in late antiquity in the east of the physical space designated as a "hospital", but argues that it was brought into existence—and gained its symbolic force—as part of the theological and political power struggle between groupings within Christianity ("Arian" and "Catholic").

There is then a slightly uncomfortable jump in chronology from late antiquity to the Crusades, perhaps inevitable in a single volume attempting such a large chronological sweep. However, with three papers on late antiquity, one could have covered at least part of the seventh to tenth centuries, perhaps focusing on the manuscript transmission and use of medical texts from antiquity to the middle ages. What is good in this