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tuberculosis. Although the disease affected all social classes to some degree, it was re-conceptualized in the French mind as one of vice and negligence among the poorer classes, an affliction whose incidence testified directly to the moral and social evils undermining France—promiscuity, alcoholism and unhygienic life-styles.

The process by which tuberculosis acquired this significant status as the ultimate social disease in France is the subject of David Barnes's study. It is a large subject, which deserves fuller and more reflective treatment than is possible in a monograph of this type. One of the problems in writing about tuberculosis is the multi-faceted nature of the disease and its contexts, and its inscrutable causation, which troubled nineteenth-century observers as much as it still troubles historians. On the model of William Coleman's *Death is a social disease* and Richard Evans's *Death in Hamburg*, Barnes attempts with some success to set the French response to tuberculosis in its social and political context and to demonstrate the relevance of his story not just for the history of medicine, but in terms of the wider history of France. Engaging with the narratives of French hysteria, he first examines the mid-nineteenth century medical response to tuberculosis, and the parallel emergence of the popular idea of tuberculosis as a vehicle of redemptive suffering. The stories of *La Dame aux camélias*, of *La Vie de bohème*, of *Les Misérables*, and of the Goncourt brothers' *Germinie Lacerteux* and *Madame Gervaisais* are set against the real-life experiences of St Thérèse of Lisieux whose brief adult life consisted in suffering tuberculosis and writing about that suffering.

The central sections of the book deal more predictably with the familiar narratives of public health, or—as Barnes has it—the development of the dominant etiology of the disease in the special context of France. A local study of public health responses in Le Havre, the tuberculosis capital of France, demonstrates the energy and dedication of local efforts to combat the disease, perceived here as a threat to local prosperity, through

campaigns against slum housing, alcoholism and specifically against the disease itself. While justifiable as meat in the narrative sandwich, this chapter sits somewhat uneasily with the rest of the book, raising questions as it does about other local responses to tuberculosis. In the final chapter, Barnes opens up the “oppositional etiology” of the left-wing workers' movement at the turn of the century, and so integrates the tuberculosis story into the living politics of a wider France.

While this study is the first English-language book on tuberculosis in France, it complements an accumulating native French historiography. A reading knowledge of French remains essential for those who wish to explore more fully the images and realities of tuberculosis in French history.

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Derek A Dow (comp.), *Annotated bibliography for the history of medicine & health in New Zealand*, Dunedin, The Hocken Library, University of Otago, 1994, pp. xx, 322, illus., NZ\$39.50 (+p&p). Available from the Hocken Library, University of Otago, Dunedin, New Zealand.

This is by far the most comprehensive bibliography ever published on the history of medicine and health in New Zealand, and in some respects it betters its Australian counterpart, *An annotated bibliography of the history of medicine and health care in Australia*, edited by B Gandevia, A Holster and S Simpson (Sydney, 1984). Rather than simply follow the Australian model, Dr Dow has adopted a different system of classification, and places more emphasis on historiography by arranging the entries in each section chronologically by date of publication. Another notable departure from the Australian model is the inclusion of unpublished research essays and theses. This is especially commendable, for a great deal of worthwhile historical

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research remains unpublished in New Zealand because its market for academic publishing is so small compared with most other English-speaking countries.

There are twenty-four sections, starting with earlier bibliographies and ending with 'Philately & Numismatics'. In between there are sections on social welfare, public health, communicable diseases, demography, Maori health, women's health, children's health, hospitals, geriatrics, mental health and alternative medicine, as well as the more traditional fields of medicine, surgery, nursing, dentistry, military medicine and the medical profession. The largest single section (367 from a total of 1,950 separate citations) is 'Biography and Autobiography,' confirming this reviewer's impression that a large part of New Zealand's medical history has (until quite recently) been written by its practitioners. Within each section, entries are arranged thematically under headings such as 'Influenza,' 'Leprosy,' 'Measles', etc. for Diseases, or 'Demography,' 'Nutrition', 'Fertility', etc. for Maori Health. Most of the headings are sensible and predictable sub-divisions, except for those in the large section on 'Biography and Autobiography,' where the compiler tries to distinguish 'Doctors-Female' from 'Doctors-Female-Collective' and 'Doctors, Nurses, etc. Collective.' These are (confusingly) arranged alphabetically by surnames in the former but chronologically in the latter. Yet there is also a previous section on 'Women in Medicine' (17.2) which includes entries hard to distinguish from those in 22.4. Fortunately there is a three-part index arranged under Authors, Persons and General (subjects), but the reader has to do all the cross-referencing, and some works may be overlooked because they are in unlikely places.

We are told (p. 4) that the scope of the work was greatly enlarged by the inclusion of several hundred new citations (including local histories) after the indexes had been compiled, and in order not to disrupt the indexes new entries were given alphabetical suffixes and inserted at their appropriate places in the numerical sequence. (Yet entry 1377 remains "Not allocated".) It is a pity that more time was

not taken to rework the indexes so that a consistent numerical classification could be achieved. Another technical imperfection is the appearance of a strange skeletal Roman type-face instead of italics between pages 189–201. Was there a gremlin in the compiler's lap-top? The most curious lapse in proof-reading (which is otherwise of a very high standard) is the title on the cover, which reverses the order of the words "Medicine and Health" found on the title page. An early second edition should tidy up these lapses.

The all-inclusive policy which seems to have been adopted as the work proceeded has resulted in some very strange bedfellows. Well-documented academic works sit alongside such minor pieces as the district jubilee booklet which happens to have a few pages of anecdotes about the local hospital. It is useful to know that the latter exist in such abundance, but the compiler's annotations do not always alert the reader to the very considerable variations in quality between some of his entries. He modestly admits to "some inconsistency of style and approach" in the annotations, as the comments were added over a four-year period, but he claims to have "sighted in person" all but 34 of the entries, which is a very commendable achievement. The annotations are necessarily brief, but nearly always helpful. Occasionally they fall short of the standards of fairness and impartiality one expects from a reference work.

Dr Dow is to be congratulated on his "wide-ranging rummagings", as Stuart Strachan terms them in his Foreword, and the Hocken Library deserves the thanks of all workers in the field for supporting this notable aid to research. Dr Dow's achievement is all the more remarkable for having been completed alongside his history of the New Zealand Department of Health (*Safeguarding the public health*, Wellington, Victoria University Press, 1995).

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