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Takahiro Ueyama, *Health in the Marketplace: Professionalism, Therapeutic Desires, and Medical Commodification in Late-Victorian London* (Seattle WA: University of Washington Press, 2010), pp. xviii + 320, \$55.00, hardback, ISBN: 978-0-930664-29-9.

It is now almost a quarter of a century since Roy Porter introduced the notion of the medical marketplace into the history of medicine. Porter's argument, in origin at least, was chronologically specific. It was the result of his efforts to understand the dynamics of relationships between patients and medical practitioners during the long eighteenth century. Since then, historians of medicine have adopted the market approach with enthusiasm. It has proved to be an important and versatile tool for understanding medical culture and a useful way of historically embedding that culture in a broader context. Understanding medicine as a marketplace has certainly sharpened our recognition of the place medicine occupies in consumer culture and helped us recognise a far broader spectrum of practices related to health. More recently, of course, the very notion of the medical marketplace has come under some sustained criticism, with a new generation of medical historians suggesting that the language of the marketplace fails to adequately capture the richness of relationships both between practitioners and between them and their clients. Some of this revisionism offers important new insights, although much of it is cursed with a rather one-dimensional view of how the medical marketplace might be imagined. In this book Takahiro Ueyama reminds us of just how useful the market approach can still be.

Ueyama offers the reader an impressive piece of cultural history. The focus is London during the last few decades of the nineteenth century and Ueyama deftly unravels the networks of competing professional and entrepreneurial interests that underpinned the provision and consumption of health in the imperial capital. Anyone who has spent any time ploughing through newspapers or popular journals from the late Victorian period cannot have avoided noticing the ubiquity of advertisements extolling the virtues of this or that remedy. Their pages were full of flowery encomiums for pills and potions of all kinds. Puffs for C.B. Harness's electropathic belts and associated paraphernalia were everywhere. As Ueyama almost but not quite says, this is the cultural lens through which we need to view the transformations of orthodox medicine at the end of the nineteenth century too. Efforts to police and regulate the medical profession by the Royal Colleges and government alike took place against a backdrop of largely unbridled commercial enterprise. Advocates of scientific medicine were far from the only ones to turn to science in their efforts to carve out secure spaces for their medical activities. Science worked for the quacks as well.

As Ueyama points out, the trade in patent medicines and similar nostrums at the end of the nineteenth century was extensive and hugely lucrative. This is the context for the British Medical Association's efforts to regulate the trade in commercial medicine and an appreciation of the scale and profitability of the patent medicine business underlines just what an uphill struggle those efforts entailed. It is easy for us to imagine from a contemporary perspective that all the power in that struggle lay in the hands of the professionals. Ueyama reminds us that this is far too simplistic a view. Behind the doctors' antipathy to the market in health lay a web of concerns about gentlemanly conduct and the

proper behaviour of professional men. Their antagonism towards trade (and sometimes towards science) was an indicator of cultural insecurity as much as an expression of corporate power. There was far more going on here than some straightforward urge towards professionalisation and professionalism. In fact, what was going on is better understood as an articulation of what medical professionalism would entail and Uyeama is clearly correct in arguing that this can only be understood properly in the broader context of a burgeoning and highly competitive market for health.

This book represents an important contribution to our understanding of the complex cultural place of late-Victorian medicine. It shows that looking at medicine as a market for health is not only useful, but essential to understanding how debates about medical authority were worked out at the end of the nineteenth century. It is not without its problems. Uyeama sometimes seems rather shy of putting all his cards on the table and laying out the full implications of his narrative. There are also some curious absences from the bibliography. Nevertheless, this is an impressive piece of cultural history that does an excellent job of putting marginal medicine in the foreground of late-Victorian medical culture.

Iwan Rhys Morus

Aberystwyth University, UK

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Charlotte E. Henze, *Disease, Health Care and Government in Late Imperial Russia*, BASEES/Routledge Series on Russian and East European Studies (London and New York: Routledge, 2011), pp. 232, \$158, hardback, ISBN: 9780415547949.

That disease as an important tool for economic, cultural and political analysis has long been recognised by historians. In particular, historians of social medicine have paid much attention to cholera epidemics in nineteenth-century England, France and Germany. Although a number of studies of public health in pre-revolutionary Russia have dealt with cholera epidemics and various facets of its sociopolitical impact, Charlotte Henze's book is the first to concentrate entirely on the history of cholera in Saratov throughout the nineteenth to the early twentieth century. The choice of the locale is rightfully justified since Saratov, an important shipping port on the Volga, one of Russia's major trade routes, with its socially, culturally and ethnically diverse population, including a large German community, experienced all the major cholera pandemics of 1823–1914. With this central focus, Henze is able to construct a social, political and public health history of the city of Saratov. She uses the cholera outbreak of 1892 in Saratov as a means of exploring living conditions and medical and administrative infrastructures in the city on the Volga. She applies the same approach to address broader issues of Russia's socio-economic developments in the age of modernisation associated with rapid urbanisation, increasing migration of an impoverished rural population and growing social tension.

The book is divided into five chapters. The first chapter traces the history of cholera in Russia before 1892 focusing on the multiple outbreaks during 1823–59. It also analyses anti-epidemic policies after Russia's defeat in the Crimean war, when Russia entered the reform era that drastically changed the existing economic and social structure of