

Book Reviews

nearly 250 years of radical change. This is not quite the task Penelope Hunting has set herself. None the less, this admirably researched and well-written book can be used to address these questions as well as to celebrate what is described by HRH The Duke of Edinburgh in the Foreword as a “thriving professional body in the heart of London” (p. xii).

The Society was founded in 1773 mainly on the initiative of the Quaker physician John Coakley Lettson. From the first it was an orthodox, medical broad church. Its membership comprised apothecaries, surgeons and physicians. The latter were primarily licentiates of the London College and the “High Church” Oxbridge Fellows of the College were less in evidence among the membership. In the eighteenth and early nineteenth centuries case reporting, epidemic disease, natural history, medical education and teaching, military and naval medicine, dispensary practice and exploration busied the Society’s Fellows. Papers were presented to them in rooms where a library and museum were also housed. Besides being a model Enlightenment medical institution, the MSL was also home to the internal factionalism of a profession without a clear identity. It was ripped apart in its early years by medico-chirurgical jousting for power. Lettson’s status, diplomacy and wealth did much to keep it together.

Hunting gives a distinct sense of being happiest in this era. She conveys a feeling for the richness of her material without being able to present more than a fraction of it. Her journey through the nineteenth and twentieth centuries is slightly more breathless. During this time the Society remained eclectic in its membership although as the profession consolidated it became distinctly more respectable and lost some of the fox terrier qualities that graced its early days. Few were the medical dignitaries who have not been associated with it in the last 200 years. A list of Presidents (appended) is a roll of the great and good. Lister left the MSL his library.

The late twentieth century brought into sharp focus the issue of the role of a medical society still in some indefinable sense committed to

Enlightenment values in a modern age. The Fellows of the Society have been rightly proud of its fine library yet disposing of it was the preferred solution to ensuring the institution’s survival as a research forum and dining club. Yet proud though the founders were of their books, they comprised a *working* library. What was sold was a *heritage*. The issue of continuity and change could hardly have been more clearly drawn.

This book provokes a number of interesting historical questions which it has not been the author’s task to address. For example, to what extent did the MSL function as a London medical club? Unlike Edinburgh, London’s University was never a locus around which the medically successful could congeal. Second, what were the political relations between the elderly, distinguished MSL and the upstart but chartered Royal Society of Medicine? For the Fellows of the MSL this volume is a handsome tribute to their institution. For the historian, Hunting, by her scrupulous chronicling and footnoting, has indicated what a major, largely untapped, archival resource the MSL still is. The author is rarely in error but the painting of Lettson at his Grove Hill home could not have been sold to the Wellcome Trust in 1917 (p. 6). The Trust (which, incidentally, bought bulk of the MSL’s library) was not established until 1936.

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Ian F McNeely, “*Medicine on a grand scale*”:
Rudolf Virchow, liberalism, and the public health, Occasional Publication, No. 1, London, The Wellcome Trust Centre for the History of Medicine at UCL, 2002, pp. 97, £10.00 (paperback 0-85484-082-6).

Rudolf Virchow is a seminal figure in the emergence of modern medicine, whose iconic status paradoxically has blocked a properly historical understanding. Long-lived, he adopted a critical stance towards the development of state medicine in Prussia, and complex issues arise concerning public health, liberalism, and

anti-Semitism. The temptation is to see Rudolf Virchow in a-historical terms as a “progressive”. McNeely in his succinct and carefully presented account wisely cautions against this. He depicts Virchow as a liberal social scientist, and explores the medical reform movement, the issue of canalization of Berlin, and Virchow as a parliamentarian. We see Virchow intent on emancipating medicine from an increasingly complex state, although here an important issue is how academics and medically qualified professionals found a niche within the state. This is a pithy and lucidly written account, and the author has made a serious effort to interpret the political significance of the medical reform movement.

What we have is a useful updating of Ackerknecht’s 1953 biography (the transition from the author of the 1932 paper to the Cold War imprinted biography would itself merit a full-scale biography). Yet there are some darker sides meriting analysis, which detract from Virchow’s progressivism. Robert Remak (not mentioned in the index, but appearing on page 22) merits significance in terms of his scientific rivalry with Virchow, and neither Remak’s champion Bruno Kisch nor Hans-Peter Schmiedebach figure. Nor is an effort made to explore the political implications of Virchow’s anthropology. Here, I recommend Constantin Goschler’s definitive biography of Virchow. McNeely reaches the somewhat paradoxical conclusion that Virchow was elitist but anti-authoritarian.

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Charles M Good, *The steamer parish: the rise and fall of missionary medicine on an African frontier*, University of Chicago Press, 2004, pp. xx, 487, illus., \$30.00, £21.00 (paperback 0-226-30282-2)

The portrait offered by Charles Good of the fates of the *S.S. Chauncy Maples* and the *S.S. Charles Janson*, wood-burning steamers upon which were built the fortunes of the Universities Mission to Central Africa (UMCA) in the Diocese of Nyasaland, exemplifies many

of the contradictions of European colonialism in nineteenth- and twentieth-century Africa. Focusing on the socio-spatial ramifications of a novel transport technology, Good’s elegant presentation unearths the tatters and the self-proclaimed glories of empire from the service history of a now-dilapidated hulk. Generously embracing both the poignancy of an ill-starred enterprise, and the blinkered obstinacy contributing to its eventual obsolescence, Good elaborates a thematic agenda no historian of medical mission can well ignore.

At first glance, it may seem strange that a work devoting so much space and energy to the vicissitudes of mission transportation on Lake Malawi could purport to be a history of missionary medicine. However, in rapidly asserting that the history of medical mission is not primarily “about” medicine, and in contextualizing his presentation by means of a carefully reasoned depiction of missionary penetration with regard to local political economies, lacustrine ecology, and African philosophies of health and illness, Good obviates the need to ground his enquiries with respect to an epidemiological “baseline”. Though he covers such material extensively as his argument develops, it is the attuned sensitivity to place which gives this work its distinctive character.

In considering the effects of social, economic, political and technical processes on populations and communities across Africa, historians have tended to assume that such processes act more or less equally across a given territory or selected area of analysis. The salience of these disciplinary habits emerge more clearly when contrasted with the concerns of geographers. Good makes explicit the links between the cost of maintaining a steamer and its drain on a poorly-resourced mission, the resulting need to use such a technological resource efficiently and effectively, the impact of local provisioning, site security (in the context of ongoing slave-raiding), and mooring on the development of the mission field, and the ramifications of technology for the politics of race, employment, education and medicine. Consequently, the exigencies driving medical mission, and the practicalities relegating it among the overall concerns of evangelists