



from imperial and colonial archives, very often those of the intelligence and security services. The subjects of the princely states are only cursorily dealt with or ignored entirely. *Conquering the Maharajas* is essentially a work of imperial history, although neither the introduction nor the three chapters on paramountcy, federation, and interwar constitutional debates account for the major relevant works of imperial historiography (e.g., by Arthur Berriedale Keith, Reginald Coupland, or R.J. Moore). There is very little at all in the first five chapters of the book that has not already been examined, and to greater effect, by the standard-bearing books on the princely states by Ian Copland or Barbara Ramusack.

The last four chapters of the book consist of case studies of the four princely states that were sites of some sort of violent confrontation after 1947: Jammu and Kashmir, Hyderabad, Junagadh, and Kalat. Of the more than 560 princely states, most acceded to India or Pakistan without much violence. The decision to focus on the exceptional cases is left unexplained, nor do we learn much about why these cases turned out to be exceptional. The first five chapters of the book that provide the historical context do not focus on these four states. The chapter on Hyderabad begins with some general observations about the state prior to 1947, but mostly we are told (once again) about fruitless negotiations, an “intractable” Nizam who came under the sway of the Muslim “fanatics” of the Ittehad-ul-Muslimeen, “Razakar atrocities,” and a deterioration of “law and order” that necessitated military intervention by the Government of India. The chapter ignores recent scholarship by A.G. Noorani (and others), while also uncritically reproducing the official version of events. This is old wine in a new bottle. In any event, it tells us little about the “clashing ideas of sovereignty” and the other themes proposed in the introduction. We are told, for example, that Pingle Venkat Rama Reddy, Hyderabad’s Deputy Prime Minister and a participant in important constitutional negotiations, was, according to one British lawyer, “a bag of lard incapable of understanding or speaking English” (157). What we are not told is Reddy’s “perspective” nor are we given an analysis of his ideas relating to sovereignty in late colonial India.

That *Conquering the Maharajas* consists largely of the curation of content in search of an argument may help to explain why the book struggles to meet the standards expected of peer-reviewed scholarship. Many paragraphs throughout the book lack citations where one would normally expect to find them. More care could have also been taken to ensure the originality of language and to engage with the extant scholarship in good faith. Ultimately, *Conquering the Maharajas* misses the opportunity to meaningfully contribute to our understanding of an important topic in the history of modern South Asia.

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## **Agnes Arnold-Forster. *Cold, Hard Steel: The Myth of the Modern Surgeon***

**Manchester: Manchester University Press, 2023. Pp. 296. \$36.95 (cloth).**

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In 1954 the British public flocked to cinemas to see *Doctor in the House*, an adaptation of the popular novel of the same name authored by doctor-turned writer Richard Gordon.

Ostensibly following the travails of young medical student Simon Sparrow, the undeniable star of the film is the towering figure of Sir Lancelot Spratt, the swaggering, bombastic chief surgeon, whose fearsome demeanor toward patients and students alike strikes terror across the hospital.

The huge success at the box office of *Doctor in House* is of little surprise when one considers the appeal—both then and now—of looking “behind the curtain into an otherwise closed and restricted world” (242). Enveloped within the confines of the operating theater, where patients are usually in a state of blissful anesthetic sleep, surgery can feel like a distant realm to us mere mortals. As Agnes Arnold-Forster makes a strong case for in *Cold, Hard Steel: The Myth of the Modern Surgeon*, the figure of the surgeon is steeped in mythology. Their experiences and their cultural representation cannot be separated, each informing one other.

Indeed, it is important to note that it is the surgeon, rather than surgery that Arnold-Forster has under scrutiny here. As she sets out in chapter 1, surgeons have form in creating their own mythology. History has proved a flexible tool for multiple generations of surgeons, keen to perpetuate the idea that their own era has progressed from the former. For surgery, perhaps more than other medical disciplines, history has assumed central importance to their identity, tainted as it is with long-held stereotypes about their thirst for large and bloody operations, and a seeming lack of compassion for the patients they encounter on the operating table. These stereotypes of course belie a much more complex relationship between surgery and feeling; surgeons have in fact long spoken openly about the emotional ramifications of their challenging work.

Arnold-Forster’s intervention to this literature is twofold: first, she expands the spectrum of emotions that come under historical scrutiny. As she puts it, “I thought I was going to be investigating the past and present of compassion, sympathy, anxiety, doubt and grief” (12). Instead, the author’s oral history interviews with surgeons both retired and in practice reveal a preoccupation with a less studied, emotional landscape “of professional identity, problematic colleagues and paperwork” (12). Arnold-Forster’s deft investigation into these everyday emotional experiences of surgeons leads to a second critical intervention—a robust contextualization of postwar British surgery and the effect of changing political and organizational structures upon surgical identity. Merging sociological and historical approaches, Arnold-Forster finds a culture of surgery that has fostered exclusion; where tropes of masculinity, militarism, and elitism have helped surgery retain its powerful status while preventing many from finding a place in the profession. The statistics on the contemporary surgical workforce make for depressing reading. Just thirteen percent of surgical consultants are women, while statistics about the ethnic make-up of the surgical workforce are not even known. As Arnold-Forster argues, this suggests “that the racial and ethnic diversity of the surgical workforce has never been a top priority for the profession’s leadership” (149). For both women and racially minoritized people, informal old boys networks, lack of mentorship from senior staff, and discriminatory patients have caused real damage to the profession’s ability to form a demographic that reflects the patient populace.

This leads to the penultimate and perhaps most fascinating chapter of the book that delves into the concept of surgical time. Working hours are curiously under-researched in the history of medicine, but, as Arnold-Forster contends, they have been a critical aspect to surgical identity. The ideal of a selfless surgeon who could be called upon at all hours to operate was a stereotype long maintained, and to an extent, encouraged by the surgical profession, bathing in the cultural capital that the vocational ideal of surgery brought. But by the latter decades of the century the excessive working hours of surgeons were under question. The implementation of the European Working Time Directive in 1998 slowly phased in a forty-eight-hour limit on doctors’ working week and signaled the slow decline of a normative culture of days-long shifts among junior surgeons. The surgical firm—a tight-knit unit of clinicians, led by one or two permanent members of medical staff—to which junior doctors would temporarily be attached began to disappear. The cut in working hours as well as the shift away from onsite accommodation gave surgeons greater freedom

in their personal lives. However, from the perspective of some of Arnold-Forster's interviewees it has also led to a lack of continuity in patient care.

This is an exhaustive and elegantly penned account of postwar surgery. It does have its minor issues. For example, the media controversies over heart transplants in the 1960s feel like a curious omission from the chapter on surgery and films, fiction, and TV. As historians such as Ayesha Nathoo and Kelly Loughlin have shown, the introduction of heart transplants had a huge influence on popular understandings of surgeons in Britain, and it would have been interesting to see more on the porous boundaries between fictional and non-fictional media accounts of surgery. I was also left pondering, at times, how vast the differences in surgeons' and physicians' experiences really were and in what ways their postwar histories have in fact reflected one another's. Nonetheless, this is a welcome and significant contribution to both the history of surgery and the history of the National Health Service, which will undoubtedly be of interest to a wide audience.

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## **Callum G. Brown, David Nash and Charlie Lynch. *The Humanist Movement in Modern Britain: A History of Ethicists, Rationalists and Humanists***

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Callum G. Brown, David Nash, and Charlie Lynch's *The Humanist Movement in Modern Britain: A History of Ethicists, Rationalists and Humanists* charts the organizational and ideological history of the humanist movement in Britain. The work is technically a retrospective history of the organization Humanists UK, formerly the British Humanist Association. But it is also a history of how British society has been transformed over the twentieth century from a dominant Christian society to one that is increasingly nonreligious and indeed humanist.

Despite the relatively small membership numbers for much of the twentieth century—hovering around a peak of 5,000–6,000 until the twenty-first century, when the membership ballooned to around 100,000—the authors argue that the movement has punched above its weight. Humanist values that were considered radical in the past “now in the 2020s have become in many regards the ethical values of British society” (xi). As the authors note, the study of atheism and humanism is an emerging field, particularly in the past decade or so. But in Britain, most of the literature focuses on the nineteenth century. What was missing, then, and what the book contributes, is a unified history of the humanist movement since the end of the nineteenth century. Their work differs from others which are written by major figures within the movement itself, or ones which chart only the philosophical history of ideas behind humanism.

The book traces the gradual transition from the ethical movement in the late nineteenth century to humanism by the middle of the twentieth century. But the distinction is not as stark or as simple as it would appear. The authors do a good job of bringing out the complexities, and even note how people in the mid-century grappled with what precisely