



# Gazette

NEWS

### BARGAINS

Society members will be able to enjoy major discounts on two of our products in the coming months. Oxford University Press failed to implement the increase in the Journal subscription announced in the last issue of the Gazette, so the subscription for 1992 will remain unchanged at £16.00 in Britain and Europe, and \$28.00 elsewhere. Routledge have also agreed to a reduction of £10.00 for Society members on the price of the first two volumes in the Society monographs series - Medicine and Charity before the Welfare State and Life, Death and the Elderly. These are now available at £35.00 each. Full details are given in the Gazette's first colour supplement.

#### Society President 1992 - Andrew Scull

We are pleased to announce that the President in 1992 will be Professor Andrew Scull. Professor Scull will be giving his Presidential Address at our summer conference on Caring and Communities Conference in Oxford next July. See page 3 for further details.

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All correspondence about the content and circulation of the Gazette should be sent to the editor, Michael Worboys, Department of Historical and Critical Studies, Sheffield City Polytechnic, Psalter Lane, Sheffield, S11 8UZ, Great Britain. Telephone 0742 532686 or 532685. FAX 0742 532603.

DISCLAIMER It is stressed that any views expressed in this Gazette are those of the Editor or the named contributor; they are not necessarily those of the Executive Committee or general membership. While every care is taken to provide accurate and helpful information in this Gazette, the Society for the Social History of Medicine, the Chair of its Executive Committee and the Editor of the Gazette accept no responsibility for omissions or errors or their subsequent effects. Readers are expected to check all essential information appropriate to specific circumstances.

## Social History of Medicine

The new Book Reviews Editor will be Dr Greta Jones, New University of Ulster. Dr Jones has published widely in the history of science and medicine, especially on the history of eugenics. She is currently working on the history of tuberculosis in Northern Ireland.

## The Centre for Medical Science and History

The new Centre for Medical Science and History represents a major initiative on the part of the Wellcome Trust aimed at stimulating public interest in the biomedical sciences and the history of medicine. The Centre will be located in the Wellcome Building, 183 Euston Road, London NW1, together with the offices of the Trust and the Wellcome Institute for the History of Medicine. The Centre which is due to open in the Spring of 1992 will offer a wide range of facilities including: a permanent exhibition on modern medical science, information services, a scientific meetings programme, collections of videodisc, a photographic service and history of medicine exhibitions. The work of the Institute for the History of Medicine and the Library will be reunited in the new facilities. The Director of the Centre is Dr L.H. Smaje and further information can be obtained from the Centre Manager, Mr S.E. Emberton, Wellcome Trust, 179 Great Portland Street, London, W1N 5TB.

## The European Association for the History of Medicine and Health

The European Association for the History of Medicine and Health (EAHIMH) held its inaugural meeting on September 26 1991 in Strasbourg. The Association will hold a Congress every two years, and will also endeavour to set up various networks of interest groups to disseminate information and news. The first Congress will be in Göttingen in September 1993. Membership of the Association is not confined to scholars living or working in Europe. The annual subscription in 1992 will be 150 FF. Members will receive an annual newsletter as well as the Congress proceedings and other publications at reduced rates. Enquiries about membership should be made to the Officers or members of the Scientific Board, which includes our Chair - John Woodward. President: Prof U. Tröhler (Göttingen); Secretary and Treasurer: Prof C. Debru (Strasbourg); Scientific Board: Chair - J. Woodward (Sheffield); B. Fantini (Geneva and Naples); J. Geyer-Kordesch (Glasgow); R. Jütte (Stuttgart); E. Seidler (Freiberg i.Br.) and J. Sundin (Linköping).



## FORTHCOMING EVENTS

The information given below is accurate as far as we know. However, we accept no responsibility for errors. Please contact the organiser to confirm details. Notice of events, not only conferences and meetings, for inclusion in this section should be sent to the Editor. We reserve the right to edit and select items for inclusion.

## Society for the Social History of Medicine.

Spring Conference 1992  
Joint SSHM-British Society for the History of Science  
Popular Science and Medicine since 1700  
28 March 1992, Manchester

Themes will include the following: processes of popularisation; the construction of popular discourses; the role of publishing. See separate details with this mailing. Further details from: Dr S. Sturdy, Wellcome Unit for the History of Medicine, Maths Tower, University of Manchester, Manchester, M13 9PL, or Dr S. Pumfrey, Department of History, University of Lancaster, Bailrigg, Lancaster.

Annual Summer Conference 1992  
Communities, "Caring" and Institutions  
3-5 July 1992, St. Edmund Hall and All Souls College, Oxford. Speakers include: Andrew Scull, Ann Crowther, Anne Digby, Jane Lewis, Sandra Cavallo, Marjorie McIntosh, Anne Borsay, Marguerie Dupree, Julia Twigg, Lara Marks, Sandra Burman, Peregrine Horden and Hugh Freeman. Postgraduate sessions on the conference themes will include papers by: David Wright, John Murray, Peter Bartlett, Mathew Thomson, Akihito Suzuki and Mary Clare Martin. The conference charge for full board (two nights, two lunches and two dinners) will be £80. The registration fee has yet to be determined. Details from: Dr Richard Smith, Wellcome Unit for the History of Medicine, 45-47 Banbury Road, Oxford, OX2 6PE.

Autumn Conference 1992  
Mental Deficiency in the nineteenth and twentieth centuries  
Call for papers.  
Contact: Dr Anne Digby, Department of Humanities, Oxford Polytechnic, Gypsy Lane, Oxford, OX3 0DB or David Wright, Linacre College, Oxford.

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## Other Meetings

Innovation in medicine: historical and sociological aspects  
21-23 April 1992, Paris.

Papers on the status of innovation in medicine, the birth of new medical disciplines and specialties, the construction of new conceptual objects by physicians, the transformation of medical practices, and the cultural aspects of innovations. Further details: Dr Ilana Löwy, U-158 INSERM, Hôpital des Enfants Malades, 149 rue de Sèvres, 75743 Paris Cedex 15, France. FAX 33-1-40 56 98

American Association for the History of Medicine: Annual Meeting

30 April- 2 May 1992, Seattle, Washington.  
Any person interested in presenting a paper at this meeting is invited to submit an abstract (one original and six copies) to Dr Steven J Peitzman, Medical College of Pennsylvania, 3300 Henry Avenue, Philadelphia, PA 19129

Recent Historical Perspectives on Tropical and Colonial Medicine

September 1992, Francis C Wood Institute for the History of Medicine, College of Physicians, Philadelphia.  
Details from: Dr Warwick Anderson or Dr Caroline Hannaway, Francis C Wood Institute for the History of Medicine, College of Physicians of Philadelphia. 19 South 22nd Street, Philadelphia, PA 19103.

Wellcome Institute for the History of Medicine

Symposia 1991-2  
10 January 1992, History of Medical Education in Britain, 1200-1800  
10-11 April 1992, J.B.S. Haldane - Centenary Conference  
24 April 1992, History of Medical Education in Britain, 1800-the present.  
4 July 1992, History of Microcirculation

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New perspectives on the social history of medicine

Doctors often used to wear bloodstained coats to show how successful they were, until Lister came along who used chlorophorm dressings and sprayed the room with chlorophorm mist.

... the population was increasing, and a middle class was emerging demanding gentile doctors.

Blood-letting via leeches, and sometimes lances, ... was a common way of ridding the body of poison.

... Claude Bernard tried mixtures of drugs.

The Napoleonic wars were underway, and in the north of England the cotton mills and heavy industry starting to boom, spreading like wildfire the new industrial revolution, with all its associated problems of urbanism, and strengthening of the class system. The medical profession was also in a bit of a mess.

Membership of the Society for the Social History of Medicine includes a subscription to the journal and is paid through: Journals Marketing Department, Oxford University Press, Pinkhill House, Southfield Road, Eynsham, Oxford, OX8 1JJ. The subscription in 1992 is £16 (UK and Europe) and \$28 elsewhere. Details of membership and of the Society's activities are available from the Chair.(See address opposite)

RESEARCH IN PROGRESS

Fantasy and Surgery after Lister, 1880-1930

I am researching the development of surgery on theoretical rather than practical grounds, e.g. removal of ovaries for hysteria in women, removal of sections of the large gut for autointoxication and removal of teeth, tonsils, etc. on the grounds that they were the sources of focal sepsis.  
Dr Ann Dally, 13 Devonshire Place, London, W1N 1PB

Biography of Sir Ronald Ross (1857-1932)

Together with Professor E.R. Nye (University of Otago), I am researching a biography of Sir Ronald Ross, the first Briton to be awarded a Nobel Prize for medicine. Previous biographies have concentrated on his malaria work, but he also made considerable contributions to the study of epidemiology and the development of sanitary methods of disease control. Mary E. Gibson, Library, London School of Hygiene and Tropical Medicine, Keppel Street, London, WC1E 7HT

Philippe Pinel and the Rise of a Humane Public Medicine during the French Revolution and under Napoleon

This project will explore the rise of the psychiatric specialty within medicine, particularly in France. The late Enlightenment, Revolution and Napoleonic era will provide political, social and intellectual context but the main issues to be discussed will derive from the personality and career of Philippe Pinel. As physician-in-chief of the Salpêtrière and professor at the Medical Faculty for thirty years and a member of the Academy of Sciences for twenty five, Pinel must have had an enormous correspondence. Yet we have almost no letters and very few other manuscript documents. I would be grateful for information about such correspondence which, I imagine, reached far and wide in the Western world.  
Dora B. Weiner, Prof. of Medical Humanities, 12-138 C.H.S., UCLA, Los Angeles, CA 90024, USA.

Executive Committee 1991

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## QUERIES, REQUESTS AND INFORMATION

Still no items have been submitted for this section. I remain convinced that some such service could be valuable to members, but if nothing comes in for issue 4 (April 1992) this will be the last you see of QUERIES, REQUESTS AND INFORMATION.

## CONFERENCE REPORTS

### FAMINE AND DISEASE

SSHM Annual Summer Conference held at Cambridge, 5-7 July 1991

Around 120 people attended, they heard excellent papers and participated in lively discussions, making this one of the largest and most successful conferences SSHM has organised. A report will follow in the April 1992 edition of the Gazette. The Society would like to thank John Henderson and Peter Garnsey for all their work in making this such a effective conference.

### ETHNICITY, RELIGION AND THE HISTORY OF HEALTH CARE PROVISION

SSHM Autumn Conference held at PCL London, 12 October 1991

As John Eade aptly remarked in his summing up, anthropology offers several approaches to the concept of ethnicity; the conference was actually about varying 'ethnicities' but these were scarcely discussed in the papers. If there was an underlying theme running through the day, it was class and colonialism. But ethnicity and religion were used obliquely to shift the focus from socio-economic factors determining health towards cultural factors. A summary of the papers may illustrate this trend.

Mark Harrison's analysis of the medical politics of pilgrimage in India in the last third of the nineteenth century showed the complexities of the interface between British and Indian (colonial) governments. The Indian government was open to pressures from the Muslim community to enable mass pilgrimage to Mecca to proceed with minimum interference, while Britain conferring with other European powers sought firmer sanitary regulation of pilgrim ships, and at times quarantine, to control the spread of cholera.

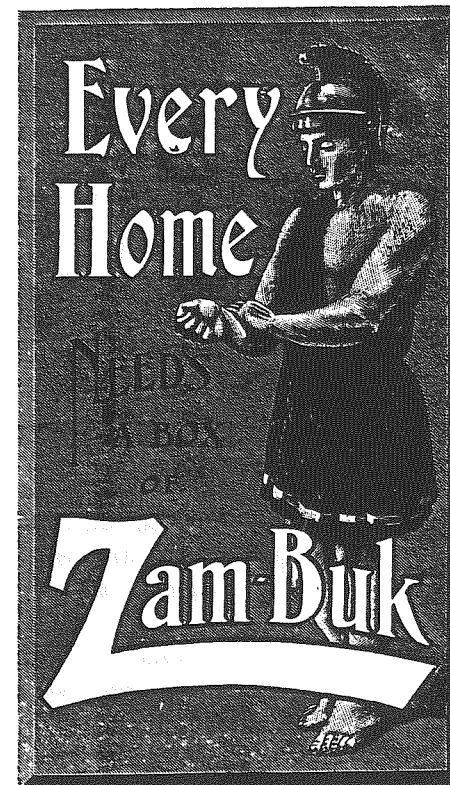
Karen Jochelson contrasted different medical contributions to debates in South Africa in the 1930s and 1940s over the corrupting effects of city life on Africans from rural areas, particularly the spread of sexually transmitted diseases. Some doctors favoured a 'detrribalisation' thesis, seeing Africans taken out of their 'natural' setting as vulnerable to disease, while those with an 'environmental' explanation

looked to slum conditions and family instability in the cities, factors which also affected the poor whites. While these explanations could apply to other diseases like tuberculosis, the focus of sexually transmitted diseases sharpened debates over 'tribal' morality. The effects of the migrant labour system and urbanisation could be lifted from the realm of economic relations into that of morality, with a medical gloss.

Gerry Black told a story, a cliff-hanger about the efforts of a poor Jewish barber to create a London Jewish Hospital where patients would feel completely at home with their dietary and hygienic practices, prayers and language. Wealthy Jews, led by the powerful Lord Rothschild, opposed the movement on the grounds that existing provision for the immigrant community in the East End was more than adequate; their agenda was integration, even assimilation. Isaac Berliner persisted, and between 1907 and 1919, with the support of the poor but numerous, and the Jewish Chronicle, succeeded in launching the London Jewish Hospital, whereupon Lord Rothschild presided over a subscription dinner and opened his purse at last. This was narrative history at its gripping best.

Lara Marks also looked at the London Jewish community, in a double act with Lisa Hilder who is studying Bangladeshi immigrant health. The two groups, separate in time, overlap closely in concentrated areas of settlement in east London, notably Tower Hamlets and both also have lower than average infant mortality rates. The joint paper sought explanations which took into account any points in common while allowing for historical and structural differences. Cultural rituals and prohibitions, the strength of marriage and kinship, restrictions on alcohol and smoking, and perhaps even social welfare programmes, gave the immigrant ethnic groups compared to their neighbours.

The remaining two papers were on contemporary issues. Liam Greenslade spoke on the culture of madness, applying Fanon's thesis on the depersonalisation effects of colonialism to the high rates of mental illness among the Irish in Britain (as well as in Ireland). Irish immigrants tend to suffer a



disjuncture between their experience and their means of expression, it was argued, leading to alienation and madness. A problem highlighted in discussion following this paper was that of definition: how are the mad defined? Uptake of services alone is presumably an ideologically biased measure, by Fanon's or anyone else's book.

Ian Jones returned us to Tower Hamlets, for a look at Somali refugees and the 'New Public Health', which aims to give a voice to those seeking health provision rather than allowing the medical definition of a problematic health status to predominate. This approach found health was not to of refugees' agenda; they wanted better housing, employment and education opportunities, and access to welfare rights, and resented too much emphasis on disease.

Every group during the conference was distinguished by its mobility. Pilgrims, migrant workers, immigrants or refugees; how much had their ethnic and religious distinctiveness to do with their group mobility? It would be interesting to look at ethnicity, religion and health among stable ethnic groups like the Hausa in West Africa, or the Jewish communities throughout the diaspora. But you can't fit everything into one day and the select group who attended must thank the organisers and speakers for high standard, provocative papers.

Jenny Beinart  
Wellcome Unit for the History of Medicine, Oxford  
London School of Hygiene and Tropical Medicine

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