Human Frontiers, Environments and Disease: Past Patterns, Uncertain Futures
Tony McMichael

The growing public protests that have been punctuating G8 and World Trade Organization meetings remind us that the globalisation of trade and finance is giving rise to ever greater social and economic disparities. There are other challenges associated with ongoing global change. Health inequalities across a wide range of diseases, risks, and consequences suggest cultural, economic, and political causes. There is also an emerging pattern of health associated with the permeability of national borders to old and new infectious threats; to violence and substance abuse; to the growing prominence of chronic diseases; and to environmental hazards. Disparities in health between social groups exist in all cultures, but are not inevitable. These inequities can be challenged with purposeful public policy.

The combination of infection, malnutrition, and population pressure has sapped the vitality of communities for generations. New problems are being added constantly. Industrial development, often without restraining regulations, is causing environmental damage and disease; some of the worst health dangers of the industrialised world, such as cigarette smoking and traffic injury, are becoming increasingly common. Fortunately both political and industrial leaders are beginning to accept the concept of global interdependence. They are recognising that the action of groups, communities, and nations in one part of the world affect those living at a distance and react ultimately on all of us.

McMichael has produced an excellent treatise on these changing patterns of human ecology and disease. He steps back successfully from the more biographical accounts of disease risk to which we have been exposed in recent times and concentrates on cultural, evolutionary, and historical influences. Cogently he advocates for man not to try to reverse the clock—all of Earth’s ecosystems being already under human domination—but instead to reduce “the size of our collective ecological footprint.” He reminds us forcefully that time is relatively short to seek sustainable ways of living. The issues are complex, communities resist change, and politicians have short-term goals. If we are to stem the tide of inequity, we need dynamic international leaders to make concerted efforts. These prominent individuals and their advisers should use McMichael’s analysis to inform their actions.

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Bodies Politic: Disease, Death and Doctors in Britain, 1650-1900
Roy Porter

This book comes well announced: “... splendid book ... a tonic to those dismayed by the current writing-down of English history” (Sunday Telegraph); “... exhilarating” (Sunday Times); “simply superb” (New Statesman). This should be enough not only to whet the reviewer’s appetite but also to bias opinion. And yet my reaction at the end of an enjoyable read is one of disappointment, disappointment that a magnificent opportunity to do justice to an immense and unique labour of historiography has been squandered. Let me explain.

Roy Porter’s purpose in Bodies Politic is to rescue imagery from obscurity and academic derision, and to integrate it with the traditional way of portraying history in writing. He rightly sees the microcosm of medicine as “a costume drama or a travelling circus, embodied in performance, rhetoric, and ritual history,” which is therefore ideally suited to the application of an added dimension, namely the pictorial medium.

On one front he succeeds, but his publisher fails him, and fails him badly. In a book that espouses imagery, presentation, design, and reproduction of the chosen imagery are paramount, and this book fails in all of these and does the author a grave disservice. Bodies Politic, by the author’s own admission, purports to be a “coffee table” book, yet it lacks all the merits of that often decrepit species. It is too small to allow for illustrative display, the design is awful, the pictures are badly reproduced (especially the black and white illustrations), the colour illustrations are grouped in sections so that the reader is forced to flick forward or back to find them, and when they are located the print size of the captions is so small as to be painful to read.

Leaving aside these criticisms, the text is indeed a rollicking jaunt through a quarter century of English medical history. The extent of Porter’s research is truly vast, and yet he manages to assemble his material in an erudite and readable style full of surprises and not infrequent gems. For example, when John Radcliffe, who often assumed an anti-intellectual pose, even going so far as to claim he had never read Hippocrates, bequeathed his library to Oxford, Samuel Garth quipped that “it was a bit like a eunuch founding a seraglio.” The social attitudes of the times are joyously put in perspective (and not so joyously illustrated) from Swift’s derision of the aging troilp, to James Graham’s exhortation that “the genitals are the true pulse, and infallible barometer of health,” and onwards to the Victorian era and the likely of Lancer founder Thomas Wakley, whose contribution to progress, in Porter’s view, was his recognition that the sorry state of medicine was attributable to it being “a house divided against itself.”

Bodies Politic is both a failure and a success. One hopes that the book can be published again doing justice to the illustrative material.

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