

situated within the Russian language materials – both contemporary and modern – and contributes to a growing literature on the ways in which Soviet policies compare to those of Europe and to pre-revolutionary Russia (many of these works also authored by graduates of Columbia's prolific and influential programme). Specialists in the history of suicide, psychology, sociology, or forensic medicine will find much of comparative interest in the history of these fields in the exotic, contested, and politically charged terrain of revolutionary and Stalinist Russia.

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Marcel H. Bickel (ed.), *Henry E. Sigerist: Correspondences with Welch, Cushing, Garrison, and Ackerknecht* (Bern: Peter Lang, 2010) pp. 488, £57.40, paperback, ISBN: 978-3-0343-0320-0.

In 1932, Henry Sigerist (1891–1957) took up the position of chair and head of the brand new Institute for the History of Medicine at Johns Hopkins University, Baltimore. The University's medical school glittered with past and present clinicians – William Osler, Harvey Cushing – and Sigerist and his circle were to bring to Maryland equal lustre to their chosen subject. To this day in the United States Sigerist's name illuminates the study of the history of medicine and, to a lesser degree, this is true of Britain, other English-speaking countries, then Germany, and finally anywhere where the discipline has practitioners. This may seem an unnecessary prologue to a review in a specialist journal but, conceivably, new readers and students on the margins may not have encountered his presence. The concerns of Sigerist and his cohort still reverberate: ambivalence towards doctors; within which faculty should history of medicine be sited in a university?; is the subject humanities or social science?; what is its relationship to the history of science?

Sigerist was a prolific letter-writer and recipient of mail from all over the world. The present volume reveals but one part of that postbag. His correspondence contains not only quotidian concerns, but also shows the deep structures being put in place as a discipline was shaped. The letters to the pathologist William Welch, the neurosurgeon Harvey Cushing, and the military officer and librarian Fielding H. Garrison are, for the most part, centred on organisational matters – Sigerist taking up the Hopkins chair, conference arranging – and rarely revealing much of contemporary events, although in 1932 Cushing presciently observed, the 'whole Orient seems to have gone mad, and the Hawaiian Islands are near enough to feel the general uneasiness' (p. 53). There is barely anything by way of tittle-tattle, indeed the formality of tone is striking – no first names, 'Dear Sigerist', Cushing writes after Sigerist had stayed at the surgeon's home 'I sincerely hope that both Mrs Cushing and I will have an opportunity to meet [Mrs Sigerist]' (p. 53).

On the other hand, the letters to and from Erwin Ackerknecht are eventually (especially on the latter's side) personal and richly revelatory of the medical historical culture of the 1940s and 50s. Ackerknecht was born in Szczecin – then in Germany, now in Poland – in 1906, and was a student of Sigerist's in Leipzig where he wrote a thesis (1932). A medical doctor he studied anthropology in France and left for the United States in 1941. Forthright in opinion, a polymath, polyglot and voracious reader, Ackerknecht finally gained a position at Wisconsin, but in the 1950s took up a permanent post in Zurich. His anthropological training left an intriguing hint of the cultural relativism of the 1920s in his medical historical writing. Many of his letters to Sigerist are laments about his cultural isolation and his love of Europe.

The self-exiled and then communist Ackerknecht's first few letters (in German) are from Paris before the war. By 1939, he was increasingly desperate to escape France. After internment and various adventures, he reached

Baltimore, and so letter writing ceases for three years as he and Sigerist were side-by-side. After this, the correspondence is sometimes quite spicy, although this reader longs to know what is in the protected information censored in the letters as [XXX]. Various lasting and ephemeral historians of medicine pop in and out: Gregory Zilboorg, Owsei Temkin, George Rosen, Victor Robinson, Richard Shryock, for example. Various German authors are identified by Ackerknecht as former Nazi sympathisers. Much light is shed on publishing medical history in these years. Apart from a slightly inconsistent and, for me at times, insufficiently informative footnoting, this volume is a most-welcome, carefully edited, searchlight on a discipline, and indeed a much wider world.

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Isabel Gillard, *Circe's Island: A Young Woman's Memories of Tuberculosis Treatment in the 1950s* (Glasgow: Unbound Press, 2010), pp. 140, £7.99, paperback, ISBN: 978-0-9558360-5-3.

Isabel Gillard was twenty and a literature student at Edinburgh University when, in 1950, she was hospitalised for over a year in the city's Royal Victoria Hospital for Tuberculosis. This is her personal recollection of that time which she describes as 'a determined hanging on, a waiting for an upturn in fortune.'

By the early 1950s, tuberculosis in the Western world was theoretically coming under control. Drug treatments such as streptomycin, PAS (para-aminosalicylic acid), and isoniazid were widely available, although TB specialists were slow to relinquish the unpleasant 'technical' procedures that kept patients incarcerated in sanatoria and specialist hospitals – artificial pneumothorax, phrenic nerve crush, lobectomy, and thoracoplasty; 'in the case of thoracoplasty operations, a general

anaesthetic was not always suitable and this meant that the still-conscious patient could hear pieces of his or her own ribs being thrown into an enamel bucket under the operating table' (p. 60). Like many people with tuberculosis, Isabel experienced extremes of kindness and cruelty in an environment designed to bully patients into obedience and acceptance of a restricted life beyond the sanatorium walls. To this end, a certain Dr E was fond of telling the young girls that although they might look like rosy apples on the outside they were, nevertheless, rotten to the core. It is fortunate that youth is invariably optimistic, but from my own work with TB survivors, the wounded carry these poisoned barbs like shrapnel, into old age.

This, then, is a multi-layered tale set in a marginalised community – a tale of personalities; friends made and lost; freezing, snow-covered beds in the name of 'fresh air' treatment; balmy nights in three-sided wooden chalets under September stars; eggs boiled in jugs beneath running bath water; separation from lovers and children; interrupted education; tears, fears, pain and the inevitable merry-go-round of emotions associated with check-ups, X-rays, blood tests and bronchoscopies. Isabel and her ward companions were undoubtedly luckier than most British sanatorium patients in being confined in the Royal Victoria Hospital, a pioneering institution founded at the turn of the twentieth century by Sir Robert Philip (1857–1939) who was studying in Koch's Vienna laboratory at the time the TB bacillus was discovered. The 'Edinburgh System' was adopted by local authorities in the UK when, in 1911, they took over responsibility for the treatment of tuberculosis. But if some new treatment for TB appeared in the media, Philip (who became Professor of Tuberculosis at Edinburgh University in 1919) always claimed that he was already using it in Edinburgh. As Isabel was returning to her university studies, (Sir) John Crofton (1912–2009), who has written a foreword and appendix to this book, was succeeding to the Edinburgh chair of tuberculosis. It was Crofton and his colleagues