

## Book Reviews

Anyone seriously interested in history of medicine should buy this book. Those who teach the subject should have multiple copies for the many occasions when one cannot help students better than by referring them to the essays in this collection.

John V. Pickstone, Wellcome Unit for the History of Medicine, Manchester

MARGARET HUMPHREYS, *Yellow fever and the South*, Health and Medicine in American Society series, New Brunswick, NJ, Rutgers University Press, 1992, pp. x, 226, \$45.00 (0-8135-1820-2).

Histories of public health tend to avoid detailed analysis of the origins and context of public health reform, and histories of specific diseases often fail to see their subject in a wider economic and political setting. Margaret Humphreys' fascinating study of the impact of yellow fever on American's southern States between 1840 and 1905 amply demonstrates how such contextual frameworks enrich our understanding of historical processes. Most accounts of local yellow fever epidemics are of essentially local interest; but Humphreys explores the common experience of the South to show that the disease had a decisive influence on the development of both Southern and federal public health policy.

Three factors combined to turn yellow fever into a driving force for sanitary reform in the nineteenth-century South: the nature of the disease itself; the rise of a national business network; and federal designs on the autonomy of individual States.

Yellow fever is a highly virulent and singularly unpleasant disease. In the nineteenth-century South it occurred in frequent, seasonal, but unpredictable epidemics. Initially confined to the coastal cities, it demonstrated an unnerving ability to travel into their hinterlands once the railroads became established. Because it had a devastating effect on trade, local authorities and local businessmen initiated sanitary reforms with a view to reducing its impact. Because such measures involved several States, and the imposition of coastal quarantines affected international trade, the federal health authority (the Marine Hospital Service) was determined to wrest responsibility for yellow fever controls from the local health boards. The whole attention of southern public health effort after 1870 was focused on yellow fever, and when the disease disappeared after 1905, general public health provision in the South stood revealed as abysmal.

Humphreys is medically trained and has an evident professional interest in the structure and practice of public health, but she is also an able professional historian. *Yellow Fever and the South* is clearly written and cogently argued (though poorly edited), and is a rewarding read. It raises the local history of yellow fever well above the antiquarian level of the existing historiography, and offers stimulating perspectives into the relationships between disease and public health on the one hand, and political and economic history on the other.

Anne Hardy, Wellcome Institute

VIVIEN NG, *Madness in late imperial China: from illness to deviance*, Norman and London, University of Oklahoma Press, 1990, pp. xiv, 204, £19.95 (0-8061-2297-8).

In Chinese history madness has usually been considered a bodily illness or the result of possession by demons or the retribution for a sinful life. The usual reason seems to have been a disorder of the forces of yinyang and the five evolutive phases within the Chinese system of correspondence. As the material amassed in the imperial encyclopedia *Gujin tushu jicheng* (section *diankuang*) proves, already the medical classic *Huangdi neijing* distinguished between *dian* caused by an excess of yin and *kuang* brought about by an excess of yang; correspondingly *dian* is characterized by depression while *kuang* manifests itself by hyperactivity. The *Shanghan lun* recognizes cold as the source of many diseases including some forms of madness while Sun Simiao in his *Qianjin yaofang* notices wind as the cause. Later on we also find madness identified as a heat-induced disease. The usual treatments were herbal medicines or acupuncture, or both. There were also a number of rather unconventional treatments, especially when the cases were recognized as *qingzhi* (emotions)-