

Book Reviews

adventures in the South Seas as “Voyager, Monster-hunter and Amoroso”. Lyte makes the most of the comic possibilities of the pursuit of his hero by the voracious middle-aged queen Pura; nor does he forget his English mistress Miss B---n. As the subtitle suggests, Banks’s early travels loom much larger in this book than the long afternoon of correspondence and power as President of the Royal Society, and instigator of innumerable research and publishing projects. The story of the travels, and of Banks’s rows with the Admiralty and fellow-Academicians, is told with verve; it is spoilt only by the author’s irritating partiality for breathless one-sentence paragraphs.

There is not much point in complaining that this book is not the long-awaited treatment of Banks’s role as scientific entrepreneur and virtual monopolist, which is so urgently needed. Charles Lyte makes no claims to original research, and his select bibliography does not even include Warren Dawson’s massive calendar of Banks’s correspondence. The reason why we still wait for a comprehensive book on the panorama of Banks’s activities is not hard to find – the sale of the greater part of the Banks papers by Lord Brabourne in 1886 has condemned all subsequent researchers to tracking down letters in the custody of libraries and private owners on every continent. In the meantime, Charles Lyte’s book is to be welcomed, not least for its excellent colour plates.

Peter Jones
Department of Manuscripts
British Library

THOMAS E. CONE, jr., *History of American pediatrics*, Boston, Mass., Little, Brown, 1979, 4to, pp. xiv, 278, illus., \$18.95.

In the preface, Cone correctly states “there is no published comprehensive history of American pediatrics”. His book is, he explains, an attempt to fill this gap and must be appreciated as a first essay in this direction. Cone is to be thanked for assembling so much information in one place. The book provides a chronology of major technical advances in the practice of paediatrics, a Who’s Who in American paediatrics – replete with mug shots –, and several succinct lists detailing when major textbooks and speciality journals were published. Morbidity and mortality data on the major childhood diseases and conditions, and the treatments used throughout the centuries are also given. There is a great deal of emphasis on infant feeding practices; some of this material appeared earlier in Cone’s *200 years of feeding infants in America* (1976).

Although Cone’s “principal aim has been to write a history of American pediatrics”, he has “not written the book primarily for the specialist in medical history . . . rather for the medical practitioner, the medical student, and all others who may have an interest in the evolution of contemporary medical care of children”. This emphasis on physicians is reflected in the book; there is too much technical detail at the cost of historical analysis. By and large, Cone does not deal with the problems of paediatrics within a social, political, or economic context. The chapters on the Colonial period show the most historical perspective, reflected in the number of fine

Book Reviews

socio-historical and demographic studies noted in the references, including the work of Bremner, Demos, Greven, Handlin, and Vinovskis. The references for chapters 3 to 10 demonstrate the author's interest in technical developments and the lack of a historical framework. Indeed, I think it is fair to say that this book is basically a chronology of technical medical advances. It is not a book about the medical care of children within a changing historical context, nor does it deal with the professionalization process of a medical speciality.

A book which attempts to cover the history of American paediatrics must, of course, be selective. However, some omissions deserve to be mentioned. Dr. Annie Sturgis Daniel (1858–1944), of the New York Infirmity for Women and Children (established in 1857), gave reputedly the first course on the normal child (in the early 1890s) to the students of the Women's Medical College of the Infirmity (established 1865). More important, the complex relationship between the entrance of women into the medical profession, and the medical care of women and children certainly deserves some attention in any history of paediatrics. Perhaps, however, the most glaring omission is that "psychiatry" does not even appear in the subject index.

Cone writes that his second reason for writing this book is that it "may perhaps stimulate interest in the historical development of this branch of medicine". This motive is admirable, and perhaps now that we have a chronology of events, future research can be more analytic and historical.

Deborah Dwork
Wellcome Institute

PETER DAVIS, *The social context of dentistry*, London, Croom Helm, 1980, 8vo, pp. 189, £10.95.

Priority for prevention is the theme of this book. The author spent sabbatical leave in London from his post in the University of Auckland to study historical and sociological factors which have moulded the dental profession in its attitudes towards oral diseases. He starts from the premiss that both caries and periodontal disease can be controlled but that the effects of the latter cannot be repaired and so require "something more than the reparative and treatment philosophy that has been the hallmark of the orthodox approach to dental care". He points to the limited use which is made of dental auxiliaries in Europe where thirty per cent of the countries permit the use only of laboratory technicians and dental chairside assistants. Chapters on 'The emergence of organised dentistry' and 'The social organisation of dental care' give a clear account of the development of dentistry in the U.K. and the U.S.A. The new settler society of North America broke many of its ties with the Old World, and the profession of dentistry soon became autonomous and independent from medicine and surgery. In the U.K. dentistry gained a professional identity in the middle of the nineteenth century but did not become independent until the Dentists Act of 1958. By that time the National Health Service had been introduced, and the social forces acting on the dental professions in the U.K. and the U.S.A. were entirely different. The U.K. attempted to bring dentistry within reach of all classes, whereas in the U.S.A. the distribution of services was still related closely to social class and the