purpose: first, to come up with a united definition of psychiatry and its practices; second, to appraise British psychiatry and the role of the Maudsley as compared to its continental counterparts, notably the German model which was still a reference in the 1930s.

Both contributors display a genuine sense of history in their analysis of Lewis's report, and their comments open up a number of new perspectives. One of them is the dissemination of ideas and the constitution of networks of individuals as one means of power. This was achieved by way of comparative historical analysis, an approach which needs to be developed among historians of psychiatry and the value of which is plainly illuminated in this publication.

> Jean-Christophe Coffin, Centre Alexandre Koyré, (CNRS), Paris

Liborio Dibattista, Jean Martin Charcot e la lingua della neurologia, with CD ROM, Collana di storia della scienza, Bari, Cacucci, pp. 320, €28.00 (paperback 88-8422-256-7).

This work studies the birth of clinical neurology as a medical specialization in relation to Jean Martin Charcot (1825–93). Charcot is presented as the founder of French neurology, and not as the Charcot popularized for his work on hypnotism and hysteria—work which inspired and characterized even the literary fiction of his time. The study of the language used by Charcot holds a privileged place in Dibattista's book. Liborio Dibattista, a clinical pathologist with a second degree in philosophy and a PhD in history of science, aims—with the support of computational linguistics—to demonstrate how crucial Charcot's work was to the formation of neurology.

In particular, Dibattista analyses a technical and specific language in the neurological domain, using computational and linguistic tools applied to Charcot's *Oeuvres complètes*, (1873, 1877, 1887); G B A Duchenne de Boulogne's (1806–75), *L'électrisation localisée et de son application a la pathologie et à la thérapeutique* (1855), and Jules Dejerine's (1849–1917) *Sémiologie des affections du système nerveux* (1899). Dibattista uses INTEX, a software package produced by LADL (Laboratoire d'Automatique Documentaire et Linguistique) at the Université de Marne-la-Vallée. Most interesting is his analysis of "ambiguous terms" not recognized by INTEX. These lexical items are not acknowledged in the neurology specific lexicon, because they refer to certain syndromes and diseases later rejected by modern medicine. These terms can be presented as an example of "l'histoire périmée" of Charcot's work-as demonstrated by, for instance, the lifetime of attention he devoted to the ovaries doctrine, which is characterized by its rich linguistic vocabulary and then discarded by neurology. Despite the use of computational technologies, Dibattista's work is driven by a historian's approach rather than a lexicographer's. In fact, he pays particular attention to chronology and background, and provides a context of French neurology.

Dibattista's intention is to illustrate the value of a computational and linguistic approach for scientific "corpora" to show and study originality and linguistic "emergences" in relation to fundamental and conceptual "nuclei" in Charcot's work. However, by applying his medical knowledge rigorously to the history of medicine, Dibattista produces better results than by using computational linguistics. More interesting than his use of computational linguistics is, indeed, how he analyses the growth of Charcot's neurological studies-his method and the subsequent changes in the concepts of French clinical neurology. When Dibattista uses his medical background to clarify these changes in the history of medical ideas, we can appreciate his expert analysis. In this sense a computational linguistic approach is useful for Dibattista because he knows how to interpret data in a specialized medical language. In the case of this experimental and original book, technological tools tell us something about the history of medicine, because Dibattista makes them speak. At the end, technological devices are just an additional support for his studies and cannot be objective in the hands of any historian.

Book Reviews

Thus, Dibattista manages better in his analysis of how much Charcot's work was a determinant in the formation of a neurological taxonomy. The act of denomination—the creation of a concept—is the first and definitive operation of a science. Therefore, the study of the appearance and transformation of fundamental terms of a science is a major moment in its evolution. Without doubt, a history of medical ideas is the most fruitful approach for a historian trained firstly as a medical doctor. Dibattista astutely chose to privilege this stance rather than a biographical or sociological one, though all these approaches are used to some extent in this work.

> Chiara Beccalossi, Imperial College, London

John M S Pearce, *Fragments of neurological history*, London, Imperial College Press, 2003, pp. xvii, 633, illus., £46.00 (hardback 1-86094-338-1).

Neurologists, neurosurgeons and neuroscientists rank high by numbers among medical historians. They have not lacked quality either. Harvey Cushing's biography of Osler is a great book and J F Fulton's omnivorous historical studies pay revisiting. The neurologically inclined have obviously been at the forefront of chronicling the investigation of the nervous system and its disorders. In this respect they have often favoured anthologies and Edwin Clarke (a former neurologist) and Charles O'Malley's The human brain and spinal cord (1968) is a milestone for such enquiries. John M S Pearce has travelled Clarke and O'Malley's route although he (or his publisher) has not learned as much as might be gleaned from such a meticulous example.

Pearce served on the editorial board of the *Journal of Neurology, Neurosurgery and Psychiatry*, which had a "space-fillers" device to pack incomplete columns. This work is an extension of those "idiosyncratic" entries (p. xiii). The volume has 135 sections in which lengthy extracts from neurological texts are woven into a positivist text (positivist as in the sense of being concerned with identifying the

true discoverer of such and such a fact-insulin for example, p. 510). For the historically unaware but hungry neurologist the readings from Hippocrates, Vesalius and Hughlings Jackson may catch the imagination. For the student of the obscure, the book's merits are its introduction to the background of a cornucopia of neurological arcana including heterochromia iridis or Hoffmann and Tinel's sign of formication (good opportunity here for the mischievous typesetter). From the connoisseur of referencing and the footnote this book is best kept hidden. The punctiliousness associated with neurologists cannot be found in titles which, for example, are sometimes italicized sometimes not, sometime capitalized sometimes not. At times the referencing system has the challenge of a crossword. For those who consider immaculate footnoting to be the bibliographical equivalent of a neurological sign, beware what the text might hold. The publisher has a long way to go to live up to the name of the distinguished college in whose name this book is printed.

> Christopher Lawrence, The Wellcome Trust Centre for the History of Medicine at UCL

Nicholas L Tilney, *Transplant: from myth to reality*, New Haven and London, Yale University Press, 2003, pp. xii, 320, illus., £19.95 (hardback 0-300-09963-0).

The transplantation of organs came close to being one of medicine's cruellest and most spectacular failures. Throughout the ten "Black Years" that followed the first and famed transplant between the Herrick twins in 1954 at Boston's Brigham Hospital, there was no realistic prospect of extending its scope beyond the genetically identical by deceiving the recipient's immune system into accepting the transplanted organ. Indeed during this period the average survival of several hundred experimentally transplanted dogs was a mere eighteen days—so it beggars belief that anyone should have even contemplated the procedure in humans. But they did, and the patient died. The