notable contributions, mostly concerned with environmental hazards in twentieth-century America. This new research has also encompassed occupational threats from products such as asbestos, silica and coal, provoking heated debates as well as the participation of historians in public legal proceedings as workers and consumers have sought damages from major corporations across the globe. It is in this context that Paul Blanc’s new book can be welcomed both as a significant exercise in medical history and as a useful attempt to popularize the subject of health risks which have been, and are, associated with the production, use and consumption of familiar and unfamiliar substances. As a medical scientist with direct experience of occupational and environmental hazards, Blanc presents a vivid and fluent narrative history of individual chemicals and industrial processes, including the introduction of man-made fibres such as rayon which involved the lethal use of carbon disulfide.

We are reminded that the widespread introduction of poisonous substances to processes of production and consumption has been inextricably linked to the growth of consumer capitalism and the large transnational corporation. Blanc’s general argument is that many of the most dangerous minerals and compounds utilized in the making of household goods have long been known to be seriously dangerous to human and animal health. Bernardino Ramazzini graphically described many of them at the beginning of the eighteenth century. Blanc outlines the characteristic responses of the opponents of regulation. Advocates of economic liberalism emphasize the capacity of markets, producers and consumers to assess risks and protect their own interest by demanding higher wages or another premium. Faced with indisputable evidence of poisoning, critics have historically questioned the scientific veracity of research and stressed the economic and political costs of following visionary (anti-business) crusaders. Some “revisionist” health historians as well as economists have argued that the most effective solutions to the risks of human and environmental damage have been historically found by scientists, business leaders and policy-makers seeking practical technologies, contrasting these approaches with the politically-inspired critics of economic progress.

Blanc’s vivid and meticulous documentation of deaths and illness arising from a wide range of “durables” provides irrefutable evidence that irresponsible practices have been perpetrated in weakly-regulated industries within advanced industrial societies as well as less-protected developing countries where workers and consumers have historically absorbed the risks of production undertaken by global corporations mainly based in the United States, Europe and Japan. It is worth noting that some of the most primitive working conditions and the least healthy products were (and are) found in communist societies pursuing a productionist goal of maximum economic and military growth alongside a drive to improve basic living standards and state health services. The paradoxes of consumer choice and collective responsibility for a sustainable environment can in part be explained by delinquent capitalism but we also need to embrace the lessons of global deterioration. Otherwise the historical fears of a silent spring and a nuclear winter will be superseded by the prospect of profound global damage.

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Neil Pemberton and Michael Worboys,

Walking across a Chinese campus with a friend in 2006, we met a Shih Tzu, a breed much favoured by the local teachers (its great feature is that it doesn’t bark). Much to my surprise, Shao Peng backed away, muttering...
imprecations and making negative and ineffectual gestures at the dog. Afterwards he explained that you could not be too careful where dogs were concerned, however harmless they might appear. They might bite, and their bite could give you a horrible disease.

Rabies is enzootic in China, but its incidence is negligible in the north where we lived (and the dog was hardly behaving strangely). Reading Mad dogs and Englishmen reminded me of the incident; despite what sometimes seems the authors’ view, it is not just the English who are subject to phobias about this disease (and I remain to be convinced that they are peculiarly attached to dogs). Rabies has always understandably attracted universal horror. While consensus on the need for control and the desirability of eradication can readily be achieved, its variability and uncertainty over the incubation, symptoms and transmission have always resulted in uncertainty and arguments over its incidence and how to meet it.

These features figure largely in the excellent overview provided by Pemberton and Worboys of the history of rabies, and of human attitudes to rabies, in England during the past two centuries. They set out to address four main themes: changes in the medical understanding of rabies (primarily in the nineteenth century), the differences between professional and lay understanding, the role of the state in meeting the disease and aspects of the history of dogs in Britain. Their account is particularly good on the manner in which, before the first Reform Act, fears of lower-class upheaval ran parallel with concern over the rabid dogs of the latter. As befits social historians, they are careful not to be judgemental—although some aspects could warrant rather more comment. Thus, late-nineteenth-century control measures exempted foxhounds from muzzling—but not sheep-dogs and other farm dogs.

Mad dogs and Englishmen is social rather than medical or veterinary history. Modern findings on the aetiology and pathology of rabies are revealed only near the end, while epidemiology is hardly touched upon (a short article by Henry Carter on ‘The history of rabies’ in volume 9 of Veterinary History, can be recommended in this respect). The authors argue that this allows the reader to “better appreciate past ideas and actions in context” (p. 3), and this may be so. At the same time, it can be frustrating. According to Carter, rabies was always epizootic rather than enzootic in Britain; Pemberton and Worboys offer no opinion, although, if it was so, it represents a critically important context to their story.

They do offer a judgement on the efficacy of “muzzling” dogs in eradicating rabies at the turn of the century. It was unlikely to have been as great as claimed by contemporary bureaucrats and politicians: “the muzzle was a cumbersome piece of technology. It was of little use as a restraint on a rabid dog” (p. 162). Further, although the authors do not stress this, eradication was made relatively easy because rabies was not enzootic in Britain, and port controls were likely to be more effective than border controls in continental Europe. Finally, rabies never became enzootic in British foxes, as it did on the continent (that would have posed an interesting conundrum for foxhunting politicians). Strict quarantine may now seem outmoded, but it had its value in the recent past against this zoonosis.

A final point: at £45, the publishers should have been able to include a bibliography and avoid the abundance of typographical errors in this book.

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The history of medicine has for some time lacked an accessible historical overview of so-called alternative medicine. Robert Jütte’s Geschichte der alternativen Medizin (Munich, 1996) is a notable exception; alas it remains