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 specialty.

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 Infirmary 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 Infirmary (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.

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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
ability to pay professional fees. The author has some interesting observations on the “culture lag” between popular beliefs about dental care and the state of opinion in the profession itself. The layman may not be aware of changes of theories and opinions amongst dentists and clings to “facts” which have become outdated. The theory of “focal infection” arising from Hunter’s work in 1910 provided the reason for multiple extractions for a period of forty years and the layman was conditioned to accept the advantages of losing all his teeth. Few patients will now accept this type of treatment and the profession has learned to save many teeth which were previously condemned. However, attitudes vary with social class, and social and economic factors tend to override the concepts of ideal treatment advocated by the profession.

It is evident that the author believes that dentists are obsessed with the diagnosis and treatment of disease and that there is too much emphasis on high technology treatment procedures which contribute little to the health of the community as a whole. He advocates greater emphasis on the principles of maintenance care and prevention, radical initiatives in the deployment of auxiliary workers skilled in preventive work and able to increase the productivity of graduate dentists, incentives to ration expensive (or extractive) treatment, changes in the dental supply industry that foster adequate technology and expertise for self-care and that reduce the incentive to elaborate restorative care, and strategies for prevention directed at the aetiological stage. Many of these ideas are already being adopted or are being tried out, but the profession will still be required to provide ever more sophisticated treatment for those who escape the preventive net, but who do not wish to lose those teeth damaged by caries, excessive wear, or trauma.

The author has made a strong case for greater emphasis on the prevention of oral disease, and there is no doubt that much of our knowledge of prevention is not yet being properly applied, but fully effective prevention of caries and periodontal disease is still some way off and the pace of change may not be as fast as the author believes to be possible.

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David Thomas’s book is a lucid and jargon-free introduction to recent debates in the philosophy of social science. Acknowledging the force of attacks upon crude empiricist methodology over the last generation, Thomas poses the question whether all attempts to construct a social science similar in structure and explanatory ambition to natural science must therefore be abandoned (Winch’s position and variants on it). Thomas thinks not. He argues that attempts to produce law-like generalizations in studies of society are not vitiated in principle (merely that the very complexity of society makes it more difficult to produce theories which are non-tautological, non-vacuous, and not subject to endless qualifying conditions, than it is in natural science);