NEW TITLES

This book beguilingly informs us about two, at first sight unconnected, areas of knowledge: the social life, customs and legal procedures in eighteenth-century Scotland, and autism.

While researching for his book *Madness and Society in Eighteenth-Century Scotland*, Professor Houston came across the case of Hugh Blair, the oldest son of a Kirkcudbright landowner, whose brother successfully petitioned for the annulment of the older brother’s marriage in order to gain his inheritance. In 1747 an Edinburgh court with judge and jury had to decide on Hugh Blair’s mental capacity to engage in a marriage contract, and for this purpose heard evidence from 29 witnesses, none of them medical, about his development and behaviour.

The first three chapters by Rab Houston, touchingly illustrated with maps and pictures of people and landscapes, describes rural life, customs and concepts of mental disorder at the time, gives an account of Hugh Blair’s life history and summarises the documents relating to the trial. Hugh Blair was one of the few persons with autism to have married and have children. Fortunately for him the marriage, which had been arranged by his mother, survived its annulment. His wife looked after him well and tolerated his oddities.

The last three chapters by Uta Frith, a triumph of clarity and brevity, give a sophisticated, state-of-the-art account of autism which will help even the least knowledgeable to understand the condition. She converts the court case documents into a clinical case history and finds convincing evidence for the diagnosis in Hugh Blair. Thus, autism is documented well before other historical accounts of the condition, and its essential features are resistant to cultural changes over time and place. A letter to Professor Frith from a Japanese woman, describing her autistic mother-in-law, is only one in a series of moving stories in this appealing book.

S Wolff

Chronic pain in the absence of a structural lesion has been a puzzle to physicians for 200 years and an affliction to patients for much longer. In the early nineteenth century there was a debate as to whether pain was a specific sensation with a defined pathway or simply an excess or distortion of other forms of sensibility. The Scottish physician Cullen was one of the first to point out that although the origin of pain was usually peripheral in the nerves or spinal cord, its effects on the patient were profoundly influenced by cerebral factors including age, climate, attention and what he called ‘state of mind’. Neurotic symptoms were due not to madness but to excessive sensibility and its manifestations, from florid hysteria to gloomy hypochondria, were a reflection of the temperament of the sufferer.

The development of neurology and the demonstration of abnormal physical signs in nineteenth-century France changed pain from being a disease in its own right to a symptom of underlying pathology. Pain without pathology was often longer lasting, more difficult to treat and less interesting to most doctors and the term ‘functional pain’, originally and sensibly applied to the effects of an exaggerated physiological disturbance, acquired a secondary meaning of conscious or unconscious malingering.

Today, in spite of huge advances in neuroanatomy and neurophysiology of nervous transmission and the pain pathways, in endogenous opiates and serotonin depletion, chronic pain remains a huge medical and social problem and no one can fail to be struck by the similarities between the early descriptions by Briquet of his patients with ‘myosalgie hysterique’, with its predominant muscle pain and sensory symptoms, and some of our latter-day patients with chronic fatigue syndrome.

Let us hope that this well-written monograph on the development of theories on the mechanism of chronic pain in the nineteenth century will help to put our present confused ideas into better perspective and, more importantly, lead to more sympathetic treatment for patients.

RW Ross Russell
To the casual visitor our College may give the appearance of a pagan temple. There are friezes and statues of deities on all sides, while busts of our predecessors suggest their apotheosis. In Dr Hart’s book it becomes clear that such features are not pretentious nonsense, but that they take us to the heart of the philosophy of medicine in the early classical period.

Medicine at that time centred on the temples of Asclepius, and the physicians there were called Asclepiads. The most eminent of these was Hippocrates, whose principles of medicine emphasised the importance of a detailed history and examination. A less inspired approach related to imbalance of the four humours as a cause of disease. Central to temple treatment was inducing deep sleep, ‘incubation’, when patients received advice from the god. This, along with tranquil surroundings, benefited both spiritual and physical health. A more esoteric feature was that non-venomous serpents, with the ear of Asclepius, lived in the temple. At a more mundane level, they kept the temple clear of rodents.

The question arises as to whether this elegant system contributed to the development of medicine or merely led future generations up a blind alley. Particular merits were the use of logic and sound clinical practice. The author goes on to show how Greek medicine influenced Roman medicine and, at the Renaissance, it provided an impetus to further development. Even today its debate about ethical issues is more relevant than ever.

The book itself is a delight to read and the author delivers his erudition with a light touch. He also has shown superb taste in his selection of interesting, attractive and relevant illustrations.

WJ MacLennan

In 1957 an Eastbourne GP, Dr Bodkin Adams, was formally accused of murdering one of his patients, a wealthy widow. In those far off days it was almost unheard of for a doctor to be charged with murder, and Eastbourne had a unique social cachet, but this does not fully explain the intense interest his trial aroused, not just in Britain but worldwide. Eventually, he was acquitted, but many doctors remained convinced that he probably had killed several of his rich private patients with opiates for the bequests he expected to receive in their wills; the GMC expressed this view by striking him off the Register for failing to keep proper dangerous drug records.

Dr Surtees, a retired Eastbourne pathologist, gives a detailed account of the trial and the events leading up to it and, indeed, of almost everything that is known about Bodkin Adams. I found parts of the book a little tedious, mainly because the author seemed determined to record every scrap of information he possessed about his subject. But his descriptions of the magistrates’ hearing and subsequent trial at the Old Bailey make compelling reading and the picture that emerges of medical practice in England before and in the early days of the NHS is equally fascinating.

Bodkin Adams was Irish and was both intensely and publicly religious (he belonged to the Plymouth Brethren). He came from quite a different social background to most of the other doctors in Eastbourne, and when the rumours started they quickly turned against him. His medical knowledge was limited and he was certainly far too interested in bequests, but he took endless trouble with his patients, public as well as private, and many of them, particularly the lonely widows, thought he was wonderful. It is highly unlikely that he ever killed a patient for personal gain but, as Dr Surtees emphasises rather well, almost everything Bodkin Adams did was capable of more than one interpretation and his colleagues, who didn’t like him, were neither surprised nor sorry to see him in trouble.

Good bedside reading, particularly if you were a medical student or young doctor in 1957.

R E Kendell