Book Reviews

HELEN BUSH and MAREK ZVELEBIL (eds), *Health in past societies: biocultural interpretations of human skeletal remains in archaeological contexts*, British Archaeological Reports, International Series 567, Oxford, Tempus Reparatum, 1991, pp. viii, 145, £20.00, illus. (0-86054-716-7).

The examination of skeletal remains of past populations has been a matter of interest to physical anthropologists and medical historians since the nineteenth century, and "palaeopathology", defined and pursued as such, predates the First World War. In the main, however, such studies were long limited to efforts to detect disease at the individual level and to identify gender and age of death in specific cases.

This does not, of course, provide more than raw data for the reconstruction of the health of past populations, and over the past decade archaeologists in Great Britain have become increasingly involved in what is called the "biocultural approach" to skeletal analysis. This volume publishes the proceedings of a 1988 Sheffield conference devoted to this approach by the Theoretical Archaeology Group, and consists of eleven papers: six on conceptual and methodological issues and five case studies (all concerning sites in Europe or North America). Overall, the volume is characterized by a rejection of the traditional study of individuals in favour of assessing the communal group which individual cases represent, and by focusing on the general health of such groups rather than on the natural history of specific diseases. As health and disease are viewed as value-laden and culturally defined notions, it emphasizes the interplay between health and culture.

Both parts of the work offer insights of value to medical historians, but this reviewer found some of the case studies of particular interest. Anne Grauer uses her study of over 1,000 skeletons from medieval York as a vehicle for an inter-disciplinary assessment of the controversial topic of palaeodemography; Leslie Eisenberg's analysis of a prehistoric site in Tennessee is a fascinating case study on connections between health and culture; and Christopher Meiklejohn and Marek Zvelebil use the biocultural study of skeletal remains to illuminate the shift from hunting to farming in Mesolithic-Neolithic Europe.

Medieval historians will welcome the proposition that the study of human skeletal remains should aim to elucidate broad patterns of health conditions, and should have some further bearing on patterns of cultural change; and it is unlikely that any archaeologist, however narrowly he or she has interpreted human remains, would be unhappy to see these results pursued in new directions. To those unfamiliar with controversies within the field of archaeology in general, some of the rhetoric of the volume will thus seem to charge an open door. Still there can be no doubt that this is an important and stimulating contribution which medical historians of all regions and periods should take seriously into account.

Lawrence I. Conrad, Wellcome Institute

DAN W. BROCK, *Life and death: philosophical essays in biomedical ethics*, Cambridge Studies in Philosophy and Public Policy, Cambridge University Press, 1993, pp. xi, 435, £40.00, \$54.95 (hardback 0-521-41785-6), £13.95, \$18.95 (paperback 0-521-42833-5).

Professor Brock's *Philosophical essays* might be subtitled 'The decline of paternalism in the doctor-patient interchange'; and, by inference, it signals the decline of Sigerist's view of medical history as *iatrocentric*: concerned solely or mainly with doctors and the medical profession. There seems to be no analogous term of Greek derivation that focuses solidly on the patient first. But Brock comes close to providing an appropriate definition when he cites "One prominent version as viewing the goals of health-care decision-making as the promotion of patients' well-being while respecting their self-determination". Yet more compelling is the prominent position accorded by the author to the conclusion "that one major ground for shared decision-making is that the patient's well-being should be the fundamental aim of medicine".

Many veteran physicians, viewing the controversy with which Brock is concerned, are likely to reply that most men and women of medicine have been mainly concerned with the patients' well-being for generations, and that the central focus of the celebrated Oath of Hippocrates is precisely that. But the reality of paternalism as one of medicine's most powerful traditions runs counter to such a comfortable point of view: systematic thought concerning "a new, more egalitarian ideal of shared decision-making between physicians and patients has emerged".