Correspondence, Book review

many consultants in genitourinary medicine in the United Kingdom who have replied to my survey of genitourinary clinics in the past 12 months.

The response has been most gratifying and well beyond expectations for this type of survey. I acknowledge most sincerely the care with which the admittedly difficult questionnaire has been completed and especially the numerous, helpful comments that have been added. They have been most encouraging.

Yours faithfully,
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Book review

The secret plague: venereal disease in Canada, 1839–1939. By J Cassel, 1987. Vol 41 of The Social History of Canada. University of Toronto Press, Toronto. Pp 340, including illustrations, appendices, biographical references, and index. Price not given.

The growing reputation of the subject of medical history in Canada will be greatly enhanced by this thorough piece of scholarship. That the subject should be given a social rather than a medical setting is justified.

For the first time, Canada's available archives concerning venereal diseases—the author deals solely with syphilis, gonorrhoea and chancroid—have been widely scanned. The thoroughness of the work comes out clearly as the impediments to progress are dissected and delineated. Against a comprehensive understanding of contemporary

events in Europe and America, Canada's evolving struggle for control of venereal disease is detailed step by cautious step. Mr Cassel shows a healthy respect for the limitations of the many primary as well as secondary sources he has consulted.

The earliest chapters reveal the extent of the problem of venereal disease: the inadequate training of individual doctors, the absence of any appreciation of the social determinants of venereal diseases, and the degree of ignorance in society. This was not only the state of affairs at the beginning of the period, in 1838/9, when Ricord in Paris was characterising syphilis and gonorrhoea in rational clinical terms; it continued with only minor improvements until the discovery of the gonococcus. Really dramatic changes had to await the first decade of the new century and the discovery of *Treponema pallidum*, the worldwide acceptance of the Wasserman test, and the manufacture of Salvarsan. Regarding the last, Canadian doctors with Government support, broke monopolies in its manufacture.

The early moves towards an identifiable control programme were led by doctors and rooted in diagnosis and treatment. An increasingly organised Canadian medical profession (with medical schools) began to realise, even before the first world war, that the attitudes of Canadians towards sex and sexually transmitted diseases were far from uniform. They were changing with immigration, industrialisation, urbanisation, and Canada's altering social as well as economic structure. Social awareness and impulses directed at social improvements were not lacking.

The crisis of epidemic levels of venereal disease in Canadian troops in Canada and in Europe, and the revelation that matters were no better in the civilian population at home, prompted energetic moves for

improvements, firstly from Canada's Army Medical Corps. This was to spur Canada to much worthwhile endeavour after the war. Concepts of public and private health care changed. The role of Government in public health was redefined. Durkheim's "best for the greatest number" resulted in Canada's venereal disease control services being one of the foundation stones of its comprehensive Medicare system. The limitations of moral exhortations and legal sanctions were now understood. A nationwide educational programme based on an appreciation of the complex way that social factors and medical facts are so entwined as to be inseparably associated, was discussed and accepted by the public generally as well as in schools. That Canada's population in the 1920s must have been one of the best informed is reflected in the growing use of public clinics. Control of complications became evident and morbidity rates responded.

The author unfolds his history with clarity; he allows no ambiguities as he exhausts his sources. Understandably, one can find points for discussion; for example, here and there one has the feeling that he tends to treat social, sociological, and socialist policies as more or less identical. The author also does not fully appreciate that the doctors' insistence that the start of venereal disease control begins with science—in this case, sound diagnosis and treatment—and that the aim of the profession is to consistently replace remaining art with what is hard in soft sciences. He calls it, as we have for more than half a century, pragmatism.

The secret plague is an excellent source book whatever one's nationality. Do not be put off by the racy title. If you plan to read it on holiday, leave it until the second week. Cassel's exacting criticism of his archival material is exhausting, but exhilarating.

R S Morton