

status, and 3) themes found in paintings and writings. (One greatly regrets the absence of any illustration in the book.) In conclusion Mousnier and Mesnard attempted a summation. There is no index, as is so often the case in collections of papers, and which is extremely unfortunate for those who would like to follow references to individuals like Paul Pellisson, premier commis of the financier Fouquet, who is discussed, like his employer, by various contributors.

Rather than making an attempt to point out the most interesting studies for social historians of the period among the forty-two items published one might better point to the need for a historical sociology of taste along the lines so brilliantly proposed for contemporary France by Pierre Bourdieu in his book on *la distinction*. Many writers here seem to conceptualize a “*homme de goût*” — female patrons are few in these pages — without enquiring how taste itself formulated a language of power and social authority among the wealthy. The *maecenus* paid for, or was hoped to pay for, literary production almost always explicitly linked to himself by dedication, or even actually dealing with him. This system of cash awards provided authors a living still not available from a literary market place insufficiently developed to support a career. Attention in this book is kept on the highest levels of the aristocracy and the court in relation to great names of French literature like Molière, La Fontaine, Théophile de Viau and so on. Sylvie Chevalley is refreshingly informative about the amounts of support paid to Molière and the difficulties of getting the cash in one’s hands. Nobody in this collection considers the support offered in provincial capitals to those writers who provided sonnets or occasional verse for parlementaires or the local noblesse.

Definitions of good taste also affected those industries which produced what was desirable for the fashionable. An excellent example is that of the interior decorations especially for châteaux. Jean-Pierre Babelon’s discussion of the Hotel de Guise shows how flattery of a patron’s house and the lavishness of the food offered to guests is a way of proclaiming his social prominence.

In any book there are usually some typographical mistakes, but this set of essays goes far beyond a tolerable level of errors. There are numerous mistakes in French and other languages. Whoever was in charge of book production was extremely slovenly.

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Martin S. Pernick — *A Calculus of Suffering: Pain, Professionalism, and Anesthesia in Nineteenth-Century America* New York: Columbia University Press, 1985. Pp. ix-xv, 421.

At first glance, a book-length study on the introduction of surgical anesthesia does not offer an inviting prospect. Still less when, as in the volume under review, more print appears devoted to endnotes and bibliography than to the text proper. Surely this is a well-worn story typically recounted as an American success dating from the memorable day in October 1846 when a Boston dentist persuaded the chief surgeon at Massachusetts General Hospital to try his mysterious gas to render patients impervious to pain. The substance was soon afterward revealed to be ether, the procedure given an appropriate Greek designation, and the practice rapidly diffused throughout the medical world. Aside from passing mention of resistance by certain sectors of the obstetrical profession given to citing Biblical passages on pain in labour and grudging mistrust by the Philadelphia medical establishment, standard accounts present the acceptance of anesthesia as virtually instantaneous, inevitable, and unproblematic. Indeed, anesthesia, the unmitigated technical blessing, becomes, in this view, a rare straight-forward case when a profession notoriously opposed to innovation universally applauded.

A Calculus of Suffering is an important book not only because it revises the above simplistic picture but because it greatly enlarges our interpretive framework. It deserves attention from those

concerned with disciplines as wide-ranging and seemingly diverse as American cultural history, technology and society, philosophy of science, bioethics, and, of course, medical history. Martin Pernick seeks to bring these themes together by investigating “why mid-nineteenth-century physicians followed such a pattern of selective anesthetic use and which patients were most likely to be given the new painkillers” (p.5).

The answers to these questions reveal a range of attitudes among the fragmented American medical profession(s) but, nevertheless, an underlying degree of consensus as to whom should be anesthetized. At one extreme, natural healing sects such as hydropaths and, to a lesser extent, homeopaths opposed the use of anesthetic drugs. Interventionists or “heroic” practitioners adhered to a tradition in which the discomfort of pain did not justify potentially dangerous remedies; on the other hand, if the pain were perceived as dangerous to the patient, then anesthetics would be indicated. Pernick reviews the panoply of drawbacks that opponents of anesthesia were able to put forward as well as the more familiar advantages cited by partisans. Sometimes the issues under debate were identical, as for example, the (un)desirability of professional power over unconscious patients.

Pernick’s main argument is that the bulk of elite medical practitioners, the champions of “conservative” medicine, supported selective use of anesthesia because they were convinced that the physician could calculate when the benefits of painless surgery would outweigh the risks of a dangerous anesthetic. The results of the risk-benefit calculation varied widely depending upon the type of procedure and the type of patient. Pernick claims that conservative medicine’s utilitarian solution of whom to anesthetize, based on new statistical modes of thinking and the striking of a balance between nature (neglect) and art (intervention) in the form of “active sympathy” represented a revolution in professional attitudes: “...the new medical approach to suffering was rooted in...[a] search for a moderate consensus ideology, to reunite their seriously divided profession” (p.105).

The choice of patients suited for anesthesia faithfully mirrored American cultural values about people’s differing tolerance for pain or, put differently, their insensitivity. Thus delicate women and children were deemed to need pain-killers more than rugged adult men, while blacks and working-class immigrants were assumed not to feel the same pain as native-born white Americans. In a pioneering quantitative study of hospital patient records, Pernick finds suggestive evidence that physicians’ actual practice conformed with such prescriptive rules about selective anesthetization. Perhaps most surprising is the extent to which anesthesia was not used (more than 40% in the Massachusetts General sample overall and nearly 60% for sailors and laborers) in a wide variety of very painful operations then classified as “minor” surgery.

Pernick’s data, by his own admission, have numerous technical limitations. But they do support the received view that anesthesia caused an immediate take-off in the rate of surgical operations. They also suggest that this increase did not result in carnage either through reckless experimentation or simple ignorance of infection, as historians have commonly surmised. On the contrary, anesthesia permitted more difficult and potentially life-saving interventions. Increased operative mortality after 1846 probably reflects broader factors external to the operating room, notably the rise in serious accidents with the advent of railroads and the industrial workplace.

A Calculus of Suffering connects the medical victory over pain to revisions of the meaning of pain and its altered relationship with disease, the emergence of women as surgeons, and the broad issue of social control by professionals versus client demand for expert services. Pernick asserts that the latter had more to do with the success of anesthesia, although he devotes relatively little discussion to public demand or other economic considerations.

I have several reservations about this impressive study. At times, Pernick seems to want to derive nineteenth-century medical culture if not American professional culture *toute courte* from the necessarily narrow confines of an ether bottle. Such ambitious extension of the sources makes for a peculiarly disjointed and disembodied history. Much of the discussion of professional conflict over anesthesia, for example, turns upon prototypes like the heroic versus the conservative physician. The uninformed reader would scarcely suspect that the first construct flourished a full generation before

the second. Many voices are heard, but few fleshed-out historical actors, be they individuals or institutional groups, appear. Narrative and the dynamic of historical change after the introduction of anesthesia yield to a largely static analysis of issues. This happens when symbolic figures such as ancient medical authors, Francis Bacon, nineteenth-century poets, and present-day ethical dilemmas are evoked as if one could assume that they spoke directly to the historical development.

Part of the problem, I think, is that the anesthesia issue, notwithstanding Pernick's perceptive revision of its early history, simply did not provide the sort of "window" into the beliefs and practices of nineteenth-century Americans that, for example, the series of cholera epidemics, used by Charles Rosenberg in similar ways, did. Not only is anesthesia a more problematic indicator of broad social and intellectual change but its temporal dimensions are also more elusive. Pernick exacerbates the latter problem by restricting his analysis (especially the brief but crucial quantitative section) largely to a narrow band of time before and after the introduction of ether. For this period, he constructs an elegant framework of explanation for selective anesthetization in terms of professional ideology. Ongoing changes during subsequent decades leading by the 1880s to the decline of selectivity in favor of anesthesia for virtually all surgical patients receive no corresponding interpretation.

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Jacqueline Peterson and Jennifer Brown, *The New Peoples. Being and Becoming Métis in North America*. Winnipeg: University of Manitoba Press, 1985. pp. xvi, 266, maps, illustrations.

In 1970, W.L. Morton observed that Canadian tended to ignore the Métis, in spite of their obvious importance to Canadian history. At the time, Marcel Giraud's massive study, *Le Métis canadien : son rôle dans l'histoire des provinces de l'Ouest* (Paris, 1945) was still the primary academic reference, and in most textbooks, the Métis appeared only briefly as participants in the two Riel rebellions. By the late 1970s, however, a flurry of research activity had begun in both Canada and the United States, and in 1981 a conference was sponsored by the Newberry Library in Chicago in an attempt to bring together scholars from various disciplines to share the results of their new interests. This book is a selection of essays from that meeting, published as the first volume of a new series from the University of Manitoba Press entitled "Manitoba Studies in Native History".

The essays are grouped under four general themes which are appropriately representative of the current major interests of researchers. These include questions of Métis origins, types of communities, the Métis "diaspora" and Métis culture. The most exciting of the papers are those in which new methods are used or discussed. A number of scholars have concluded that the larger questions of group identity or "nationhood" cannot be answered until detailed analysis is done of what Jennifer Brown calls the "microcosm" of family and kinship. In this volume, Jacqueline Peterson offers a condensed version of her painstaking study which traces the origins of the Red River Métis. They did not emerge suddenly at Seven Oaks in 1815, she argues, but had coalesced from several older populations, one of which may be traced to the "Old Northwest" of the eighteenth century. Using demographic reconstruction and linkage techniques, she argues that the pressures of American expansion forced the Great Lakes trading communities to move west and north. Irene Spry challenges the theory that the English-Protestant and French-Catholic Métis groups at Red River were separate and hostile communities, arguing instead that divisions between the sedentary agriculturalists and the mobile bison hunters were more important than language or religion. Trudy Nicks and Kenneth Morgan reconstruct the Métis population at Grande Cache, Alberta using demographic sources to illustrate that this community developed at the regional level quite independently of the better-known group at Red River.