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threatening legal action, without much context. What is appropriate behaviour for drug companies? What should be done about behaviours judged inappropriate? Shuchman seldom enters this sort of territory. The result is an account that tells a lot about individuals and actions but sheds little light on bigger questions.

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Labour in the Laboratory: Medical Laboratory Workers in the Maritimes. By Peter L. Twohig. (Montreal: McGill-Queen's University Press, 2005. 264 p., notes, bibl., ill., ISBN 978-0-7735-2861-1 \$70)

Canadian studies of health care and health care workers are not rare, but Peter Twohig takes us behind the scenes, providing an insightful look at those whose work is integral to the modern health care system, but who are often out of sight and out of mind. In his study of laboratory workers in the Maritimes during the opening half of the twentieth century we learn not only about the people doing these jobs, and what they do, but we also acquire a broader picture of the rise of the modern hospital, the changing divisions of labour in health care, the rise of medical dominance, gender and work, and more. Twohig's book is an interesting one that has many insights for scholars interested in a variety of fields, including health care, work, science, organizational analyses, gender, and Canadian (and Maritime) history.

Twohig begins by exploring the institutional context of the work, with a particular focus on the establishment of the Pathological Institute in Halifax and the Bureau of Laboratories in Saint John. He illustrates how the development of such laboratories was shaped by a myriad of concerns and trends including the public health movement, provincial governments' public health initiatives, scientific advancement, concern over prevalent diseases, and developments in the medical profession. Other trends like the expansion of hospitals were also influential. Laboratories were first established to provide a number of public health services, for instance, to supply vaccines, and test water and milk, and also to conduct tests for medical doctors to facilitate their ability to diagnose and treat disease. Laboratories also came to be a location of medical training, and a key component of the modern hospital.

Unlike some studies of work, Twohig takes the time to describe precisely what laboratory workers did in this era. His discussion is insightful. For instance, Twohig shows how the work demanded skill,

knowledge and care, and yet was generally quite routine and often repetitive. Workers performed the same kinds of tests again and again according to an established procedure. Analyses of work quite often portray work as either skilled or routine; hence, Twohig's analysis is valuable in underscoring the contradictory nature of technicians' work, and the limits on their creativity and autonomy. Moreover, Twohig demonstrates how many workers, especially in smaller hospitals did a variety of tasks: for instance, in some locations, a lab technician was sometimes also an x-ray technician and/or a nurse. Workers might be asked to do many different kinds of tests, as well as provide administrative or secretarial support. Although the rise of laboratory work was a component of the rise of detailed divisions of labour within the health care complex, and provides evidence of growing differentiation within health care institutions more generally, this was a slow and uneven process. Counter to expectation, these workers were quite often not 'specialists', but generalists who had to adapt their labour to fit local needs. This provided opportunities for diversity and growth on the job, for many (predominantly female) health care workers.

The nature of laboratory work and entrance into the field shaped employment opportunities. For instance, Maritime governments made a commitment to public health in the opening decades of the twentieth century, but had limited funds to spend. Laboratories did not have enough funding to support a large or well-paid staff. They tended to be broadly supervised by a member of the medical profession with enhanced training in pathology, bacteriology or related fields. They were staffed predominantly by women, and some young men, who had training or at least an interest in science, and who were willing to work for a relatively low wage, at least for a time. Laboratories often also relied on the labour of volunteers, who might become paid staff members when paid positions became available. Twohig argues that laboratory employment offered good opportunities for women, providing stable employment in the science field for reasonably good pay. Young men's involvement tended to be short-term; when they wanted to settle down or earn more money, they were forced to look for work in other fields.

Through his analysis of women's involvement in the lab, Twohig adds to our understanding of the significance of gender to work. While the content of lab technicians work was not strongly sex-typed female, the work and employment conditions clearly encouraged the employment of women. Female doctors faced with the difficulty of establishing their own practice sometimes found their way into the occupation. Further, laboratory work was often combined with the performance of other female-dominated jobs like nursing and secretarial work. Moreover, the

job was seen by medical men as a subordinate support job; women were viewed as ideal subordinate workers whose labour supported the diagnostic work of authoritative medical doctors. Working in the lab became a female-dominated support specialty that enhanced medical authority, and supported medical work.

Towards the end of the book, Twohig explores efforts to organize and professionalize laboratory work. The Canadian Society of Laboratory Technicians (CSLT) was founded in 1936 to improve the qualifications and status of laboratory workers. This initiative was led by laboratory workers and medical doctors in Ontario, and aimed to standardize and enhance training in the field. Although this organization had some success in its endeavours, its goals were not always embraced in every locality, and the organization remained somewhat under the control of the Canadian Medical Association who joined it, for instance, in accrediting training programs and approving curricula. Twohig's analysis further demonstrates how difficult it is for an occupation to professionalize under the control of a more dominant profession. While the CSLT made progress in shaping entry to practice and training, it was limited by the medical profession's aim to ensure that lab workers were not only competent but also subordinate.

Ultimately, Peter Twohig's study contributes much to the historical literature on health care and work. The breadth of his focus is to be applauded: Not only do we learn about the workers in this job, but about their work, its institutional structure, and the development of the health care system more broadly. Through this case study of laboratory workers we learn much about health care work, professionalism, women's lives in the early twentieth century, and life in the Maritimes. Moreover, the reader gains many new insights about the development of hospitals, and the medical profession, and the place of laboratory workers in the detailed division of health labour. This study succeeds in reaching beyond its limited focus and locale to shed light on the history of work and health more generally. As noted, the descriptions of lab technician's work have implications for our understanding of a wide range of technical jobs. Twohig's insights on the experiences of women and men in this field are also particularly valuable, although further contextualization of these experiences by ethnicity, race, class and age would have been useful.

Overall, Twohig has provided an enjoyable, readable study that should be appeal to a broad audience.

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