

some of my uneasiness with Stackhouse's work:

The trouble I had with the book was a trouble with history, a trouble with the externals of things he described so well. There was such a difference between the writer and the people of the country he was writing about, such a difference between the writer's country and the country he had traveled to.

Stackhouse is aware of his position of privilege and power, and he lets us know he's thinking about it. He is reminded from time to time by some of the villagers he meets:

As Kartar spoke, a small boy from Biharipur appeared, announcing that we, the foreigners, had come to exploit them. We would take their photograph and offer nothing in return, the boy said I often thought the villagers were right to expect something more than sweets but also feared that if I brought lavish gifts it would change the nature of my visits.

Just what is the nature of his visits? What is the quid pro quo here? Why has he written this book?

To get his stories, or rather to get their stories, Stackhouse laboured under difficult living conditions that temporarily resembled those of his subjects. The heart of his narrative is outside himself; it rests in the hearts and aspirations of the people he meets. At the end of the day there remains something unsettling about a well-written book that grew out of the stories, pictures and transient relationships of an overseas development writer and his subjects. It is unsettling if only because part of the original impetus for this writing was to help fill a newspaper (with its particular world view) and sell it for more than the equivalent of a day's wage for many of his subjects. The sticker price of his book would render it unattainable to the people he writes about, were they part of his intended audience.

Out of Poverty invites the necessary comparison between our own lives, families and struggles and those of the

individuals described. The men and women Stackhouse portrays demand a response from us. What do we think about them? What is the nature of community? We've heard more than enough about globalization and development; can there be such a thing as global solidarity that cuts across extreme economic inequities? I worry that the reasons for optimism that Stackhouse discovers among some of the world's poor may simply foster among his middle-class North American readers a more comfortable complacency.

In the end, what's to be done? For a start, consider reading this book but not buying it. Support your community

lending library instead. And while you're there, have a look at a copy of the *New Internationalist*, a magazine that "exists to report on the issues of world poverty and inequality." Continue to educate yourself in world affairs. And send the \$40 you've saved to a reputable NGO like CalmMeadow Foundation, Interpares or Canadian Physicians for Aid and Relief — but not before you've had a look at their vision statement and annual report. You could change a life, maybe your own. Failing that, you'll still end up with a small tax credit.

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Uric acid wit

Gout: the patrician malady

Roy Porter and G.S. Rousseau
New Haven and London: Yale University Press; 1998
393 pp. \$35 (cloth) ISBN 0-300-07386-0
\$16.95 (paper) ISBN 0-300-08274-6



Histories of disease have enjoyed a surge in popularity recently. Epidemics, including plague, cholera, smallpox, Ebola and AIDS are the focus of new books. Chronicles of cancer,

tions have also captured the public eye. So how does a book on gout — that ancient, chronic and relatively benign ailment — fit into this flurry of fascination fixated on sex and death?

The prolific and inspired Roy Porter, professor of the social history of medicine, and G.S. Rousseau, professor of English literature, have joined forces to produce what will become the standard history of gout from antiquity to the 1930s. With uncommon erudition, they move chronologically through medical texts ranging from the famous works of Hippocrates, Sydenham and Garrod to the more obscure but intriguing accounts of Cadogan, Stuckey and Scudamore — many themselves afflicted with gout. But they also pay close attention to the words of lay sufferers, especially writers such as Smollett, Dickens, Conrad and Hemingway, whose uric acid infiltrated their fiction and correspondence as well as their tissues. The greatest attention is devoted to the early modern and enlightenment periods, areas of expertise for both au-



Edmé Jean Pignal (1798–1872), *Fructus Belli, Docteur!* Lithography by Langlumé

heart disease, blood disorders, STDs and neurologic conditions such as multiple sclerosis and the slow virus infec-

thors. The work closes a bit abruptly with a convoluted chapter devoted to the complex ludic personalities of gout, and another to an analysis of its associated images.

So broad is its scope that this book could serve as an introduction to a cultural history of medicine before 1900. A list of gout's notable victims reads like a biographical dictionary of Western civilization. The languid writing, with its alliterative wit, thick description and penchant for apt citation is reminiscent of 18th-century prose.

Porter and Rousseau claim to have a "post-Foucauldian" perspective and nod in the direction of the social construction of disease concepts, as articulated by Ludwik Fleck, Georges Canguilhem and Michel Foucault. But underlying that receptivity to social construction is a positivistic view of gout as an entity increasingly elucidated by science. They take issue with Susan Sontag's work on tuberculosis, cancer and AIDS: they agree that metaphors are attached to diseases; they disagree that metaphors are bad.

Gout, say Porter and Rousseau, is loaded with metaphors. Debates over its many meanings reveal traces of social unrest and cultural revolution. It

was "genderized" as a male disease, an emblem of patrician comfort and a political symbol of swelling and of rank. Sometimes it was a blessing in disguise, a protection from more dangerous conditions. A controversy in the 1770s over its cause attracted partisans on opposing sides of arguments over temperance, politics and religion, who advanced their own agendas in viewing gout either as an inherited affliction or as a punishment for laziness and overindulgence. Metaphors in disease may be inevitable; it serves nothing to tilt against them, Porter and Rousseau feel, when we can learn so much by studying them.

The authors also claim that the history of gout has been ignored. Perhaps this is true of social historians, but doctors have long been interested in the history and images of this cruel but kind ailment. In fact, gout is one of the few diseases that readily invokes historical thought in the medical mind, providing one more reason to welcome this authoritative new book.

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