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*An Element of Hope: Radium and the Response to Cancer in Canada 1900-1940.* By Charles Hayter. (Montreal / Kingston : McGill-Queen's University Press, 2005. 288 p., ill., notes, bibl., index. ISBN 978-0-7735-2869-7 hc. \$80)

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Natural Science in the New World: The Descriptive Enterprise

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[See table of contents](#)

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En somme, l'ouvrage présente un angle d'approche fort instructif qui nous permet de mieux saisir l'importance du financement dans l'orientation des structures universitaires au début du siècle. Nous avons droit ici à une description très détaillée (parfois même trop détaillée) de tous les événements liés de près à l'octroi de ces sommes. L'auteure est très près de ses sources, ce qui à mon avis nous fait parfois perdre de vue les questions plus globales liées au financement des institutions universitaires, mais qui a tout de même l'avantage de nous faire découvrir tous les mécanismes et engrenages derrière le financement privé des universités.

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***An Element of Hope: Radium and the Response to Cancer in Canada 1900-1940.*** By Charles Hayter. (Montreal / Kingston : McGill-Queen's University Press, 2005. 288 p., ill., notes, bibl., index. ISBN 978-0-7735-2869-7 hc. \$80).

Ostensibly, *An Element of Hope* traces the discovery of radium by the Curies in the 1800s and its uses in Canada in the first half of the twentieth century. However, this simple description hides the true value and interest of this book: the tensions between the various players in the delivery of cancer programs – federal and provincial governments, private and public medicine, the scientific and empirical approach to treatment, and centralized versus distributed care. These tensions are illustrated by well-researched examples from all parts of the country.

In the first few chapters we learn of the first uses of radium and its daughter radioactive gas radon. The distribution of radon sealed in thin gold tubes provided many benefits such as smaller tubes which were easier to insert into tumours, and provided a much safer form of treatment as the radioactivity of radon decreases to half in four days unlike the 1600 year half life of radium. While seeming an ideal solution to provision of treatment, tensions formed between the 'owners' of the radium, often in a centralized facility, and the private physicians who used the radon. These tensions are illustrated by the introduction and purchase of radium for the Institut de Radium in Montreal and the Victoria General Hospital in Halifax.

The first uses of radium were often empirical, unlike the scientific approaches that had so benefited laboratory medicine in the years shortly before the discovery of radium. Despite the often arbitrary uses of this new technique, establishment of such a therapy program was thought to

be very prestigious. However, radium was extremely expensive as production was essentially controlled by one company. A useful supply of radium would have cost the equivalent of about five million of today's dollars. Organizations used the analogy of the recent triumph over infectious diseases such as tuberculosis in campaigns to raise public awareness and entice donors to open their purses to raise such enormous sums.

As in other facets of health care delivery (ref Steps on the Road to Medicare C Stuart Houston McGill-Queen's University Press, Montreal 2002) Saskatchewan led the way in the introduction of a coordinated cancer control program. The organizational chart from the early 1930s shows a remarkable clarity of purpose. The Saskatchewan experience prompted action in other parts of the country, but this was not always so easy and even after the Second World War the situation in Ontario was a hybrid of centralized clinics and private practice. However, all provinces had some cancer programs by this time and there was the potential for better communication after the establishment of the Canadian Society for Cancer Control.

Dr Hayter bookends the story of radium treatment with short chapters on cancer care today and the continuing challenges, which he believes can be traced back to the tensions which have existed in different forms for many years. He ends with an optimistic view that current national coordination efforts such as those of the Canadian Strategy for Cancer Control are moving in the right direction. Extensive footnotes and bibliography, nearly 60 pages in all, will satisfy even the most demanding of readers. This reviewer would have liked a little more about hot springs or spas, which were and are famous for their slightly radioactive therapeutic water, but perhaps this deserves another tome!

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***Body Counts: Medical Quantification in Historical Perspective / La quantification médicale. Perspectives historiques et sociologiques. Edited by Gérard Jorland, Annick Opinel, George Weisz.*** (Montréal: McGill-Queen's University Press, 2005. x + 401p., index. ISBN 0-7735-2925-x \$34.95)

*Body Counts* is an edited collection of articles that emerged from a colloquium "devoted to medical quantification from its beginnings in the eighteenth century to our own day" organized by the editors in order to