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A Darkened House: Cholera in Nineteenth-Century Canada.
Geoffrey Bilson. Toronto, University of Toronto Press, 1980.

The growing audience for the social history of medicine in Canada will no doubt be pleased to learn that the cholera epidemics that disrupted nineteenth-century Canadian society have become the subject of a major study, the result of which is Geoffrey Bilson's *A Darkened House*.

The history of cholera in British North America is essentially the history of the five major epidemics that raged through the colonies, the first being that of 1832, with the last

major outbreak occurring in 1854. Linked with the arrival of the emigrant boats, the disease had its most disastrous effect in urban centres. With a cure not readily available in the era before the acceptance of the germ theory of disease, and sanitary technology still several decades away, the treatment of cholera largely meant policing the population through quarantine, hospitalization and public hygiene. Given the high mortality rates and the conflict of opinion concerning the sources and consequent measures needed to deal with the epidemics, cholera incited the intervention of many social groups and institutions such as the medical profession, the church, and municipal and colonial governments. Thus, the effects of cholera and its politics on social conditions in the colony form the central focus of Bilson's analysis.

A secondary theme of the book is the effect of cholera epidemics on the colonial politics of British North America, a theme which Bilson qualifies as the 'political impact of cholera.' Bilson gives a well-argued, yet at times inconsistent analysis of the political conflicts surrounding cholera from the municipal level, where we find struggles for control of the Boards of Health, to the level of the executive councils of the colonies. The presentation is sketchy, especially for the later epidemics, for it attempts to cover events stretching over too long a period and omits some key political actors. For example, we are presented with a unified French Canadian elite and its medical profession, which in fact was subject to several cleavages. The colonial, military, commercial and foreign policies which, it could be argued, were the key political forces behind the exportation and administration of the five cholera epidemics, are hardly considered. Finally, Bilson should have considered the important financial and entrepreneurial groups who, later in the century, would provide the political incentive for the sanitary movement and the construction of a technology of sanitation in the cities.

In the final chapter the author assesses the reform process in terms of the cholera experience. 'Reforms come slowly,' laments Bilson, 'hindered by political and economic considerations. . . .' (p. 173). Politics in a colony, it appears, can increase the social cost of reform. True, but what about the political decisions which exported these epidemics to Canada? Are these not questions fundamental to understanding the process of reform? The social cost, like the cause of cholera, was known early in the game.

The book ends with a useful 'Bibliographical Essay' which helps to place Bilson's undertaking within the secondary literature on the social history of medicine and the more specialized topic of the social history of cholera.

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