

drawbacks of the colonial relationship. The mother country gained in terms of trade imports and exports: a steady supply of tobacco, lumber, pig iron, and ship supplies. And the Chesapeake colonies provided an outlet for surplus population that would eventually dissolve the bonds through revolution. *Planting an Empire* reminds us that the Chesapeake and its history remain “a work in progress (211).”

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**Harrison, Mark**

***Contagion: How Commerce Has Spread Disease.***

**(Yale University Press: New Haven and London, 2012)**

ISBN 978-0300123579 (hbk) \$33.68

Quarantine represents one of the most fundamental measures to prevent and contain disease. It has been (and still is) the source of much deliberation and interest among medical historians and medical writers alike. To see the different ways in which quarantine was implemented, in various cultures throughout the ages, gives us an insight into the progression of human understanding of disease, pestilence and contagion; how our natural ability (as human beings) to reason and see patterns after significant events, developed

into a sophisticated sense of how pathogens could be transferred from person to person and from place to place. Trade and commerce was perhaps one of the major ways in which diseases were (and still can be) spread from infected populations to those naïve to certain diseases. While history has shown that quarantine did contain diseases in one area, the limitations it imposed on merchants also had a negative affected trade, yet paradoxically, trade remained the cause for many epidemics throughout the ages. Mark Harrison explores this very issue in his book: *Contagion: How Commerce has Spread Disease*. It is a wonderfully crafted account of the history of quarantine and transcontinental trade: how diseases spread and were contained, spanning across the middle ages and through to the modern day.

The book provides a comprehensive history not only of methods of quarantine, but also what 'contagion' meant to various cultures throughout the ages, and how this reflected their understanding of disease causation. Harrison tracks how the perception of contagion changed as science and societies advanced over time: from the divination of disease in the middle ages, the secularisation of disease during the enlightenment period, the contagion/ anti-contagion debate of the nineteenth century, and through to the problems of border-security in the modern day: six centuries of history of medical thought, in the major trading areas of the world. Harrison's methodology is to examine past epidemics of cholera, typhus, yellow fever, syphilis and plague, and apply today's knowledge of disease in order to see how trade was largely responsible for such outbreaks. Some medical

historians would criticise this method as an act of presentism, or even confirmation bias, but Harrison has defended his methodology with admirable clarity. For Harrison, without informed speculation on this subject, it is difficult to decipher why diseases appeared, how they spread, and why they disappeared. This approach can be adopted, as long as the views of contemporary physicians, and a proper process of elimination of other causes, are considered in the analysis of primary data. In the end, the human body reacts the same way now as it did in the distant past to particular pathogens, so charting the progress of an epidemic is easier once the disease in question is identified through consultation of contemporary symptomatology. The result of Harrison's work is a thorough, yet general account of an evolution of scientific thought, which clearly shows why various nations implemented (or indeed relaxed) quarantine embargoes on neighbouring or even rival nations, and how this was sometimes used for political advantage.

This book builds on Harrison's previous work regarding yellow fever epidemics in the West Indies, cholera in India, and passive transportation of disease, and is a must-read, not only for medical historians, but for those with an interest in history in general. Disease and pestilence were important formative factors in all cultures: they influenced how populations lived and why they performed the religious rituals and medical treatments that they did. The practicalities of illness unites us with the past, as the human body's response to disease has changed little over the centuries. What is different about this book, compared with

Harrison's other work is there is a strong focus on where diseases originated. Unlike Harrison's previous work, this book is directed at a broader audience, rather than the medical historian. Critics of the book have argued that it is a daunting read, but nothing can be further from the truth. The book's strengths are in its structure and concise delivery, leaving the reader eagerly awaiting Harrison's next publication.

Disease causation still takes all shapes and sizes, but today we are largely at risk by food contamination and passive transportation of disease through travel and trade, as there is no uniform sanction or embargo on quarantine on a global scale. What may be an industry standard in one country, would be illegal in another. One of the major strengths of this book is its clear depictions of how major epidemics can and have panned out in non-vaccinated populations. This is important in that it is still deeply relevant today; particularly when despite our best efforts, trade remains a potential source of contamination. SARS, H1 N1, MERS and now the new threat of contamination by, and transportation of, pathogens through food imports is a real concern for physicians and consumers alike. Harrison argues that today's measures of sanitary control are not perfect, because they are not globally uniform. The history of contagion and quarantine as outlined in his book are a testament to that. Moreover, transcontinental trade and travel is much faster than in the distant past, which leaves vulnerable populations open to the threat of major outbreaks of disease. The importance of trade, and a healthy fiscal bottom line for major

companies, supersedes the importance of human safety. Quarantine and trade will only be safe, if there is a uniform policy of sanitation and farming throughout the globe. In this work, Harrison makes an effective case that a globally uniform policy of sanitary control is vital to protect against instances of contagion.

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**Roberts, Jenifer**

***Fitz: The Colonial Adventures of James Edward  
FitzGerald***

**(Otago University Press, Dunedin, 2014)**

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Biographers have not mined New Zealand's colonial era substantially. There are all too many individuals about whom we know much too little, lacking any greater treatment than a brief entry in the *Dictionary of New Zealand Biography* or a dusty and often sycophantic old Masters thesis. The list of individuals with biographies almost appears respectable until the names of individuals without biographies are listed alongside. There are central premiers, provincial superintendents, and Māori leaders who have not yet been