Book Review


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One of the inescapable features of life is illness – minor, major, transient, chronic, terminal – and so it is no surprise that, throughout the centuries, a large amount of energy and ingenuity has been devoted to seeking ways to cure it, to minimize its side effects, and to eliminate, or at least make tolerable, the pain associated with it. Typically, treatment fell into one of two categories: surgical and medical. Prior to the development of aseptic methods, anesthesia, and reliable anatomical training, surgery was, to say the least, painful, risky, and often lethal, and it was generally avoided at all costs. The alternative mode of treatment, application or ingestion of pure substances or mixtures, must have seemed in most instances, infinitely preferable to patients.

For most of human history, there was no scientifically trained class of medical practitioners. Until comparatively recently, what medications were available had been discovered by folk healers and herbalists, working by trial and error. Some were effective, others weren’t. In the absence of a scientific tradition, knowledge of the sources and compounding of these medicaments, and their method of administration was often standardized by incorporating it into a religious, mystical or mythical framework. In such cases, the efficacy of the treatment must necessarily have been inextricably bound up with the patient’s faith in the powers of the person administering the treatment. Under the circumstances, and given the great potential for profit, it is not surprising that practitioners often made grandiose claims for both themselves and their treatments, likely in inverse proportion to their efficacy. It is this conjunction of profiteering, misrepresentation and hucksterism that defines the quack, as portrayed in William Helfand’s Quack, Quack, Quack, a visual survey of quackery from the seventeenth to the early twentieth centuries.

Helfand, who spent his professional career on the marketing and advertising side of the pharmaceutical industry, has written several books on the history of pharmacy and medicine, and is also a collector of materials relating to the advertising and
merchandising of bogus medications and treatments. *Quack, Quack, Quack* is a collection of prints, posters and figures from books and pamphlets in his collection, depicting quacks and their nostrums, as well as exposés of fraudulent claims. They largely span the eighteenth and nineteenth centuries, with a few earlier and later examples. Helfand’s textual commentary begins with an introductory survey of quackery and quacks, moves on to a discussion of their characteristics, looks at historical attempts to weed out quacks through professional certification and licensing by medical organizations and governments, culminating (at least in the United States) in the passage of the Food, Drugs and Cosmetics Act and the establishment of the Food and Drug Administration, both of which were intended to certify the safety and efficacy of drugs, then ends with a section on the persistence of quackery. The illustrations are grouped into ten subsequent sections (“The Itinerant Quack,” “The Ways of the Quack,” “Systems,” “Morison’s Pills,” “Vin Mariani,” “Anatomical Museums & Medicine Shows,” “Selling Sex Cures,” “Addiction & Electricity Cures,” “Quacks in the Arts,” and “The Evils of Quackery.” The illustrations are enjoyable and the accompanying captions are helpful, though I would have liked to see a bit closer integration with the text.

Regrettably, attempts to eliminate quacks have not succeeded, and likely never will. Indeed, one could argue that they are more prevalent than ever. Perhaps that’s why, in recent months, I’ve seen advertisements in magazines, newspapers, store windows, and especially the internet, for a wide range of “miraculous” products, including copper bracelets claimed to alleviate pain; “ionized water,” alleged to reverse the aging process, lower blood pressure, and increase one’s capacity for aerobic activity; magnetic apparatus claimed to be able to cure anything from tired feet to arthritic pain; and the ever-popular pyramid, alleged to do everything from improving sleep quality, to extending the life expectancy of pets, to a property of special interest to chemists – producing “a change in the molecular structure” of foodstuffs, supposedly detectable by “a spectrographic reading”. “Artificial flavorings in food will lose [sic] their taste, but natural flavors are enhanced. The taste of foods change [sic]; they become less bitter and acid.” (Quotations taken from a website). As the French say, “Plus ça change, plus c’est la même chose” (“The more things change, the more they remain the same”), or maybe as P.T. Barnum put it, “There’s one born every minute.”

Three factors that likely contribute to the proliferation of quacks and their products in today’s world are an increasingly scientifically illiterate populace, a growing fascination with the occult, and especially the exponential rise of the internet, that vast repository of unchecked information. While quacks’ claims seem ludicrous to people with even a modicum of scientific training, they may seem eminently reasonable to an otherwise intelligent person who believes in things like lucky numbers, astrology, never uttering the word “no-hitter” during a baseball game, and even “the Curse of the Bambino” – let
alone one for whom conventional medical treatments have proven ineffective, and who is willing to clutch at any straw, however flimsy.

One can almost come away from *Quack, Quack, Quack* with the sense that quackery and sound medical practice are separated by an enormous gulf, making them easily distinguishable. However, as with most things, there is a murky middle ground where distinctions are not so easily made, to which Helfand devotes little attention, yet which raises interesting questions. Does the use of “invented” diseases such as halitosis to sell products constitute quackery? What of the marketing of legitimate drugs through television commercials that urge people to ask their physicians to prescribe them, without actually identifying the conditions they are meant to treat? What about complementary and alternative medicine, such as acupuncture, aromatherapy, faith healing, the mind-body connection, defined by NIH’s National Center For Complementary and Alternative Medicine as “a group of diverse medical and health care systems, practices, and products that are not presently considered to be part of conventional medicine.” Are their practitioners to be considered quacks until a scientific basis for their efficacy is found? What of treatments like acupuncture that produce beneficial effects, even if their explanation (balancing the qi or energy flow in a body) is nonsensical from a Western standpoint? What of hospitals and physicians who refer their patients to alternative practitioners? What about pharmaceutical manufacturers that continue to promote drugs without disclosing emerging evidence of serious side effects?

These questions suggest that the binary classification of quack—non-quack is oversimplified, and call to mind a distinction about sin from traditional Catholic theology. Three criteria were required for an act to be seriously sinful. First, it must be intrinsically wrong, second the person committing it must know that it is wrong, and finally, the person must give full and free assent to it. Related to quackery, the corresponding criteria might be that a given treatment or medication must be ineffective, that the person advocating or selling it know that it is ineffective, and that the person nonetheless promote it (here, presumably, from a profit motive). Absence of one or more criteria would be a mitigating factor to help make finer distinctions.

Whatever one’s opinion, however, Helfand’s book makes interesting and enjoyable reading to anyone interested in medicine and pseudomedicine.