Nineteenth-century medicine always professed an affiliation with science, but a doctor was not automatically a scientist. In fact, many physicians, men as well as women, placed the role of healer above (or in opposition to) the role of producer of medical knowledge.

These criticisms notwithstanding, Out of the Dead House is a brilliantly nuanced contribution to our understanding of nineteenth-century women physicians, American medicine, and the rhetoric of medical discourse.


Reviewed by D. Graham Burnett, Ph.D., Princeton University, History of Science, Princeton, New Jersey 08544.

In a thoughtful epilogue to this multiauthor volume, Ronald L. Numbers signals the significance of the whole enterprise: what we have here is nothing less than a sustained effort to recover the history of the dominant medical science before “scientific medicine” achieved its ascendancy in the 1880s and 1890s. What was this scientific medicine avant la lettre, avant le Pasteur? Medical geography was a suite of diverse theories and practices—neo-Hippocratic in flavor, spatial in perspective, cartographic whenever possible—that worked to make sense of health and disease in terms of place, migration, chthonic, and atmospheric influence, in short, in terms of the whole array of features we might now call “environmental conditions.” If one closes this handsome and well-illustrated book with a good many questions, this is no failing on the part of Nicolaaas A. Rupke and his authors, but rather an indication of the importance, complexity, and novelty of the issues left on the table after the 1996 conference that generated it.

Eleven essays and two brief tailpieces make up the present work. Convery Bolten Valencius provides a useful historiographical introduction that supercedes available bibliographical surveys of medical geography in the nineteenth century and reaches for the current relevance of a recovered history of early “environmental” medicine. She emphasizes American perspectives, but this is consistent with her area of interest—her second essay in the volume details popular conceptions of health and place in the settlement of the trans-Mississippi West—and is suitably balanced by the first full section of the book, which groups five essays under the banner “European National Practices.” Rupke’s own contribution on Adolf Mührý, Göttingen’s “Humboldtian Medical Geographer,” anchors this section, though the subsequent piece on Mührý’s critic and rival, August Hirsch, which ought to have added continuity and scope to the volume’s coverage, turns out to be
weak and preoccupied with all-too-contemporary (if seemingly perennial) definitional problems among modern disciplinary geographers. To its credit, it will certainly remind most readers how difficult it is to read nineteenth-century German academic prose.

Shorter sections on “Colonial Discourses” and “Cartographic Representations” round out the volume. The latter section serves as an engaging forum on the scope and limits of “Humboldtianism” as a term of analysis. Rupke joins Karen E. Wonders in presenting a gallery of the distinctive Humboldtian graphical innovations (isolines, hypsometric charts, etc.) as they were borrowed by medical theorists and practitioners in mid-century middle Europe; Jane R. Camerini takes up the cartographies of disease in the Berghaus atlas and its English-language progeny, Johnston’s *Physical Atlas*. Her close analysis of transmission and publication history shows what is too often missing from other efforts in the volume to deal with graphical material, and though she has taken on classically “Humboldtian” works here, she uses them to press a point she has been developing in other contexts for several years—namely, that the category of “Humboldtian” science has come to be used too loosely by historians of nineteenth-century science, who, in the process, both miss the specificity of Humboldt’s work and obscure what she takes to be larger changes in thematic mapping and its broader politico-cultural significance in the “Age of Revolution.” She is surely onto something here.

More critical, however, is the light that *Medical Geography in Historical Perspective* sheds on that heart of darkness where medicine, race, and colonialism run together in the nineteenth century, with world-historical implications that reverberate to the present day. If at times “medical geography” seems nearly a synonym for emergent tropical medicine, there remains a sense that attention to the medical science of place offers new lines of approach to the pressing issue of medicine and empire. As Michael Osborne points out, imperialism “enabled” medical geography, which returned the favor: it was above all a discourse that made science the arbiter of locales and informed crucial debates about degeneration, acclimatization, and racial character. A number of the best essays in this volume examine these dynamics, including Mark Harrison’s piece on British medical topography in India and Warwick Anderson’s contribution on race and nation in tropical Australia. At stake in these chapters is the power of specific colonial situations to shape and be shaped by medical-geographical discourse: The Mutiny of 1857 whipped up administrative imperatives, and those whippy tails could wag the dogs of medical theory; similarly, the mobilization of particular concepts of pathology could, conveniently, make a white Australia medically necessary. Adroitly handled, as here, these strong-ish program stories can be compelling.
The issue on which they often turn, however, is the issue that looms largest as one reaches the last pages of the volume: what happened to medical geography in the tumultuous years that saw the rise of bacteriology and laboratory medicine? Did it live on in the cartographies of epidemiology? In the social medicine of hygiene and urban studies of poverty and disease? Or did it vanish, replaced by new problems and new solutions? (In which case the continuity of cartographic representation is a red herring.) What became of environmental causality in the context of contagion? These are large questions that this volume cannot answer, though it has things to say on each. Finally, most tantalizingly, what can we make—critically, politically—of the move to scientific medicine, of the shift from diseases of place to diseases of the body, from the mal-aria of the tropical zones to the native body as a pool of infection? The shift fits so nicely with the new subject-knowledges demanded by bureaucratic modernizers in the colonies. Does the administrative tail wag the dog even here? Is there a research program strong enough to show us that it does?

Either way, much remains to be understood in this fascinating field, and we are indebted to this volume for its long strides in important directions.

DOI: 10.1093/jhmas/jrh048


Upon encountering the opening dedication, “To those who value the timeless precepts exemplified by the life and work of William Osler,” a reader of this latest volume from the American Osler Society might be tempted to ask “what did Osler exemplify and for whom are these examples useful?” While no thematic compilation of articles can respond to such questions in full, the authors represented in this collection provide insightful perspective on the matter.

The first section on “personalia” includes essays that explore the person of William Osler through topics ranging from psychoanalysis of his dreams to his self-professed bibliomania and his representation in the pages of the New York Times. Osler, the man, is also explored through his relationships with a mentor, a colleague, a friend, and a patient. The allure of these accounts extends beyond mere Oslerism, because they describe relationships with individuals who are often themselves interesting historical figures.

The second section, “Writings,” explores the reception and context of several influential pieces penned by Osler. One author examines the impact