
In this pathbreaking and courageous study, Robert N Proctor not only tells a fascinating story but also makes an important historiographical critique. The horrors of Nazi science have been documented with almost missionary zeal over the years, he observes, leading to a one-dimensional portrayal of Nazi Germany as an intellectual backwater and Nazi science as quackery. In the process, many notable scientific achievements which complicate this image have been lost to historical memory. Resurrecting this “flip side of fascism” (p. 277), Proctor challenges readers to contemplate what it means for fanaticism, crime, and callousness to have coexisted with common sense and rigorous scientific inquiry.

Using the Nazi war on cancer as a vehicle for addressing these broader concerns, Proctor describes an impressive array of Nazi achievements in medicine and public health: mass-screening programmes for early detection of cancer went hand-in-hand with government-sponsored propaganda initiatives to “enlighten” the public about the wisdom of prevention. Rising concern about occupational cancers led to more rigorous labour protection laws. Nazi scientists sang the praises of fresh fruits and vegetables while warning against the dangers of artificial preservatives and colourings. Germany was home to one of the world’s most vigorous anti-alcohol and anti-tobacco campaigns, and Nazi scientists were the first to link smoking with lung cancer.

These activities offer one reason to dispense with the “scarecrow” image of Nazi science; the complexity of Nazi science offers another. “Nazi science”, Proctor insists, “was not a monolith” (p. 250). Scientists of the same ideological stripe disagreed over everything from the hazards of X-rays to the role of meat consumption in causing cancer. Moreover, their ambitions sometimes faltered in the face of more immediate priorities: occupational health and safety protections were rolled back when they interfered with production quotas, and health enthusiasts feared alienating the public with their demands for austerity, especially during the war. This, in turn, led to inconsistencies and a certain degree of hypocrisy in the tobacco and alcohol temperance campaigns. Ideology, Proctor has ample occasions to observe, was often a far cry from reality.

One of the book’s most important achievements is to place the Nazis’ war on cancer in the context of their more well-known, sinister ideological goals. X-rays, for example, were used not only for early detection of cancer, but also for sterilizing the “racially unfit”. Initiatives to promote a healthy lifestyle and a safe workplace were intended for the sole benefit of the “racially fit”; such initiatives were fuelled not by a humanist concern for the welfare of individuals, but rather by the desire to maximize their productive and reproductive performance. Out of context, Nazi occupational and public health initiatives may look familiar, but they were rooted in fundamentally different assumptions about individual moral worth.

In this sense, the Nazi war on cancer was future-oriented, with its participants striving to create an exclusionary sanitary Utopia. In a more immediate sense, however, mass-screening programmes and public “enlightenment” campaigns would also have served as vehicles for securing a basic consent to, if not support for, the regime, and it would be interesting to learn more about how successful they were. Although Proctor does not discuss this sociological
dimension in depth, he suggests that an appreciation of Nazi health initiatives can help us “better understand how fascism triumphed in the first place” (p. 278). Indeed, future studies of the public reception of Nazi health initiatives may find that they made fascism more attractive—but, granted the sensitivity of health enthusiasts to public opinion and their ambivalence about potentially unpopular moves, we may also be in for some surprises. In the meantime, The Nazi war on cancer will draw a wide readership, thanks to its novelty, its scholarly merit, its imaginative illustrations, and the willingness of its author to confront, frankly and candidly, the moral dilemmas arising from his research.

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Roger Cooter, Mark Harrison and Steve Sturdy (eds), Medicine and modern warfare, Wellcome Institute Series in the History of Medicine, Clio Medica 55, Amsterdam and Atlanta, Rodopi, 1999, pp. iii, 286, Hfl. 150.00, $83.00 (hardback 90-420-0546-7), Hfl. 45.00, $25.50 (paperback 90-420-0536-X).

The history of medicine and war is a field that has seen more and better research in the last decade. Two volumes edited by Roger Cooter, Mark Harrison and Steve Sturdy—the second one is reviewed here—are part of this trend and make their own contributions to it. Medicine and modern warfare offers ten case studies and an introduction. In the latter Mark Harrison uses Max Weber’s concept of modernization as rationalization in industrial societies to set the frame of the topics treated in the volume. Two central traits of the relation of the military and the medical in the twentieth century stick out: medicine contributed to the rationalization of the military, e.g. by replacing traditional forms of keeping discipline with scientific forms of surveillance and indoctrination. This medicalization of the military was accompanied by a militarization of medicine that was part of a larger process of a weakening of boundaries between the armies and societies in an age of total wars. As Harrison emphasizes and the contributions in the volume make clear, this does not result in a unified picture of an easily militaristic medicine. Instead complex forms of tensions, transitions and exchanges between wartime and peacetime, military and civilian medicine are characteristic.

The editors have chosen a loosely chronological order for the contributions ranging from the Spanish-American War of 1889 to post-Second World War American psychiatry. It seems, however, tempting to sort the contributions into three groups based on different aspects of modernity as defined in the introduction. The first set of texts by J. T. H. Connor (professionalization of American physicians resulting from the Cuban war of 1898), Michael Worboys (Almroth Wright’s years at the Army Medical College) and Claire Herrick (British and American evaluations of Japanese sanitary services in the Japanese–Russian war of 1905) all show how physicians portrayed their profession as a means for the modernization of armies at around 1900. A second group of texts by Cay-Rüdiger Prüll (British and German pathology in the First World War), Ian Whitehead (training of British military doctors in the Second World War) and Mark Harrison (on the medical services of the Indian troops serving in Europe 1914–15) all take a deeper look at the Great War and the changes it brought about in military medicine.

The third, and to the reviewer most challenging group of papers, tackles problems of transitions and tensions between military and civilian medicine, respectively of medicine under war- and