Book Reviews

mild infections as oral thrush and vaginal yeast infection, or as more ominous systemic candidiasis in the bloodstream. And while conventional medicine would fear such rare candidiasis, especially in its most immunologically vulnerable patients, the public would eventually hear from alternative practitioners about the seemingly broader public health threat of ‘chronic candidiasis’, an apparent consequence of modern habits of diet and pharmaceuticals (though, ironically, to be treated in part with antifungal azole drugs). Indeed, within orthodox medicine itself from the 1960s onwards, modern technologies of chemotherapy and organ transplantation were producing ever more immunologically vulnerable patients, to the point where the formerly rare disease of aspergillosis could climb alongside systemic candidiasis as a truly feared affront to patients and modern medicine. Such diseases would achieve still greater prominence from the 1980s onward in the context of the AIDS epidemic, which would similarly increase the clinical significance of such regionally distributed mycoses as coccidiomycosis and histoplasmosis. Modernity has thus featured centrally in the story throughout the past one hundred and fifty years, even as notions of modernity themselves have changed.

Ringworm is often recognised through its ‘heaped-up edges’, and a critical subtheme of the book concerns marginality itself, whether related to the gaze of practitioners or historians, or to the professional careers of those engaged with fungal diseases. With respect to the former, as Homei and Worboys relate, most fungal diseases have been experienced by patients outside the domain of direct medical oversight. As such, they further draw attention to the wide domains of suffering and care that take place outside such professional purview. With respect to specialisation, the authors nicely problematise expected natural histories of inevitable differentiation and specialisation. They demonstrate how, in real time, those confronting fungal infections – whether dermatologists and surgeons in the nineteenth century, or mycologists and infectious disease experts in the twentieth century – have had to link their fungal interests to broader careers in practice or the laboratory. While forming more centralised organisations (though against differential backdrops in the United Kingdom and the United States), those engaged with fungal disease have had the common experience of local adaptation and ongoing evolution, in far from inevitable directions.

I do have a few minor quibbles. The chapter on endemic mycoses and allergies is a bit more enumerative than the others, and the discussion (in the chapter on candidal infections) of the fixed-dose combination antibiotic/antifungals Mysteclin and Mysteclin-F reverses the chronology of the introduction of Mysteclin-F and the forced withdrawal from the market of such remedies by the US Food and Drug Administration in 1969. But these are minor issues, and we should be grateful to the manner in which the authors have turned our attention to these microbes and diseases all around us. Such diseases should no longer be hidden from our gaze.

Scott H. Podolsky
Harvard Medical School, USA

doi:10.1017/mdh.2015.34


In 1907 Aoyama Tanemichi, dean of Tokyo Imperial University’s Faculty of Medicine, gave a speech on the campus of that institution in which he declared, ‘when it comes
to medical science, our nation is a German colony’ (p. 3). Hoi-eun Kim, the author of *Doctors of Empire*, rightly takes note of the strangeness of this pronouncement, given that the perceived threat of Western imperialism, and the need to resist it, had been a political and cultural obsession in Japan for more than half a century. Kim’s work explores the context within which ‘colonisation’ in relation to medical knowledge became a point of pride, rather than a source of anxiety. He argues that the bilateral movement of doctors and medical and cultural knowledge between Germany and Japan in the late nineteenth century profoundly shaped medical science in Japan and in its colonies of Taiwan and Korea, while impacting Germany as well, albeit to a lesser extent.

Anyone with even a cursory knowledge of Japan’s medical history in this period is no doubt aware that the first generation of modern physicians were trained under German doctors who came to Japan as so-called ‘hired foreigners’ (*oyatoi gaijin*) and that many of Japan’s most famous physicians in this formative era, men like Kitasato Shibasaburō, Mori Rintarō, and Kure Shūzō, studied for some years in Germany. But Kim takes the familiar story of unidirectional influence and complicates it, shedding light on a long process of asymmetrical exchange and ‘messy’ entanglements. Adopting an approach he terms ‘double prosopography,’ following Lawrence Stone, Kim focuses specifically on the interaction of German and Japanese figures and strives to give equal weight to both sides of the cultural divide.

The work opens by exploring the ‘push’ and ‘pull’ factors that initiated the Japanese government’s decision to model medical education on that of Germany. Kim argues that German imperial ambitions in East Asia neatly aligned with Japanese desire to appropriate cutting edge medical knowledge and that these concerns of the early 1870s compelled Japan’s adoption of the German medicine, although the early modern tradition of ‘Dutch learning’ also played a role. Chapter 2 examines the aftermath of the decision to introduce German medicine and traces the struggles of three ‘generations’ of German physician-teachers at the government financed medical school in Tokyo and at its successor, Tokyo Imperial University’s Faculty of Medicine. When Leopold Müller and Theodor Hoffmann arrived at the school in 1871 they faced the daunting task of building a programme from scratch, with limited facilities, students who knew little or no German, and a culture of learning that focused on memorisation and the preservation of ‘secret knowledge’. However, the Japanese proved to be fast learners and by 1900, Erwin Baelz, the last most famous German ‘hired foreigner’, had come to be what Kim terms a ‘marginalized soul’ as the Faculty of Medicine came to be staffed Japanese physicians who had trained under German teachers, both in Japan and in Germany.

In Chapters 3 and 4, the focus shifts from Japan to Germany and to the experience of Japanese doctors in Germany. Chapter 3 is, arguably, one of the most interesting in the book. Kim focuses not only on iconic figures like Kitasato and Mori but also on the experience of now obscure self-funded students, who vastly outnumbered the recipients of prestigious government scholarships. Many of these private students had only limited education before coming to Germany, and because of family and financial pressures they often stayed in Germany for only a few months. Kim does an admirable job of tracing out the varied nature of the study-abroad experience by focusing on both the education and daily life of the medical students. This discussion continues in Chapter 4, in which Kim explores the racism and Orientalism that Japanese students encountered in Germany. He concludes that while some students responded by interiorising a sense of inferiority, others returned to Japan was their nationalism strengthened and with a new sense of mission.
Race is the theme of Chapter 5 as well, but Kim returns to German physicians in Japan, examining their engagement with Japanese culture via the emergent discourse and practices of anthropology. Kim explores the racial theories of Erwin Baelz, an influential figure due to his decades of residence in Japan and wealth of publications. Baelz argued that the Japanese constituted a specific ‘race’ that had emerged as a result of the mixing of three racial types, Korean–Manchurian, Mongol–Malayan and Ainu, and he associated these racial types with not only different regions of Japan but also different social classes. Kim astutely notes that Baelz’s theory of the Japanese race, while largely ignored in Europe, provided a paradigm for future research by Japan’s first generation of physical anthropologists such as Koganei Yoshikiyo and Kubo Takeshi. Both would attempt to ‘empirically’ demonstrate the inferiority of the Korean ‘race’ in relation to the Japanese and thereby justify Japanese colonial rule. Chapter 6 and the epilogue focus on the long-term effects of the encounters traced in Chapters 1–5. Kim argues that the peculiar configuration of the medical profession in Japan – the intense factionalism of medical elites, the privileging of laboratory medicine over clinical practice, the sometimes blind faith in bacteriology, and the close relationship between government and medicine – had its roots in the movement of medical knowledge and personnel between Germany and Japan in the preceding three decades.

There is much to admire in this work, which joins a growing body of literature exploring German–Japanese cultural and social relations. Relatively brief (the main body of the work is 161 pages) and written in a clear and accessible style, it is well suited for classroom adoption. It is, however, not without some weaknesses. While Kim explicitly states that he wants to avoid the ‘great man’ approach to medical history, with the notable exception of the discussion in Chapter 3, famous physicians are at the centre of this account. It would be interesting to learn more about what the sojourn in Germany meant in the long term for the many privately funded physicians who made their way to Germany, if only for a few months. Chapter 6 is largely devoted to a retelling of the dispute over the cause of beriberi and the factionalism in which it was embedded, the subject of Alexander Bay’s recent and far lengthier work *Beriberi in Modern Japan* (University of Rochester Press, 2012). These issues notwithstanding *Doctors of Empire* is an illuminating work that shows how imperial relations of power shaped the medical profession in Germany, Japan and East Asia.

Susan L. Burns
The University of Chicago, USA

doi:10.1017/mdh.2015.35


Maimonides’ treatise *On Rules Regarding the Practical Part of the Medical Art* is a welcome addition to his medical *opera omnia*. It was lost to scholars for centuries before it was identified in the Biblioteca Nacional de Madrid (formerly MS Escorial 888, fols. 109a–123a) by the renowned Jewish scholar Moritz Steinschneider, who initially thought it was simply another copy of the same author’s work *On Asthma*. Upon examination, Bos and Tzvi Langermann, however, discovered that the work was, in fact, a separate monograph. It is composed in Maimonides’ favoured aphoristic (*fuṣūl*) format.