his scientific reputation, Hammond now sought to apply clinical tools and methods to the resolution of neurological puzzles. Over the next two decades, though, his extravagant but ill-supported claims for his specialty, his flamboyance, and his evident opportunism gradually undermined his professional standing, even among his neurological colleagues. Increasingly isolated even in the professional organizations he had once led, he at length abandoned his thriving society practice, and removed himself to Washington, D.C., opening an opulent private sanatorium and setting up a business on the side, producing and marketing animal extracts. In the elite professional circles in which he had once moved, Hammond’s reputation now sank rapidly, and by the time of his death, on 5 January 1900, most of his substantial fortune had been dissipated.

Blustein’s book provides a thorough and workmanlike account of this long and colourful career. Her discussion of its professional and scientific dimensions is often acute and insightful, and she makes clever use of its vagaries to document the shifting and at times contradictory meanings of “scientific medicine” in the second half of the nineteenth century. Hammond, once one of the leading “scientific” physicians of his age, is all but forgotten in ours, remembered, if at all, as an efficient and energetic Surgeon General in the Civil War years who was brought down by political intrigue. The clinical orientation he attempted to establish as the foundation for medical research has rapidly given ground, unable to compete successfully with the laboratory medicine practised in the medical schools, research institutes and hospitals. In his own eyes the centrepiece of his life, “Hammond’s scientific work had already, by the end of his life, come to be seen not so much as mistaken as beside the point” (p. 233). His career, however, has much to teach us about the social context of late nineteenth-century American medicine.

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A hundred years ago epidemic polio was a new and frightening phenomenon. Today, following the development of effective vaccines in the 1950s, it has all but dropped from the consciousness of the developed world. But history does not set precedents for the future: not all epidemics can hope for such speedy elimination, and no prospects for AIDS can be deduced from the history of polio. By contrast, the lessons of the present may inform our exploration of the past. In this book Naomi Rogers has used the consciousness of the social meaning of epidemics derived from AIDS, to explore the American experience of polio in 1916.

The social response of Americans to the 1916 polio epidemic reflected a society in which medicine, and the public perception of it, were at a crossroads. The new scientific medicine was active and accepted, but when science failed to provide answers, resort was still made to traditional hygienic explanations. Thus while doctors experimented with anti-polio sera and fiddled with lumbar punctures, and home healers wrote in their hundreds offering assistance to the scientific authorities, the general public were being urged to keep clean, eliminate flies and eat properly. American society had not yet moved beyond its nineteenth-century conceptions, either socially or scientifically, and it still looked to traditional scapegoats in times of epidemic crisis. Notably, even the scientists refused to recognize that the problem might lie among the clean middle classes and not in the festering slums of recent immigrants. Popular perspectives were beginning to change, as reflected in hopes that science would either provide or endorse a solution to the problem of polio, but public responses to the epidemic also revealed anxieties about the ecological consequences of modern life—about automobile fumes and canned food as well as about faulty drains and filthy privies.

This is the situation deftly described by Rogers in her thoughtful andconcisely-written book. As she notes, the polio story has “long been considered one of scientists and science”, of progress and success, and has until now been neglected by social and medical historians. In
view of this neglect, it is a pity that she has not chosen to anchor her story more firmly in its epidemiological context by providing a summary of the routes of polio transmission. Historians without immediate access to this information may find themselves wondering, for example, whether the campaign against flies was misguided, or why it was that the age-incidence of epidemics changed over the years. This deficiency apart, there is much of interest in Rogers' account, and she has done well to draw historical attention to the subject of polio.

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