understand, represent and treat the females of their society is directly related to ideas of the Mother as shaped by the specific circumstances of the moment. In Argentine history, heavily laden interpretations of Mother abound. For example, folk legends dating to the 1840s worship a mythical figure of a dead woman known as la Difunta Correa whose breasts continued to provide milk for her baby; Eva Perón was venerated as the Mother of the nation to her followers in the 1940s and even after her death; and finally, the mourning and protesting Mothers of the ‘Disappeared’ of the 1970s–1980s Dirty War have become international icons of political motherhood. In this context, it makes sense to explore the early twentieth century, a time of intense cultural reproduction of medicalised ideas about mothers and the female body.

After an Introductory chapter in which Eraso establishes her scope and goals, she elucidates her novel interdisciplinary methodology, and provides context on Argentina’s main contextual details (e.g. large-scale European immigration; conflicts over religion and secularisation; rising military forces; and of course, gender ideology and nationalism more broadly). After this, the book is organized into three parts (in seven chapters), in turn examining medical ideas and institutions; the press and fiction; and art. All three parts are coherent discussions with well-organised and documented chapters, complete with abundant and interesting source material and illustrations. Over the course of the book, Eraso shows how these three sets of ideas shaded into each other and mutually informed ideas about mothers’ bodies, roles and agency, accomplished by, in Eraso’s words, ‘bringing together medicine, society, and culture . . . eschew[ing] dichotomous counter-positions between the contents of medicine on the one hand, and ideas, notions, and range of cultural expressions on the other.’ (p. 253) Indeed, she emphasises the integration of these discourses.

The book successfully makes the case that there are relevant connections between medicine, art and popular culture in our exploration of gender ideology and sex roles, for example, the role of the influence of institutions on ideas about the maternal body. It will be valued for its contribution to Argentine social and cultural history and interdisciplinary feminist studies. It will also be discussed by historians examining the significance of eugenics and other medicalised political ideas and practices in this part of the world. Ultimately, Representing Argentine Mothers is a well executed and thought-provoking study that will be read with great interest by a broad community of scholars.

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Jeanne E. Abrams, Revolutionary Medicine: The Founding Fathers and Mothers in Sickness and in Health (New York: New York University Press, 2013), pp. 314, $30.00, paperback, ISBN: 978-0-8147-8919-3.

All too often, histories of the American founders focus on the heroic and the lofty, as though the day-to-day experiences of these mortal human beings were not also comprised of deeply felt struggles with health and sickness. Jeanne E. Abrams sets out in Revolutionary Medicine to offer just such a recasting. Her presentation puts familiar characters – the Washingtons, Franklins, Adamses, Jeffersons and, to a lesser extent, the Madisons – in a new light. Many of the major medical questions of the day are engaged here, from excruciatingly high miscarriage and neonatal death rates, to struggles with disease in an age of poor hygiene, especially malaria and smallpox.
Readers will take several major themes from Abrams’s narrative. They will be struck by the centrality of dentistry to general health, a centrality still unheeded in post-health care reform America. Abrams reminds readers that even the brightest among us can get caught up in medical fads – bloodletting chief among them for the founders – much to our detriment. The difference, for Abrams, is that the founders were committed to the spirit of science, ‘though unfortunately many of their advanced ideas were lost over the next several decades’ (31). Such a commitment, she suggests, facilitates national progress. This theme is especially resonant to the contemporary ear in Abrams’s detailed depiction of early debates about vaccination.

Abrams wishes to set public health as a cornerstone of civic-mindedness. She notes, for example, that ‘The founders were witness to the fact that epidemics not only brought personal devastation to individuals, families, and communities; they also played havoc with commerce’ (3). Abrams’s narrative concludes, appropriately, with Jefferson, who spent much of the end of his life envisioning medical education in America, culminating in the establishment of the University of Virginia. As Abrams notes, however, Jefferson’s concern was not only the development of a medical profession, but the training of ‘laymen with a good understanding of contemporary medicine . . . that would enable them to make more informed decisions about treatment for themselves and their families and provide them with the tools to lead a healthy lifestyle’ (223). Jefferson’s politics and his views of medicine were intertwined. Abrams’s discussions of the role the men played as statesmen, and their wives as homemakers (which included medical care), offer readers rich detail. And one cannot help but marvel at how far we have come – especially with reducing infant mortality – at least for some Americans with access to the best care.

Abrams makes clear that for these founders, medical progress, and the distribution of its fruits, were measures of the new nation’s success. At the same time the book’s scope raises questions. First, focusing as she does on a limited selection of elite subjects, Abrams does not offer readers a full picture of the book’s larger promise of chronicling ‘revolutionary medicine.’ For example, one could quibble with Abrams’s selection of ‘Founding Fathers and Mothers’ and ask why these figures should be the focus aside from the fact that they are the most famous figures of the era. This introduces a degree of class bias that undermines the book’s larger project. Abrams notes, for example, with the death of the Adams’ son, Charles, that ‘illness and death were a constant factor in the daily lives of people from all walks of life during the era, and the well-to-do and powerful were far from immune’ (158). Similarly, Abrams fails to discuss the medical care afforded slaves (with the exception of Jefferson’s decision to vaccinate his) and the health of non-elite rank and file soldiers who fought in the revolutionary war. Given the extraordinary role wealth – as well as race–plays in access to healthcare, one can profitably read Abrams’s text specifically for its elisions of inequality.

Second, we might applaud Abrams for steering clear, for over 200 pages, of the shark-ridden waters of contemporary health care reform. Yet, in the final pages she could not keep up her resistance. Here, small things may matter. For example, Abrams refers to the Patient Protection and Affordable Care Act (ACA) as ‘the Affordable Health Care Act,’ not only not the ACA’s correct name, but possibly an allusion to the GOP’s 2009 House draft bill of that name which never became law. More problematically, in the final passages, after noting the founder’s civic-mindedness and interest in public health, Abrams claims that the founders would have ‘balked’ at the ACA’s mandate to purchase health care. While this might be true, the claim is worthy of discussion. After all, as Abrams shows, the founders were also pragmatic men plugged into the science of their day. They loathed anachronism. Assessing the founders’ views of the individual mandate (which is designed
to minimise free-riding and moral hazard) would require situating those views fully in contemporary America, with its large population and economic complexity, as well as the extraordinary cost and technological sophistication of medical care itself. One can only guess how context would inflect their civic mindedness. It is too bad that Abrams does not engage with this question more fully.

Taken within its scope, however, Revolutionary Medicine achieves its aim. Those interested in adding to their understanding of the most famous American founders will benefit from Abrams’s focus on medicine. Public health scholars interested in this history may want more, however. Accordingly, they could use Abrams’s text as a starting point to undertake a more expansive study of what the American political tradition teaches us about the intersections of medicine and politics, and the interrelations of liberty, public health and civic obligation.

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Harald Nilsson, Erik Wallers Samling av Medicinhistoriska Medaljer, Studia Numismatica Upsaliensia 8 (Uppsala: Uppsala University Press, 2013), pp. 517, SEK 457, hardback, ISBN: 978-91-554-8701-0.

The publication of privately assembled collections of medically related medals dates back to 1773 when a volume titled ‘Beschreibung einer Berlinischen Medaillen–Sammlung, die vorzüglich aus Gedächtnis–Münzen berühmter Ärzte bestehet : in welcher verschiedene Abhandlungen, zur Erklärung der alten und neuen Münzenwissenschaft, in gleichen zur Geschichte der Arzneigefahrtheit und der Litteratur eingerücket sind by J. C. W. Moehsen’ was published. In 456 pages illustrated by some fifty copperplate engravings supplemented by an index of names and medical events Johann Carl Wilhelm Moehsen, the personal physician of Friedrich the Great of Prussia, explained in great detail the reason for each issue as well as the biographical and historical background of these carefully collected medical medals. Karl Asmund Rudolphi, a Swedish-born professor of Anatomy in Berlin published his collection of personal medals of physicians and scientists in alphabetical order, without illustrations, in three different editions, in 1823, 1825 and 1829; over this brief span of years his collection grew from 387 to 709 items. Karl Ludwig von Duisburg, a physician and surgeon of Danzig, published his collection of 611 medical portrait medals in 1869, again without illustrations, arranging them alphabetically, but grouping each cohort by country of origin. These early works were all published with introductions, texts and descriptions in Latin, then still the prevalent scholarly language of medical history. In 1859 Hippolyte Kluyskens, an emeritus professor of medicine and surgery in Ghent, published a volume with hundreds of portrait medals illustrated by copperplate engravings and, in 1886, a general catalogue of his extensive numismatic collections that contained short descriptions of upwards of 600 medically themed medals. The latter volume for the first time included institutional medical medals in addition to those with the more conventional portraits. Furthermore both of Kluyskens’ works mingled doctors with scientists and indeed with other distinguished intellectuals and, most importantly, both works eschewed Latin for a vernacular language, in this case, French. The pre-eminent catalogue of a private collection of medically themed medals remains ‘Medicina in Nummis’ published in 1937 by Eduard Holzmair. This famous work carefully describes 5,557 such items in German and photographically illustrates 325 of them, all of which