

types pervaded the presentations. Capturing the diversity of urban life and exploring the issues faced by urban dwellers, vaudeville attracted a diverse audience and provided models, manners, and an egalitarian creed.

Barth's book is fascinating but reminiscent of old-fashioned social histories which provided great quantities of data but never satisfactorily proved anything. His impressionistic studies whet the appetite but never wrestle with the difficult problems of establishing relationships between and among institutions and the people and societies they affect. Barth's cities never reflect the ethnic and economic differences that existed. He never justifies his cavalier dismissal of the factory, the school, the church, and political organizations. European roots of several institutions are noted but lightly dismissed. Over-generalizations and contradictory statements weaken the book. Finally, the unusual footnoting style, typographical errors, totally incomprehensible sentences, and Barth's belief that readers should accept without adequate documentation his assurances that his assertions are true impair the value of the book. Nevertheless, as a series of impressionistic essays on important nineteenth-century urban institutions, the book is worth reading.

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*American Medicine in Transition, 1840-1910.* By John S. Haller, Jr. (Urbana: University of Illinois Press, 1981. Pp. xii, 457. Tables, illustrations, appendixes, notes, selected bibliography, index. \$27.95.)

This book will well serve local historians with an interest in nineteenth-century medicine. In fact, it will perhaps be more welcome than most of the existing surveys of medical triumphs and great doctors of the previous century because it so nicely recaptures the scent of day-to-day medicine in "Victorian" America.

John S. Haller is unconcerned with recounting such heroic accomplishments of nineteenth-century medicine as the germ theory of disease, the discovery of anesthesia, the public health movement, and the early achievements of modern scientific medicine in education and technology. One will find very little in the book to explain innovative medical procedures and therapies, whether surgical, technological, or chemotherapeutic. Also surprisingly, one finds little concerning nursing, hospitals,

or mental institutions. A second unusual feature of this survey of American medicine from 1840 to 1910 (and Haller does confine himself nicely to this time span), is that little of the reader's attention is directed to the uniquely American characteristics of the medical nineteenth century. Each chapter blends the experiences of American and European physicians and their patients so thoroughly that the ocean between them seems to have disappeared.

What Haller does discuss could be described as the social climate of medical theory and practice in these decades, and the topics he selects are many of the ones local historians encounter routinely in fee books, doctors' journals, letters and diaries of patients, newspaper advertisements or editorials, and the general medical presuppositions of literate witnesses to the rapidly changing landscape of the late 1800s.

The first four chapters—on the humoral theory of disease, the proper ways to let blood, the most frequently used drugs of the average regular physician, and the sceptics, sectarians, and religious challengers to traditional medicine—are not greatly different from many available works on American medicine. They are, however, filled with interesting, entertaining examples for a non-specialist audience. A glance at the notes will further instruct the reader on the wide variety of materials available to reconstruct the history of medicine in this period. The second four chapters—on midwives and their demise, changes in medical education, the ethical codes and business practices of ordinary physicians, and the importance of Darwinian theory in changing the ways doctors viewed their role in society—are so constructed as to send any industrious local historian to the libraries and archives with new questions to pursue.

The questions arise not directly from the book, but from the fact that Haller rarely advances any sustained thesis or argument to clarify the direction of medicine in "transition." The closest he comes to describing what happened in these years can be expressed well with a comment of a late-nineteenth-century Chicago physician. Considering the achievements of Pasteur and Koch, Dr. G. Frank Lydston saw them as "deranging the substratum of rational philosophy, upon which rested the entire superstructure of medical science" (p. 296). Haller is essentially arguing that the deranged superstructure of medicine occurs on *all* levels of patient and physician experience, and his purpose is to suggest that one cannot possibly understand the transition in medicine if inquiry is limited to progress in medical science. It is thus more

than an argument that social history or the patient's history are important in themselves, the premise of many social histories of medicine available. Rather, one cannot understand the change to a scientific medicine, to stranger treating stranger, without understanding the social bankruptcy of older medical systems in early industrial America.

Few physicians were displaced by the seismic social and scientific change of the late nineteenth century. They clung to older therapies or practices while paying eloquent lip service to the new. Day-to-day medicine, Haller reveals, "moved at a snail's pace" (p. ix). In showing this, with abundant examples to hold the reader's attention, the book may surprise those who have been comfortable with stories of progress in medical science or content with anecdotes of the terrible trials for the patient of yesteryear. Since there are many specialized studies available elsewhere, the scholar may similarly despair at Haller's refusal to draw fine chronological boundaries, clear, challengeable historical theories and models, or sharply defined conclusions. But the rich image he recreates of American medicine is bound to captivate the general reader and stimulate interest in our common medical past.

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*John W. Foster: Politics and Diplomacy in the Imperial Era, 1873-1917.* By Michael J. Devine. (Athens: Ohio University Press, 1981. Pp. x, 187. Illustrations, notes, essay on sources, bibliography, index. \$15.50.)

This book is an ambitious undertaking, for in only 115 pages Michael J. Devine writes the biography of a "man viewed by his colleagues as America's 'first professional diplomat'" (p. 5) and assesses his "contributions to the development of American foreign policy during the era of imperialism" (p. 5). The thesis of the volume is that John W. Foster's diplomatic record "demonstrates clearly the continuity in the evolution of American foreign policy from Ulysses S. Grant to Woodrow Wilson" (p. 4), and the conclusion is that Foster's "unique contribution to American diplomacy was his transmission of nineteenth-century idealism, nationalism, and a sense of world mission to men . . . who were to form and implement foreign policy in the twentieth century" (p. 116).

The son of British immigrants who settled in Evansville, Foster was a reserved young man when he attended Indiana University at age fifteen. He graduated as valedictorian of his