Why We’re All Here — Promoting Ourselves, Mentoring Others

Shortly after our 2006 meeting in Halifax, all heck broke loose around our shop, and I was remiss in sharing any presidential direction or insight. My apologies if I have seemed removed or unengaged to any of the membership. Behind the scenes I have dealt with Watermark concerns, passing of the baton for our listserv administrator, listserv etiquette, committee creation, local arrangements mentoring, and some banking annoyances. To that end I would like to thank Eric for hanging in there as editor, Cynthia Kahn for taking over as listserv coordinator, Richard Behles for his insight into the vagaries of listserv moderation, all the Committee members for Nominations, Program, and Awards, Christopher Lyons for Local Arrangements for Montréal 2007, Kathy Donahue and Russell Johnson for Web updates, and my rock, Pat Gallagher, for exemplary treasuring.

In anticipation of our 2007 Montréal meeting, as well as my second year as president, I want to share a philosophical platform with you. This platform is threefold:

1. Inclusion — the idea that we try to involve our membership in discussing or sharing our difficulties and triumphs. The broader idea is that we remain included in our institution’s budgets and directives.
2. Relevancy — the idea that we and our collections continue to be relevant to our constituents and our institutions.
3. Mentorship — the idea that those of us who are experienced curators, archivists, and librarians help our members who are just beginning in their fields.

Additionally, we can all learn from one another as we continue to be included and stay relevant.

Indeed, these three themes are substantially intertwined. I would propose that there are ways in which we can programmatically help one another while increasing our visibility and relevancy to our institutions. In this era of expensive online licenses, small staffs, database-driven research, and uninformed administrators, how do we, as my teenager so succinctly put it, “stay sexy”?

I know that many of you have your own examples of how you highlight your collections and services with the use of exhibits, enhanced Web content, catalogs, lecture series, workshops with professors, guest scholars, and brownbag lunches. Opportunities to feature our own services and collections came with a move to a new building in 2004. We were suddenly blessed with new space, new constituents, and yes, a renewed enthusiasm.

Subsequently there have been three projects (one is pending) that greatly increased our visibility, emphasized our staff and collection, illustrated a high level of collegiality, and showed how relevant we are to our own health science institutions and to other disciplines. One of the important concepts for those not blessed with supportive academic programs, new or enhanced space, helpful staff, endowments, or administrative encouragement is that we must take advantage of novel opportunities, untapped resources, underutilized space, and unrequited relationships. We must, with a nod to an overused phrase, “think outside the box.”

In July 2006 our recently installed Walker Display System (which created 300 linear feet of gallery space)
was used by the Guild of Natural Science Illustrators (GNSI) to hang 60 pieces of their juried artwork for a three-month period. During that time, their yearly conference flowed through our building and onto the University of Wisconsin campus. We did a complementary exhibit in our historical reading room called “Science Made Clear: The Art of Illustration at the Ebling Library,” which highlighted comparative anatomy and other natural history rare books from the collection. This foray into art has had a huge impact on intercollegial opportunities, with the space now being booked for a Master of Fine Arts graduate student exhibit, a medical student art show, and a national traveling exhibit of photographs called “Reclaiming Midwives,” co-hosted by our History of Medicine and Bioethics Department.

While I never intended to get into the art gallery business, it has brought visibility, potential donors, and a lovely aesthetic into our professional lives. It also offers interesting opportunities by which to use our collections to complement the art. When “Reclaiming Midwives” opens in late April, we will be installing an exhibit on the history of Wisconsin midwifery, prepared by my associate, Mary Hitchcock, and a history of science student, Kala Kluender.

Application: Think of other departments that might use your space to display their wares. Perhaps your Cartography Department would like to hang some maps in your area — and you could do an exhibit or annotated bibliography on medical geography. Perhaps someone in Art History could show their graduate students your sixteenth-century illustrated anatomy texts to compare with their usual da Vinci course material.

Speaking of students, we recently completed a practicum with a UW School of Information and Library Science (SLIS) graduate student, Meredith Torre. The project consisted of 140 hours in which she produced an exhibit from start to finish. She created a theme, found books to support her idea, did research on individual titles, wrote text descriptions, and created verbal and illustrative promotional material. “A Spoonful of Sugar: Medicinal Preparation in the Domestic Sphere” has been well received by the campus, SLIS, and our health science students, who always welcome a bit of history in their study space. Meredith, a budding rare book librarian, learned an enormous amount, and we acquired an exhibition that we would not have had time to research and install ourselves.

Application: Practicums, while time consuming, include others in their planning and execution. They offer the opportunity to mentor someone who may eventually choose a curatorial, library, or archival career. Your library or archives looks very helpful and collegial in the eyes of the student’s affiliate. Do not limit yourself to university students — there are some very motivated high school students who might be interested in rare book conservation, archival processing, or describing artifacts. Do not limit yourself to history or library students. Someone in computer sciences might get you started with a digitization project or offer an iterative Web tutorial, replacing that ten-page paper handout to historical resources that you have been using for years.

In creating and promoting exhibits we have also learned that there are many ways to do them economically. Who knew that a colorful scarf could be used to support an eighteenth-century book of cookery? Seashells and geodes make lovely stands? That black felt can be cut and shaped around a triangle of cardboard instead of purchasing expensive Plexiglas? Or an investment in a laminator and a color copier is far less expensive than using a professional printer for your promotional posters and invitations? In that regard, we hope to have a seminar this year for our campus colleagues (some 38 department libraries, multiple art galleries, etc.) to set up a resource sharing consortium beyond the usual book and journal distribution that we now provide.

Application: Examine your institution; see who else creates visual displays. Might you help one another with artifact stands? Does another department have a digital camera you might borrow? Have you considered local historical societies when you think of resource sharing?

A curatorial colleague of mine has suggested that — Google or no Google — nothing will ever replace the importance of the entities we refer to as Rare Books and Special Collections. Tell that to our administrators, colleagues, patrons, and donors, who can be either supportive or asking that uninformed question, “Why do we keep all this old stuff?” So, how do we stay included and relevant, while mentoring our constituents and one another?

I would like to invite others, as our editor has done in the past, to submit similar projects or ideas to The Wa-
so that all of us may learn or blatantly copy from one another:

1. The Watermark should reproduce some of the more global questions and responses that have come on our listserv. For example, why should we keep the Cumulative Index Medicus in hard copy when we now have IndexCat online? Or, What do people do with their old catalogs from rare book dealers? Or, How do people do exhibitions inexpensively? The listserv is useful, but having an archival record of such in-house concerns would be appreciated.

2. Many of us are seasoned curators, librarians, and archivists. Most of us have small budgets, little staff, cramped or compromised space, etc. How do we help mentor those coming up in the field — short of the annual meeting — which not everyone can attend — and The Watermark? Might our Web site be further enhanced with a pedagogical content, a mentor page, a “helping the youngsters grow up to be full-fledged professionals” type of presence? One way might be to discuss sharing resources with one another, much as we hope to do on our campus. Should we do a survey to see what our newer members might find useful?

I look forward to discussing these ideas with all of you in Montréal, in The Watermark, on our listserv, or via any other avenue we can find. The door is open; please come “talk” to me.

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Montréal 2007: The 34th Annual Meeting of the Archivists and Librarians in the History of the Health Sciences, May 2nd and 3rd

I know that I am biased, but I think that our upcoming meeting in Montréal is going to be a good one. First of all, the venue itself is well worth a visit. Montréal was founded in 1642 and was the commercial centre of the French Empire in America until being ceded to the British in 1763. In the nineteenth century Montréal developed as the economic capital of Canada, with the headquarters of commercial and financial concerns located here, along with many industries. The wealthy built large mansions upon the slopes of Mount Royal, which dominates the Montréal skyline. The poor lived in row housing in various parts of the city, always close to the industries where they worked long hours in often dangerous conditions. The English, Scottish, and Irish immigrants of the nineteenth century were later joined by Eastern Europeans (especially Jews fleeing pogroms and poor conditions), Italians, Greeks, and Chinese in the twentieth century. More recently, Montréal’s immigrant communities have reflected the desire of the Québec government to strengthen the “French fact” of Québec, so francophones from Haiti, Morocco, Algeria, Lebanon, and Vietnam have come in large numbers. This combination of influences can be seen in the architecture, much of which remains thanks to the efforts of a vocal preservation movement in the 1960s and 70s, and in the restaurants, shops, churches, and other cultural institutions. Montréal is a great city for walking and eating. Its French face makes it feel more European than North American, which is highly appealing.

The second magnet is the fascinating programme put together by Brooke Fox, Russell Johnson, Tim Penny-cuff, and Suzanne Porter. The title for this year is “Crouching Realia, Hidden Archives: Creating Access to Historical Medical Collections.” There are a number of interesting talks being given by our colleagues on how they have handled their special collections and artifacts, largely, though not exclusively, in relation to digitization. We have been very fortunate in that we have been given the use of one of the large classrooms of the Graduate School of Library and Information Studies of McGill University for free, for which I am very grateful.

There is also the dinner on Wednesday night, which will be at the Bonaparte Auberge and Restaurant, 447 Rue St.-François-Xavier. This is a beautiful restaurant in the oldest section of the city, Vieux Montréal (“Old Montréal”), where greystone buildings, cobbled streets, churches, and the riverfront have stood in for a number of European cities and epochs in films. We will be in a room with a fireplace. There are seats for up to 80, so register soon. The restaurant is justly famous for its cuisine, which is, of course, French. After sampling the food (one of my more onerous tasks as Local Ar-
rangements Chair), I spoke to the directeur de salle about our needs. At first he told me that the absolute minimum for a banquet was US$80 per person, but with some discussion (and the shedding of some manly tears), I was able to get a wonderful deal with several choices for each course, including vegetarian options, for much less. The dinner will only cost US$50 per person. There is also a cash bar and, those from generous institutions take note, an extensive wine cellar. A continental breakfast and box lunch, along with administrative costs, are an additional US$25, so altogether I hope that US$75 is not too much.

The afternoon tours will go to the Osler Library of the History of Medicine, which dates from 1929 and houses, in addition to the original collection of 8000 wonderful books bequeathed to McGill University by Sir William Osler, an additional 70,000 primary and secondary works. There is also a visit to the Rare Book Division of McGill’s Humanities and Social Sciences Library, where Eleanor MacLean will show us some of its great biology holdings. The fact that there are no buses to rent or fees to pay is one of the ways in which I have tried to keep costs down without compromising on quality.

This year we are sending out the registration forms and information to as many members as possible via the ALHHS-L listserv and personal e-mail, as well as posting it on the ALHHS Web site <www.library.ucla.edu/libraries/biomed/alhhs/>. If you have not yet received this information, please contact me using the coordinates below.

**Schedule of Events**

**Wednesday, May 2, 2007:**

4:00-6:00 p.m. Steering Committee meeting, Graduate School of Library and Information Studies, McGill University, 3459 McTavish Street <www.gslis.mcgill.ca/Location.htm>.

6:30 p.m. Meet in the lobby of the Centre Sheraton Montréal, 1201 Boulevard René Lévesque Ouest, to go to the Bonaparte Auberge and Restaurant by métro (subway), or you can make your own way over.

7:00-9:30 p.m. Dinner at the Bonaparte, 447 Rue St.-François-Xavier <www.bonaparte.ca/en/index.html>.

**Thursday, May 3, 2007:**

8:00-9:00 a.m. Continental breakfast at the Graduate School of Library and Information Studies, McGill University, 3459 McTavish Street, ground floor, Room MS42 <www.gslis.mcgill.ca/Location.htm>.

9:00-9:25 a.m. Katherine E.S. Donahue, Louise M. Darling Biomedical Library, UCLA, “AIDS Poster Collection Online: the Anatomy of a Project.”

9:25-9:50 a.m. Joan Echtenkamp Klein, Claude Moore Health Sciences Library, University of Virginia Health System, “Now Appearing in 3-D on the Web: Medical Artifacts.”

9:50-10:15 a.m. Scott D. Grimwood, SSM Corporate Archives, St. Louis, “Revealing the Hidden Archives: How We Increased Awareness of Our Archives and Its Collections.”

10:15-10:30 a.m. Break.

10:30-10:55 a.m. Sarah Burge, Cushing/Whitney Library, Yale University, “Preservation in a Medical Historical Setting.”

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10:55-11:20 a.m. Guy Cobolet, Bibliothèque inter-universitaire de médecine et d’odontologie (BIUM), Paris, “The BIUM Historical Collections and Digitization at the Largest Medical Library in France.”

11:20-11:45 a.m. Lisa A. Mix, Archives and Special Collections, University of California at San Francisco Library, “Digitizing the Japanese Woodblock Print Collection at UCSF.”

11:45-1:00 p.m. Business meeting and box lunch.

1:00-3:30 p.m. Tours (groups one and two to be determined before embarking).

Afternoon tours: Group 1:

1:00-2:00 p.m. Tour of the Rare Book Division, Humanities and Social Sciences Library, McGill University <www.library.mcgill.ca/rarebook/cube.htm>.

2:00-2:15 p.m. Walk to the Osler Library of the History of Medicine.


Afternoon tours: Group 2

1:00-1:15 p.m. Walk to the Osler Library.

1:15-2:15 p.m. Tour of the Osler Library.

2:15-2:30 p.m. Walk to the Rare Book Division, Humanities and Social Sciences Library.

2:30-3:30 p.m. Tour of the Rare Book Division.

Online registration for the American Association of the History of Medicine (AAHM) should be up on its Web site in early February <www.histmed.org/>. I have been working with AAHM chair George Weisz to ensure that there are no problems for ALHHS members booking rooms at the AAHM hotel, Le Centre Sheraton, without the hassles that occurred last year. Also, as one of two people responsible for the book exhibition, I have done my best to ensure that things work smoothly for our colleagues interested in exhibiting.

I think that this year’s meeting will be stimulating, enriching, and enjoyable. If you have any questions, or if I can be of any help to you, please do not fail to contact me.

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Book Reviews


In this erudite volume, which was her dissertation, Emily Booth sets out to highlight a neglected aspect of writings of Walter Charleton, namely, his identity as a physician. He is not a featured player in most histories of medicine. He was the physician to Charles I of England and, while the latter was in exile, the future Charles II. Charleton is better known among historians of seventeenth-century natural science than among historians of medicine.

Charleton lived in a religiously, politically, and intellectually volatile age that included the execution of Charles I, the rise of Cromwell, and the Restoration of
Charles II. Aligned with the Royalists, except for a sagacious choice of pro-Cromwellian patrons during the Commonwealth, Charleton moved intellectually from completely supporting Jan Baptista Van Helmont’s views of sympathetic medicine to accepting the Epicurean theory of atomistic matter. This theory was challenged as atheistic, but Charleton later turned to the work of Pierre Gassendi, which attempted to overcome the problem of atheism in the classical theory of atomism. The crucial aspect of Charleton’s natural philosophy was whether and to what extent his experimental work influenced the philosophy of his writings.

Booth sets out to disprove several assumptions made about Charleton by earlier scholars: first, that he was a follower of the “Scientific Revolution”; second, that he was an experimental natural philosopher; and finally, that he was a barometer of the Scientific Revolution. Booth challenges scholars such as John Henry, Steven Shapin, and Peter Dear, who have held these views. The work of these scholars was based in large part on Charleton’s Latin writings rather than on his medical texts written in English. Booth is especially critical of “the Shapinian account” of late seventeenth-century epistemology.

Booth examines three of Charleton’s medical works, The Animal Oeconomy (1659), Enquiries into Human Nature (1680), and Three Anatomic Lectures (1683) to prove her hypothesis, “that this physician did not demonstrate adherence to the principles of identity and epistemology upon which natural philosophical authority was based according to prominent historians of scientific knowledge such as Steven Shapin.”

Charleton’s The Animal Oeconomy, according to Booth, shows that he differed from other contemporary natural philosophers in that, for financial reasons, he was forced to protect his status as a physician in order to earn a living. He applied Cartesian mechanism to human physiology but did not allow himself to become associated with the theories, which his potential patients would find unsatisfactory in a physician.

In her chapter on Enquiries into Human Nature, Booth maintains that Charleton espoused the traditionally defined processes of the animal economy within a seventeenth-century anatomical framework. She finds that those aspects of his self-presentation as a physician are minor, in spite of his experience with experimentation, which occurred in the years between the publications of the two works. Rationality remains paramount over experimentation and eclectism is still present.

Booth argues that Charleton showed eclecticism, which was necessary for his medical practice, in Three Anatomic Lectures. He was not wealthy, and therefore dependent upon the fees paid to him by patients. He participated in experimental science while associated with the Royal Society; yet his medical works are those of professional man enhancing his role as a physician. Previous scholars have failed to examine the discrepancy between his practice and his textual self-presentation. Booth uses these neglected works to place Charleton within his medical context and does not isolate him in the rarified atmosphere of the pure philosopher. By comparing his early texts to his later medical writing Booth illustrates that empiricism was not central to his identity as a physician. A physician in the real world of his patients attempting to make a living was bound not to venture too far from the “standards of practice of his day.” Two elements of this standard were the gravity of the person and dependence on classical learning.

Booth’s annotated bibliography of Charleton’s works and bibliography of his manuscript material in the British Library, Bodleian Library, Library of the Royal Society, and Library of the Royal College of Physicians should be of special interest to librarians.

Booth earned honors for her degree from Adelaide University in psychology and history. She then received a doctorate from Latrobe University and is now employed in the Australian publishing industry.

Nancy L. Eckerman
Ruth Lilly Medical Library
Indiana University School of Medicine


The title of Judith Houck’s Hot and Bothered might bring to mind a racy mystery, an exposé of modern sexual practices, or a steamy romance that one might read on the beach, and in fact, this title has been used for a number of books of this ilk. However, her Hot
In *Hot and Bothered*, Houck examines how the development of hormones for medical use has coincided with changing social environments for women, particularly the rise and fall of feminism, and how these factors affected the way in which doctors and women participated in the treatment of menopause as a disease. She divides the history of menopause in the twentieth century into three eras, 1897-1937, 1938-1962, and 1963 to the present, according to “the developments in the treatment of menopause and shifts in the public lives of women” (p. 5). However, she covers 1897 to 1980 in much greater detail than the period thereafter, which she only cursorily covers in the epilogue. She is careful throughout to note that the “medical and cultural constructions of menopause were not foisted upon women solely by male physicians and social commentators” and that “women, too, have participated in the cultural assessment and construction of menopause” (p. 3).

One weakness of this study is that it covers only the way in which menopause has affected white middle- or upper-class women. Houck acknowledges this omission while explaining that a study among women of other racial and socioeconomic groups would have been difficult because of the lack of research materials related to these groups. As she explains, it was white middle-class women who could afford to seek treatment, and the scholarly and popular literature of the period was either about or geared toward this population. Although her research is certainly rich enough as it is, an investigation of how menopause has affected other groups, perhaps performed through the study of folk remedies, the utilization of oral histories, or the research of tenement houses and clinics papers, would certainly be a fascinating study, an important addition to the study of menopause in the twentieth century, and a valuable complement to her book.

A careful perusal of the introduction and a close study of the table of contents are helpful, if not necessary, to understanding the content and organization of the text, which is arranged both topically and chronologically. This leads to some repetition of information but seems to be necessary for Houck to make her detailed arguments, the complexity of which can be illustrated by looking at those that she makes in her chapters relating to the third era (1963-1980). In these chapters, she notes that the increase in the use of hormones in the early part of this third era was largely spurred by Robert A. Wilson’s *Feminine Forever* (1966), a book that established menopause as an estrogen deficiency disease (p. 6). This book was released during the rise of the women’s movement and “capitalized on both the fledgling women’s movement and the sexual revolution” (p. 8). However, feminism encouraged women both to embrace and to reject hormones. One group of women, through the advice of friends, family, and popular literature, began to take an active role in their own health care, and in doing so, demanded that their doctors prescribe estrogen, so they could be in control of their own bodies. Other feminists pointed out that the drug companies stood to make a lot of money off women who took hormones from the onset of menopause till the end their lives. These women insisted that the loss of estrogen associated with menopause was a normal part of the aging process and did not require medicalization.

Houck is to be commended for her judicious use of both primary and secondary sources in this work. She acknowledges the archivists and special collections at the American Medical Association, the Sophia Smith Collection and Archives at Smith College, the Arthur and Elizabeth Schlesinger Library, the Henry A. Murray Research Center at Radcliffe, the manuscripts and University Archives of the University of Washington, the National Archives and Records Administration, and the Wisconsin State Historical Society. She particularly expresses her gratitude to historical librarian Micaela Sullivan-Fowler at the Ebling Library of the University of Wisconsin, Madison, for her “encourage-
Houck is careful to include women’s voices as evidenced by records of “Women in Midstream” (WIM), “a support group and informational clearinghouse for menopausal women sponsored by the Seattle YWCA” (p. 190). Used extensively throughout Chapter 8, “At the Will and Whim of My Hormones,” WIM’s records include correspondence from women as well as two sets of questionnaires (p. 300). The dense introduction is light on notes but heavy on information as it outlines Houck’s complicated, intertwining arguments. The bulk of the text is very heavily annotated with over seventy pages of notes at the end of the text, divided according to chapters.

As an assistant professor at the University of Wisconsin, Madison, in the departments of Women’s Studies, Medical History and Bioethics, and History of Science, as well as the Center for Women’s Health research, Houck employs a multidisciplinary approach, which is evident in her work. Her writing style is academic, but the fascinating subject matter of this book should entice other readers as well. The text should prove useful to students in a number of fields, including social history, medical history, and women’s studies, and is suited for undergraduate, graduate, and postgraduate work. At $39.99, this book is a good value and would well serve a variety of collections, from the most general to more specialized women’s studies and medical history collections.

Houck’s Hot and Bothered may not be this year’s steamy romance novel to read on the beach, but it is an intellectually stimulating study of the medicalization of menopause in modern America. On her Web site <history.wisc.edu/TPHWG/TPHWG/judith_houck.htm>, she explains that she is “most interested in the history of women’s health and illness,” and one hopes that it is not long before we see more from this new writer on these subjects.

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In the preface to Who Shall Take Care of Our Sick?, McCauley points out that although histories have been written about the phenomena of hospital development and about individual hospitals, we still know little about the development of religiously sponsored hospitals in the United States. She states that Catholics ran ten percent of all American hospitals by 1900 and that the Roman Catholic Church proclaimed that building and managing hospitals was both a priority and a duty. Using New York City from just before the Civil War to 1920 as her example, she asks questions such as what made Catholic hospitals distinctive, why did patients choose them, and what kind of care was provided. She further proposes to examine the role of Catholic hospitals in medicine and religion and the relationship between health care and religion in the Catholic Church.

McCauley begins by giving a brief overview of the history of hospitals in New York City and of the early development of Catholic hospitals in the United States. She points out that, by the late nineteenth century, the majority of patients in New York hospitals were foreign-born (frequently meaning Catholic) and the Catholic Church, while charging that public hospitals were not treating Catholic patients well, was in turn accused of not taking care of its own. She also introduces her main thesis, that the involvement of Catholic nuns in health care and the founding of hospitals was not a passive response to orders from the church hierarchy but an active decision made by the sisters themselves.
Next, McCauley addresses the history of some of the various orders of Catholic sisters in New York City, including their connections to orders in Europe, as well as the gradual change, beginning in the late seventeenth century, from strictly monastic life to that of active communities. She points out that although these women were seeking a new mission — caring for the poor and the sick — they continued to base their choices on the Rule of the order and their strong faith. McCauley includes a discussion of Nativism in the mid-eighteenth century and the work of Catholic sisters nursing in the Civil War. She also examines the cultural and ethnic differences between the various orders, gives a general description of convent life, and provides some information about the status (or lack thereof) of the nursing profession prior to the twentieth century.

From that background information, McCauley looks at the care and treatment provided by Catholic hospitals to their patients. In the nineteenth century, hospital “care” was mostly that — care of chronically ill patients with little hope for cure or improvement. As mainstream medical practice improved, Catholic health care did so as well. Working with physicians of all faiths, the sisters offered modern health care, but did not promise miracles, and saw hospitals as part of their larger agenda of social welfare.

In the chapter about finances, McCauley explains the relationship between the Catholic hospitals and the church hierarchy, pointing out that, even when there was approval and support from the diocese, for the most part the orders took on the financial obligations of the hospitals themselves, with no promises of funding from the church itself. Thus, the sisters became very good money managers and fundraisers. She also looks at the funding that hospitals received from the state government for the care of indigent patients and how that funding was continued even after funding for Catholic education was disallowed by the state.

The late nineteenth and early twentieth century was a time of medical, nursing, and hospital reform. How did the orders of Catholic sisters adjust to the changes, which included the need for nursing education and specialized hospital administrative skills, while maintaining the financial responsibility for their hospitals? McCauley answers these questions, even showing some actions taken in the mid-twentieth century.

Using archival collections from the Archdiocese of New York, the city of New York, several religious orders, and various hospitals, along with a number of government reports and a massive number of secondary sources, McCauley does a thorough job of answering the questions posed in her preface. She does a good job of putting her research in historical and cultural context as well. Her main argument, that these women were strong and independent within a constrained environment, is addressed and firmly supported.

Let me begin this review by mentioning that I consider myself a bit of a Victorian literature junkie. I gravitate towards the unusual and esoteric, and have read things that I suspect most people have not even heard about (Ever hear of I Say No? I’ve read it.) However, this book presented me with some books that have certainly escaped my notice, making it rather hard to know if the conclusions that the author, Kristine Swenson, makes are valid. In most cases, plot summaries are included (though not in all.) Swenson’s arguments, however, are cogent and usually quite convincing. Using feminist literary theory, this book examines novels of the Victorian period that featured women doctors in key roles. From Rudyard Kipling’s *The Naulahka* to Margaret Todd’s *Mona MacLean, Medical Student*, this interesting analysis discusses the development of the woman doctor in the literature of this period, as a reflection of the changing attitudes of the Victorian society towards the woman physician.

Naturally, given the period, most of the novels are potboilers and romances, ending with the woman marrying, sometimes at the price of her career. In one work, *A Woman Hater*, the woman doctor, Rhoda Gale, is not the romantic focus of the book, and does not wed at its conclusion. In fact, its author, Charles Reade, incorporates into the character biographical information relating to such notable physicians as Elizabeth Blackwell, Elizabeth Garrett Anderson, Sophia Jex-Blake, and Mary Putnam Jacobi. Dr. Gale, however, is also much more sexually ambiguous, and in fact falls in love with the ingénue of the story, Ina Klosking (who, of course, eventually weds the hero). It seems that if a woman doctor was to succeed in the profession, she needed to be uninterested in men, and therefore, in the marriage that could distract her from her chosen profession.

These novels I have just mentioned are not ones that come into frequent discussion in Victorian literature classes (and I would be surprised to find if anyone else has heard of them, much less read them). I did a quick check of Amazon.com to see how many of them were actually in print, and found that, in fact, not many were. It’s a shame really, but it also means that it would be rather difficult for a casual reader to get hold of them. However, most will be found in libraries (some more easily than others. I only found twenty-five copies of *Mona MacLean, Medical Student* listed in WorldCat, and thirteen of *Dr. Janet of Harley Street*). As a result, this book will probably not get the same kind of attention that is given to analyses of other, more widely known Victorian novelists, like Dickens and Eliot.

The entry of the woman doctor into Victorian society seems to be an outgrowth of post-Crimean war nursing. Therefore, the book also discusses a number of nurses in Victorian literature. Unfortunately, the nurses discussed are seen in a much less forgiving note than are the doctors, even those doctors who dismiss their chosen career for the love of a good man. Florence Nightingale and her major work, *Notes on Nursing*, are dismissed out-of-hand with comments like “*Notes on Nursing* undermined Nightingale’s initial aspirations for nursing by linking it to housekeeping and by asserting that ‘every woman’ is a nurse.” This discussion of Nightingale, of Mme. Rubelle from *The Woman in White*, and of Edith Archbold in *Hard Cash* is the weakest in the book. It is quite hard to fit the Victorian image of the nurse into a modern feminist context and Swenson, in my opinion, does not really succeed in doing so. I also think that an appendix with plot summaries and character names would be a useful edition. While plot details are included for most of the books (though not for books like *The Woman in White*), the information is not linear, and can be hard to piece together if you are unfamiliar with the text (and most readers will be unfamiliar with these texts). However, dwelling on these small points is unfair to this otherwise excellent book. The analysis fairly uses feminist theory without trying to impose twenty-first-century values on a nineteenth-century audience. For libraries with medical humanities collections, this is a worthwhile addition.

Patricia E. Gallagher, M.A., M.L.S.
New York Academy of Medicine
**New Books**

Mike Flannery of the University of Alabama, Birmingham writes: “The Dictionary of Medical Biography (Westport, Conn.: Greenwood, 2006), five volumes, 1616 pages, ISBN 978-0-313-32877-0 is now available. Although pricy at nearly $800, after perusing the set I think I can safely say it is really destined to be a standard ‘go to’ source in our field. Edited by W.F. and Helen Bynum, it presents good, reliable biographical sketches on over 1000 medical figures great and small. It also has extensive historical essays on Western medicine, Southeast Asian medicine, Arab medicine, Japanese and Chinese medicine. I think we’ll find our patrons and ourselves consulting it time and again, which will do much to allay the sticker shock. Here’s the link if you’re interested: <www.greenwood.com/catalog/GR2877.aspx>.”

— Clark Lawlor.


“The scholarship displayed in this book — both literary and medical — is immense. Over the past decade there has been increasing interest in the relationship between literature and disease [and] Lawlor’s book is a superb contribution to this field of study, as it extends the literary study of consumption back into the seventeenth and eighteenth centuries, while significantly broadening this discussion beyond the major consumptive writers ... to produce a veritable canon of consumptive writing. Lawlor’s book is the best history of this literary disease that we have.”

— Professor Alan Bewell
Department of English, University of Toronto


_The New York Times_ reported on November 16, 2006: “In August 1854 cholera broke out in the London neighborhood of Golden Square, a few blocks north of Piccadilly Circus, killing nearly 700 people in less than two weeks. At the time the disease was believed to be caused by ‘miasma,’ or bad air. But Dr. John Snow, a London anesthesiologist, thought otherwise. With the help of the Rev. Henry Whitehead, assistant curate at a local church, he linked the epidemic to a well, establishing that the disease was transmitted by contaminated water. Snow’s “ghost map” of the epidemic’s dead has become an exemplar of the visual display of information. ... Johnson writes that the story of Snow’s discovery and the events leading up to it needs to be told in two time frames, ‘the long durée of urban development, or the microscopic tight focus of bacterial life cycles’.”

The November 6, 2006 issue of _The New Yorker_ has “Sick City: Maps and Mortality in the Time of Cholera” <www.newyorker.com/critics/content/articles/061106crbo_books>, Steven Shapin’s extensive review of _The Ghost Map_.

This book seeks to explain an important, unanswered question: how consumption — a horrible disease — came to be the glamorous, artistic Romantic malady. It argues that literary works (cultural media) are not secondary in our perceptions of disease, but are among the primary determinants of physical experience. In order to explain the apparent disparity between literary myth and bodily reality, Lawlor, Senior Lecturer in English at the University of Northumbria at Newcastle upon Tyne, examines literature and medicine from the Renaissance to the late Victorian period, and covers a wide range of authors and characters, major and minor.
Collections, Exhibits, and Access

News from Chicago

The American College of Surgeons Archives has recently processed most of the papers of the founder of the College, Franklin H. Martin, and his wife, Isabelle H. Martin. Found in quite brittle condition, the papers have undergone deacidification treatment and can now be accessed by researchers. The papers have yielded some valuable research materials dealing not only with the history of the ACS, but also Chicago hospital history and much more. Items that may be of interest to ALHHS members from the Franklin H. and Isabelle H. Martin Papers, 1872-1935, include the following:

Forty-eight three-ring binders of “Memoirs,” including photos, postcards, correspondence (including with Woodrow Wilson), telegrams, ACS Clinical Congress, Section, and Community Health Meeting programs and news, invitations, theater programs and publicity, news clippings, journal entries, diaries, documentation of travel to international surgical meetings and associated travel, documentation of historic Chicago and world events, and minutes and proceedings of the General Medical Board of the Council of National Defense, November 1917 - August 1918.

Papers, including correspondence regarding Daylight Savings Time (1917); the Owen-Dyer Bill on the rank of medical personnel in the military (1918); Le Collège des États-Unis d’Amerique, regarding the establishment of a medical training school in Paris (1918-1919); the Pan American Medical Association (1928-1935); and the Pan American Society, New York (1929-1931.)

Martin’s gynecology record books of case histories, 1891-1917.

Chicago Hospital and Medical School records, ca. 1872-1910.

Chicago Charity Hospital (hospital associated with the Post-Graduate Medical School of Chicago): Records of the Board of Directors; minutes of monthly meetings, 1889-1892; records of the Board of Management; minutes of monthly meetings, June 1900 - January 1906 (typewritten; includes Constitution and Bylaws, 1905, and Bylaws of the Women’s Board of Managers); treasurer’s accounts, disbursements and receipts, October 1902 - June 1910.

Women’s Hospital of the State of Illinois: Proceedings of the medical and surgical staff, March 1879 - March 1893, plus 1902 loose (typewritten).

Women’s Hospital Association / Association of the Women’s Hospital: Executive Committee minutes, July 26, 1907 - May 21, 1908 (typewritten; includes contractual agreements regarding operation of the hospital, including financial transactions).

Shore Inn Company (conservation work not yet completed): Plans for luxury hospital in Chicago, including Acts of Incorporation, Bylaws, correspondence, and minutes, April-December 1901.

Chicago Medical College: Records of the Trustees; annual and special meeting minutes, April 1, 1872 - June 1906 (written in longhand by John H. Hollister, Secretary, includes typewritten articles of agreement between Chicago Medical College and Northwestern University).

Post-Graduate Medical School (conservation work not yet complete): Record of holdings of common stock, 1891-1907; accounts, dues, wages, donations, 1897-1899; blueprint, copy of plans, and contract for the Laboratory of Anatomy and Operative Surgery, 1899; audit report for six years ending 31st March 1904; and Treasurer’s accounts, 1902-1910.

Those interested in visiting the ACS Archives, please contact:

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Ex Libris Sigmund Freud: An Exhibit of Books from the Library of Sigmund Freud

Columbia University is privileged to house part of the library of Sigmund Freud, the founder of psychoanalysis and one of the most influential intellectual figures of the twentieth century. The library consists of 770
titles dating from 1554 to 1938 and is rich in nineteenth and early twentieth-century psychiatry, neurology, and psychoanalysis. Reflecting Freud’s interests during the early part of his career, there is much relating to dreams, hypnotism, hysteria, and sexuality. Approximately 54 volumes have Freud’s signature or marginalia or contain inscriptions to Freud.

To commemorate the 150th anniversary of Freud’s birth in 1856, Archives and Special Collections at the Augustus C. Long Health Sciences Library is exhibiting from October 24, 2006, to February 2, 2007, over twenty-five volumes from the Freud Library, the largest number to be on public display since 1981. Included are a volume inscribed by the great French neurologist, Jean-Martin Charcot, to his pupil Freud; works showing Freud’s marginalia, one of which is a succinct “Dumm!”; a book inscribed to Freud by an Argentine admirer which mistakenly refers to him as “the learned professor of psychiatry at the University of Zurich;” and other works cited by Freud in his early writings on dreams and hysteria.

Along with these are displayed Freud items that the Health Sciences Library has acquired independently of the Library, including one of fifty manuscript pages of Freud’s Totem und Tabu, and a letter from Freud to the émigré Russian psychoanalyst, Nikolai Ossipov.

Freud took most of his library with him when he fled Vienna for London in the wake of the 1938 Anschluss. Those books he left behind were eventually purchased by a Viennese rare book dealer who sold them in 1939 to the New York State Psychiatric Institute at what was then called the Columbia-Presbyterian Medical Center. The Freud Library was transferred to the Health Sciences Library in 1978, though it remains the property of the Psychiatric Institute.

The exhibit is open during normal library hours to persons holding valid Columbia University or New York-Presbyterian Hospital ID cards. For more information, please contact the exhibit curator, Stephen E. Novak, at <sen13@columbia.edu>.

The Long Health Sciences Library is located at 701 West 168th Street. Library hours are Monday-Friday, 8:00 a.m. -11:00 p.m.; Saturday, 10:00 a.m. - 6:00 p.m.; Sunday, 12:00 p.m. - 11:00 p.m.

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Harold Varmus Papers at the National Library of Medicine


NLM has collaborated with the University of California, San Francisco, Archives and Special Collections to digitize Varmus’s papers and make them widely available. This brings to twenty the number of notable scientists who have personal and professional records included in Profiles in Science.

With his long time collaborator, J. Michael Bishop, Varmus developed a new theory of the origin of cancer, which holds that the disease is not inflicted by
external agents, such as environmental carcinogens, but arises from mutations in certain of our own genes.

“Varmus and Bishop’s discovery gave a brilliant new insight into the genetic basis of cancer, of cell growth and differentiation, and of evolution,” says NLM Director Donald A.B. Lindberg, M.D.

The two scientists found that genes in cancer-causing retroviruses are closely related to genes in normal, non-cancerous cells of many different organisms. These normal cellular genes have been preserved over one billion years of evolution and play a key role in controlling cell division and differentiation. Yet, under particular conditions — for example, events during cell division or the rearrangement of chromosomes, as well as external influences like viruses, cigarette smoke, and radiation — they can accumulate mutations that prompt the cell to divide indefinitely, the hallmark of cancer.

The surprising discovery that cancer-causing genes, or oncogenes, are versions of normal cellular genes suggests a common molecular mechanism for the many different types of cancer. It also explains why cancer is most often a disease of old age and accounts for individual differences in the response to carcinogens.

In 1989, Varmus and Bishop shared the Nobel Prize in Physiology or Medicine “for their discovery of the cellular origin of retroviral oncogenes.”

Harold Elliot Varmus was born on December 18, 1939, in Oceanside, New York. His first intellectual passion was not science, but English literature, in which he earned an A.B. at Amherst College, where he was newspaper editor, and an M.A. at Harvard University, where his work focussed on Anglo-Saxon and metaphysical poetry. He considered an academic career in literature, but was deterred, as he said, by the thought that as an English professor his students would likely feel relief if he failed to show up for a lecture, whereas as a physician his patients would be upset if he cancelled an appointment. He earned his M.D. from the College of Physicians and Surgeons at Columbia University in 1966. After reading Jacques Monod and François Jacob’s seminal papers on gene control in bacteria, he knew that his future lay in basic research.

Varmus began his extended collaboration with Bishop in 1970 at the University of California, San Francisco, where over the next decade the two showed that normal cells carried within them the seeds of cancer in the form of genes they called proto-oncogenes. As an expert on retroviruses, Varmus during the 1980s became involved in research on the retrovirus that was causing the new and frightening epidemic of AIDS. He chaired the scientific advisory committee that in 1986 proposed the name, “human immunodeficiency virus” (HIV) for the etiologic agent of AIDS.

In 1993, President Clinton nominated Varmus as Director of the National Institutes of Health (NIH), where he was a familiar figure on his bicycle as he regularly pedaled between home and office. The first Nobel laureate to head NIH, Varmus strengthened the institution’s commitment to basic research while negotiating political controversies over AIDS and stem cell research. In November 1999 he became president and director of the Memorial Sloan-Kettering Cancer Center in New York.

The online exhibition at <profiles.nlm.nih.gov/MV/> features correspondence, laboratory and lecture notes, research proposals, published articles, and photographs from the Varmus papers at the University of California, San Francisco. Visitors to the site can view, for example, Varmus’s schematic depictions of gene control in birds, an extensive exchange of letters regarding the naming of HIV, and a photograph of Varmus receiving the Montgomery County, Maryland, bicyclist of the year award.

Medical Cartoons at the College of Physicians of Philadelphia

From the silent era to the present, physicians, health professionals, governmental agencies such as the U.S. Public Health Service, and voluntary associations such as the American Cancer Society have all sought to use motion pictures to advance medical science, train doctors and nurses, and educate the public.

The Mütter Museum at the College of Physicians of Philadelphia <www.collphyphil.org> presented “The Cartoon Medicine Show: Animated Cartoons from the Collection of the National Library of Medicine,” with commentary by NLM’s Michael Sappol and David Cantor, on February 22-23, 2007. Different movies were shown each night. The first night had films
released between 1925 and 1945 and the second, between 1946 and 1965.

The film series, a rich sampling of rarely screened animated medical cartoons, presented a variety of medical themes and genres, including dental hygiene, physical fitness, physiology, mental health, malaria, venereal disease, cancer, radiology, and sanitary food preparation. Each showing consisted of ten to fifteen short animated medical cartoons by animators both obscure and well-known, including Walt Disney, Friz Freleng, Zack Schwartz, Walter Lantz, and Shamus Culhane.


**Historians Resurrect “Cartoon Medicine” for a New Generation**

Amanda Schaffer

(quoted from *The New York Times*, November 21, 2006)

In a film produced by the Army during World War II, a cartoon mosquito named Malaria Mike prepares to dive bomb a soldier named Private Snafu. When Snafu bathes at sundown and climbs out of the water, Malaria Mike clutches a bottle labeled “Old Malaria 999 proof” and draws the poison out with a device attached to his nose.

He rushes headlong at the soldier. But when Snafu leans down for his clothes, oblivious to danger, the mosquito sails past him in classic cartoon fashion and collides with a tree. The tree gasps and clutches itself, shakes and sweats with fever (the typical symptoms of malaria) and shrivels to the ground.

Later, when Snafu wakes up and leans out of his mosquito netting to kiss a picture of a sexy woman, Malaria Mike rushes in again, catching the soldier’s exposed buttocks high in the air. A bull’s-eye fills the screen.

“Private Snafu vs. Malaria Mike” was among the animated films presented on October 25 and 26 at the Cartoon Medicine Show at the National Academy of Sciences in Washington.

The show featured animated public health films from the 1920s to the ’60s — some well known, others rarely screened in the last 40 or 50 years — from the collection of the National Library of Medicine. The films cover such topics as personal hygiene, malaria prevention, cancer detection, tuberculosis screening and the safe use of X-rays.

The National Library of Medicine is also creating a series of DVDs of historical medical films, the first of which is likely to be released next fall.

“From early on, animated films were viewed as a uniquely convincing way to persuade and educate people,” said Michael Sappol, a historian at the library. Animation could get a message across while also entertaining an audience.
A film like “Private Snafu vs. Malaria Mike,” he said, “takes a lot of pleasure in destruction, speed and sex, things we typically associate with 1940s Warner Brothers cartoons.”

In the film, Malaria Mike unveils a diagram of an American soldier’s body with parts of the back and buttocks labeled prime rib, filet mignon and tenderloin. Soon after, he lands on Snafu’s rear end and says, “Why, it’s Snafu — I never forget a face,” prodding the soldier’s uncovered flesh with his finger.

The film was produced in 1942 by the Armed Forces Motion Picture Unit, which included top-flight artists and animators. Frank Capra, who went on to direct “It’s a Wonderful Life,” headed the group. Ted Geisel, also known as Doctor Seuss, led the animation division. Mel Blanc, who did the voices for Bugs Bunny and Daffy Duck, did the voices of Malaria Mike and Private Snafu, as well.

The film was part of a series that used the character of Snafu to address topics like sexually transmitted diseases, mental health, censorship and black marketeering.

The series was probably shown to over a million troops, Dr. Sappol said. And it was only a small fraction of the government’s investment in filmmaking during World War II.

Donald Crafton, an animation historian at the University of Notre Dame, said that during the war, “the animation studios made the case to the government that they were an essential industry and that these propaganda and training films were crucial to the war effort.”

Many of the public health films made during that time drew a strong parallel between the physical body and the body politic, he said. The health of the individual was linked to the success of the war effort and to the advancement of democratic ideals.

But the films also frequently trafficked in racial and sexual stereotypes, reflecting social attitudes that were widespread at the time, he said. Japanese people, for instance, were often shown as caricatures with thick glasses and bad teeth or even portrayed as germ-carrying flies.

In a 1942 film titled “Use Your Head,” a marine in the South Pacific named Private McGillicuddy defecates in the woods instead of in a prescribed latrine. A fly with thick glasses and buck teeth spots the infraction and rings a triangle dinner bell, shouting “Come and get it” in a caricatured Japanese accent.

Soon flies swarm the area and then invade the marines’ food, cackling. Most of the unit ends up with dysentery. Over the radio, the marines hear a Japanese announcer declare that an “honorable Yankee” has aided the Japanese war effort, causing his buddies to get dysentery, which “make weak like a pussy cat.”

The film, which was produced by Hugh Harman Productions for the Navy, was part of a series called “Commandments for Health.”

Five episodes of the series are now held by the National Library of Medicine.

In the postwar period, professional organizations like the American Cancer Society, the National Tuberculosis Association and the American Dental Association produced a larger share of public health films, which were shown in schools, hospitals, churches and other settings.

The body was still seen as fragile and vulnerable, Dr. Crafton said. But it “was represented more as a site of attack from within,” he added.

In “The Traitor Within,” a 1947 film by the American Cancer Society, the interior of the body is depicted as an orderly series of factories, with cells represented as workers in overalls and white caps.

When a single cell goes bad, turning into a cancer cell — shown as a dark, four-legged abstraction that begins to multiply and spread — other cells are killed and the work of the factory is jeopardized.

If the cancer cells are not removed by surgery or destroyed before they spread throughout the body, “there is no hope for cure,” the narrator says.

Some films featured at the Cartoon Medicine Show move inside the body to depict the accumulation of pus, the march of bacteria and the threats of dental decay, mental illness and crippling stomach pain, among others.

“Humor is not something you expect” with some of these topics, said David Cantor a historian at the national library. But, he added, “the use of animation helps to lighten the tone and can make the subject matter less grim.”
Generally, public health cartoons oscillated between two messages, Dr. Sappol said.

They tended to provoke anxiety about the body and its susceptibility to illness, he said.

But they also sought to reassure people that with proper vigilance — as well as the help of an expert doctor and new medical technology — dread disease could be averted.

“The films are trying to scare people, but also to manage their fears,” Dr. Cantor said, adding that public health messages must always grapple with this balancing act, even today.

In other words, he said, the message is “Be afraid — but not too afraid.”

New Jersey Health Statistics, 1877 to 2000: An Electronic Compendium of Published Reports

A new electronic resource in the history of medicine in New Jersey, compiled and annotated by Mark C. Fulcomer, Ph.D., and Marcia M. Sass, Sc.D., has been released by the University of Medicine and Dentistry of New Jersey (UMDNJ) University Libraries on its Web site <www.umdnj.edu/librweb/speccoll/njhs/>. This is the first complete electronic compendium of all documented New Jersey Department of Health and Senior Services annual reports and health statistics.

Fulcomer and Sass created electronic PDF data files by photocopying and scanning all 141 volumes of the State Department of Health annual reports and health statistics. The department’s partnership with the UMDNJ University Libraries created the distribution channel necessary to make this unique data freely accessible to researchers worldwide.

The resulting electronic files contain 1.6 gigabytes of information on historic New Jersey public health issues. The PDFs are in black and white, but some color graphics are included in the original printed reports. While the files are not searchable, volumes 1-92 (1877-1969) are indexed and provide subject access to a wide array of health and disease topics, events, and organizations documenting New Jersey health. Topics include the impact of the 1918 flu pandemic on New Jerseyans, tobacco use among New Jersey’s youth in 1892, and hygienic conditions of factory life in 1878.

The new Web site includes an introductory essay providing organizational background and an overview, sample texts and graphics, the PDF data files with annotations, a bibliography of source data in a variety of formats, and author biographies. Future plans include cataloging the Web guide in the University’s OPAC and providing additional access points through the catalog citations of the Libraries’ hard copy holdings.

Fulcomer, former director at the Center for Health Statistics for the State of New Jersey (1990-1999), now retired, is active in statistical and public health organizations and teaches at Richard Stockton College of New Jersey and at UMDNJ School of Public Health in Stratford. Sass is Assistant Professor of Health Systems and Policy Division, UMDNJ New Jersey Center for Public Health Preparedness in New Brunswick. They worked many years to compile the electronic data files, and this development was partly an outgrowth of his teaching and professional activities. They searched a number of New Jersey repositories to identify all the needed volumes, as no one library holds a complete run of the annual reports and health statistics publications.

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International Collection of AIDS Posters Available Online at UCLA

The UCLA Library launched an online collection of more than 600 AIDS posters from countries around the world on December 1, 2006 at <digital.library.ucla.edu/aidsposters>. The release of this digital project was scheduled in conjunction with World AIDS Day. The physical collection is held in the Louise M. Darling Biomedical Library History and Special Collections.

“The collection provides a fascinating insight into the many approaches that have been used to try to modify risk behaviors,” said Roger Detels, M.D., M.S., UCLA Professor of Epidemiology and Infectious Diseases. “The posters range from terrifying to amusing and reflect the many cultures from which they have been drawn, which include national cultures and risk group cultures. The collection should be of interest to anyone interested in the history of the HIV/AIDS epidemic and attempts to control it.”

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Online Publication of Dental Cosmos Offers Insights into Early Dentistry

A wealth of information that showcases the birth and evolution of the dental profession in the U.S. from just before the Civil War to the first few decades of the twentieth century is now available online through the University of Michigan School of Dentistry at <quod.lib.umich.edu/d/dencos/>. All 78 volumes of Dental Cosmos from August 1859 to December 1936 have been transferred from a print publication that, in recent years, was seen and read by only a few, to an electronic publication that is now accessible to anyone with a computer and an Internet connection. There is no charge to access this information.

Dental Cosmos was considered the main source for practitioners for more than seventy years. It began as a publication designed to encourage dentists to use the products manufactured by the magazine’s founder, the Samuel S. White Dental Manufacturing Company. In time it became the first enduring national journal for the American dental profession and one of the most significant in the early history of American dentistry. In 1936 it merged with the Journal of the American Dental Association (JADA).

University of Michigan School of Dentistry librarian Patricia Anderson says that Dental Cosmos will interest dentists, specialists, dental hygienists, students, educators, historians, and others. It contains articles about the origins of some of the clinical techniques that are still used today, what kinds of interventions were used at the time to treat various conditions, herbal remedies that did and did not work, the importance of the fluoridation of water, and other interesting and fun things about the profession.

As many dental schools were being created across the U.S. around 1875, there is a significant amount of information in Dental Cosmos about what it meant to be a dentist, the core competencies students needed to become dentists, how dentists were expected to communicate with patients, and how they encouraged parents to have their children treated by a dentist before the children lost their teeth.

Transferring the content of the 78 volumes online from print was made possible with the generous support of the Colgate-Palmolive Company, for which the University of Michigan is very thankful.
Good Listening

Seminars at the National Library of Medicine History of Medicine Division

On November 16, 2006, William E. Paul, M.D., Chief of the Laboratory of Immunology of the National Institute of Allergy and Infectious Diseases, spoke in the Lister Hill Auditorium at NLM on “Michael Heidelberger: Immunology as a Quantitative Science.”

Heidelberger (1888-1991) was the founder of quantitative immunochemistry, the branch of biochemistry that examines the immune system of animals on a molecular level. Heidelberger’s work provided mechanisms to measure the weight amounts of antibody in particular settings and to elucidate mechanisms of antigen-antibody interactions. His seminal discovery with Oswald T. Avery in 1923 that powerful “neutralizing” antigens of the pneumococcus are polysaccharides opened up an expansive new area in the study of microorganisms and created a new understanding of infectious diseases, their treatment, and their prevention. Paul considered key elements in the development of modern immunology and the role played by Heidelberger and his students.

The Michael Heidelberger Papers were recently added to NLM’s Profiles in Science at <profiles.nlm.nih.gov/DH/>. The online exhibit features correspondence, diary entries, draft and published articles, laboratory notebooks, and photographs from the Heidelberger collection at NLM. Visitors to the site can view, for example, a diary of Heidelberger’s grand tour of leading European research laboratories in 1924, the score for a march Heidelberger composed on the occasion of his wedding in 1916, and his humorous explanation of “My Idea of Why I Failed to Win a Nobel Prize.”

As a postdoctoral fellow, Paul worked in the laboratory next to Dr. Heidelberger’s at the New York University School of Medicine.

On December 12, 2006 in Lister Hill Auditorium, independent filmmaker Laurie Block, cofounder of Straight Ahead Pictures, a small non profit media production company, spoke on “Cure and Contempt: The Exhaustion of Benevolence.” Her audience closely looked at and listened to a suite of visual and audio artifacts associated with disabled children. She then considered the role of these artifacts in shaping and reflecting attitudes toward the disabled, and thus shifts in the relationship between able and disabled. Among them were Protestant tract illustrations; postcards found at the local pharmacy; studio family photographs; imagery created for philanthropic fundraising by the Community Chest; a Shriner’s convention speech; some March of Dimes radio public service announcements; and an Ohio Bell 1950s Easter Seals homage. She showed how these are certainly not a typical Tiny Tim Christmas treat, but instead how these images and sounds convey a sense of both blessing and curse.

On January 29, 2007 in the Lister Hill Visitor’s Center, John A. Buchtel, Ph.D., Curator of Rare Books for the Sheridan Libraries of the Johns Hopkins University, spoke on “The *OTHER* Hopkins Collections: Rare Books at the Sheridan Libraries of the Johns Hopkins University.”

Health care professionals and historians of medicine are usually familiar with the resources of the Welch Library, the Institute for the History of Medicine Library, and the Alan Mason Chesney Medical Archives at the Johns Hopkins University, but they may be less aware of the other rich rare books resources available at the University. Buchtel’s presentation filled that gap with an illustrated lecture.
Golden at UCLA on Fetal Alcohol Syndrome

Janet Golden, Ph.D., Rutgers University Professor of History, spoke on January 23, 2007 at the UCLA Faculty Center on “Message in a Bottle: The Making of Fetal Alcohol Syndrome.” Her talk, one of the UCLA Programs in Medical Classics, was introduced by Mary J. O’Connor, Ph.D., UCLA Adjunct Professor of Psychiatry and Biobehavioral Sciences and Director of the UCLA Fetal Alcohol Spectrum Disorders Clinic.

The incidence of fetal alcohol syndrome in the United States is about one in 500 births. Babies born with alcohol-related birth defects weigh less and are shorter than other babies. They may have malformed facial features, arms, and legs, suffer from poor coordination, and have memory and learning difficulties; but most have normal intelligence. Golden presented a brief history of the modern discovery of alcohol-related birth defects and the ways that medical, public health, media, and legal professionals have shaped our understanding of this phenomenon.

UCLA Programs in Medical Classics <www.library.ucla.edu/biomed/his/medicalclassics.html> is a series of free presentations designed to enhance an appreciation of the links among famous medical writings, clinical practice, basic research, and humanistic scholarship. Several times a year these meetings bring together a convivial group of individuals of scholarly tastes — both from the community and from UCLA faculty, students, and staff — for a lecture and an opportunity to discuss and examine texts and topics that embody the history of advances in medicine, as well as the relations of medicine to broader cultural settings.

History of Biomedicine Seminar at NIH

Carl F. Craver, Ph.D., Assistant Professor of Philosophy, Neuroscience, and Psychology at Washington University in St. Louis, presented a lecture about the scientific career of Nobel laureate Julius Axelrod, “The Right Job for the Tools: Axelrod and the Search for Mechanisms,” on December 5, 2006 at the National Institutes of Health.

Craver received his Ph.D. in the History and Philosophy of Science from the University of Pittsburgh in 1998. His forthcoming book, Explaining the Brain: Mechanisms and the Mosaic Unity of Neuroscience (Oxford University Press), develops an account of what is required of an adequate explanation in neuroscience.

This presentation was co-sponsored by the Office of NIH History and the Biomedical Research History Interest Group (BRHIG). For more information about the BRHIG and upcoming events, please visit <history.nih.gov/> or <www.nih.gov/sigs/brhig>.
The Ninth Annual Meeting of the Southern Association for the History of Medicine and Science

The Southern Association for the History of Medicine and Science (SAHMS) held its ninth annual meeting on March 2-3, 2007 at the University of Virginia in Charlottesville, hosted by the University’s Center for Nursing Historical Inquiry and its Health Sciences Library Historical Collections.

The keynote speaker was Vivian Pinn, M.D., Associate Director for Research on Women’s Health and Director of the Office of Research on Women’s Health for NIH. In conjunction with her talk was the opening of the famous travelling exhibit, “Changing the Face of Medicine: Celebrating America’s Women Physicians,” sponsored by the National Library of Medicine and the American Library Association.

The full programs for all SAHMS meetings can be found at: <www.sahms.net>. Highlights of this year’s program included:


Wendy J. Turner, Ph.D., “Medieval and Early Modern Licensing of Alchemists and Medical Practitioners.”

Christian W. McMillen, Ph.D., “Global TB Control, 1930-1960; The BCG Vaccine in Native America and South India.”


Mary Duquin, Ph.D., “The Therapeutic Use of Massage in 19th-Century America.”

Todd L. Savitt, Ph.D., “A Case of Abortion in 1900 Helena, Montana.”

Joy Buck, Ph.D., “‘The Hospice Privateers’: Politics, Policy and the Translation of an Ideal.”

Kaarin Michaelsen, Ph.D., “Torture or Treatment?: British Physicians and the Politics of Forcible Feeding, 1909-1914.”

Thomas G. Benedek, M.D., “The Development of the Culturing of Bacteria from Blood.”

Congratulations to the Program Committee Chair, Wendy J. Turner <wturner@sahms.net> of the Department of History, Anthropology, and Philosophy at Augusta State University, for her excellent work!

The tenth annual meeting of SAHMS will be in early 2008 at the University of Florida. Plan now!

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Miscellanea

A Letter from Lois Densky-Wolff

Dear Friends and Colleagues:

I am retiring from my position as head of the University Libraries Special Collections Department at the University of Medicine and Dentistry of New Jersey, effective December 29. It has been a great experience working with these medical history resources, but it is the right time for me to move on to the next stage in my life.

I plan an active retirement that includes traveling, cataloging and writing about my bookmark collection, volunteering, and consulting, among other interests.

I expect to stay connected to the New Jersey and medical history communities, as well as the archival community in the coming years.

Please allow me to thank members of [ALHHS-L] for their friendship and collegiality, and I look forward to continued associations. It has been a pleasure to know many of you, and work with you on various projects and committees.
Please update my contact information. After January 1, 2007, I may be reached at <ldenskywolff@yahoo.com> or 908-464-2391.

See you in Montréal!

Cordially,

Lois R. Densky-Wolff
Head, Special Collections, University Libraries
University of Medicine and Dentistry of New Jersey
George F. Smith Library of the Health Sciences
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phone 973-972-7830
fax 973-972-7474
<www.umdnj.edu/librweb/speccoll/special_collections.html>

Quiz Question
What is going on in this painting?

(Answer below on page 27.)

A Potpourri of Resources

Karen Lea Anderson Peterson, Archivist and Senior Research Assistant of the Historical Collections and Archives at the Oregon Health and Science University, writes: “Please check out our blog <ohsu-hca.blogspot.com/>. It is fun and informative and we are getting responses from all over! What a great PR tool.”


People interested in medical ex libris might sometimes find useful information and conversation on the book-plate blog <bookplatejunkie.blogspot.com>.

John Erlen and Jason Rosenstock of the University of Pittsburgh report a fascinating new URL for the history of psychiatry: <www.suitcaseexhibit.org>.

Martha E. Stone, Coordinator for Reference Services at the Treadwell Library of the Massachusetts General Hospital, reports that this history of nursing site may be of interest: <www.massgeneral.org/pcs/news/pages/mgh_history/MGH_History.asp>.


The Office of NIH History is pleased to direct you to our online newsletter, NIH History Highlights. Issues from Summer 2002 to the present are available in PDF form at our Web site: <www.history.nih.gov/01Docs/about/04abtnews.htm>.

The Web site of the Society for the Social History of Medicine <www.sshm.org/> is worth a look.


Civil War buffs could easily spend a day surfing around the Web site of the National Museum of Civil War
It’s not like that. I’m behind in everything! All kinds of wolves are at the door.

The lateness of the last three Watermarks is about 95% my fault — but not entirely. I try to obtain one good, strong feature for the lead article in every issue. When I became Editor, getting these submissions was easy. You all were so willing and so cooperative. I will always be grateful for that. But recently this aspect of the Editorship has not been quite so easy. Two people who promised me articles for this and the next issue have reneged, leaving me in the lurch for adequate content. Thank goodness that Micaela came through with her excellent contribution to fill the first of these unexpected gaps! I will try to plug the other gap with something equally germane for the Spring issue.

But I still need lead articles for the Summer and subsequent issues ...

A Few Words from the Editor

I have not managed my newfound “free” time very well since I retired from Upstate last August. I severely overestimated what I would be able to do after I would no longer be working nine-to-five. I overcommitted myself on all sorts of new and old projects — and soon got behind in all of them. Please do not feel that I have singled out ALHHS for procrastination. Nope.
Deirdre Cooper Owens Wins ACOG Fellowship

The American College of Obstetricians and Gynecologists announces that the recipient of the 2007 ACOG Fellowship in the History of American Obstetrics and Gynecology is Deirdre Cooper Owens, C. Phil., whose research project is, “‘Courageous Negro Servitors’ and Laboring Irish Bodies: the Origins of Antebellum Nineteenth-Century Sexual Surgery.” This work will be her Ph.D. thesis at UCLA.

ACOG sponsors one $5000 fellowship in the history of American obstetrics and gynecology each year. The recipient of the fellowship spends one month in the Washington, D.C. area working full-time to complete a specific historical research project. Although the fellowship is based in the ACOG History Library, the fellow is encouraged to use other national, historical, and medical collections in the area. The results of this research must be disseminated through either publication or presentation at a professional meeting.

Further information about the fellowship can be obtained from Debra Scarborough, History Librarian/Archivist, American College of Obstetricians and Gynecologists, 409 Twelfth Street SW, Washington, DC 20024-2588; phone 202-863-2578; fax 202-484-1595; e-mail <dscarborough@acog.org>.

Applications for the 2008 fellowship must be received by October 1, 2007. Selection will be made and the recipient notified as soon as possible thereafter, so that the fellowship may begin as early as Winter 2008.

Hospital Drive

Response to last issue’s lead article about medical art and literature has been very strong and positive. Here is an addendum to our list of new medical literary magazines:

The University of Virginia School of Medicine is the host of Hospital Drive <hospitaldrive.med.virginia.edu>, a new online journal that provides opportunity for health care researchers, practitioners, and educators to submit their original poems, plays, short fiction, reviews, personal essays, personal narratives, photography, or visual art works (painting, drawing, sculpture, or mixed media).

Launched in the Fall of 2006, Hospital Drive seeks original creative work that examines themes of health, illness, and healing for its premier Summer 2007 issue. Submissions will be accepted from anyone involved in providing, teaching, studying, or researching patient care. Hospital Drive only accepts online submissions. Please view the Web site for guidelines and more information about the magazine <hospitaldrive.med.virginia.edu/submit.html>.

Heather Burns
Managing Editor, Hospital Drive
Doctoral Student, Curry School of Education
University of Virginia

Medical History, the Journal, Now Online

From the Wellcome Trust Centre for the History of Medicine at University College London, the editors of Medical History, one of the most venerable journals in our field, announce that volumes 1-50 (1957-2006) and the first issue of volume 51 (January 2007) are now available, free of charge, in PubMed Central <www.pubmedcentral.nih.gov/tocrender.fcgi?action=archive&journal=228>. All future issues will be likewise be made freely available in PubMed Central shortly after their respective publication dates.

Hot links for volumes 44-51 (2000-2007) will take you directly to the full text of each article directly from the journal’s home page: <www.ucl.ac.uk/
Unfortunately, no search engine for the journal yet exists at this site, so you will have to know already what you are looking for.

Panel Plans for 2008 ESSHC Conference in Lisbon

The Family and Demography Network of the European Social Science History Conference (ESSHC) <www.iisg.nl/esshc/> has suggested several very interesting titles for joint demography/health panels at the upcoming ESSHC conference in Lisbon in 2008 <www.iisg.nl/esshc/2008.php>. This will be a wonderful opportunity for interdisciplinary work and fruitful exchange on topics of concern to historians of health or demography. Anyone interested in participating as part of the Health Network, please contact either Enrique Perdiguero Gil <quique@umh.es> or Iris Borowy <iris.borowy@uni-rostock.de>, co-chairs, or the respective organizers of the panels. For updated information, see the Health Network call for papers at <www.iisg.nl/esshc/health.php>.

“Mapping the Demography of Tuberculosis.” Organizer: Janet McCalman <janetsm@unimelb.edu.au>. While the slow retreat of tuberculosis in Old World urbanized societies is familiar, its mechanisms remain puzzling. Moreover, the impact of tuberculosis on indigenous peoples and rural immigrants to New World instant cities is arguably even more complex. What can we learn from a comparative approach to mapping the demography of tuberculosis in Old World and New World societies in the nineteenth and early twentieth centuries? Can the mapping and demography of changing household sizes and densities provide useful data on its decline? Were there different cohort effects? Did New World societies witness different patterns in tuberculosis as they underwent crises of urbanization and industrialization, and what can the mapping of tuberculosis in those new, often ethnically diverse communities reveal of the dynamics of social dislocation, deprivation, and discrimination in periods of rapid growth?

“L’Année 1911’: Demographic Realities and Political Reactions.” Organizer: Catherine Rollet <crollet@club-internet.fr>. The summer of 1911 was long, hot, and dry. In a large part of Western European countries this increased the infant and childhood mortality and, less obviously, the old population mortality. 1911 provides an ideal case to study how European countries observed this event, both statistically and politically: What kind of statistics were produced? What kind of grounded observations were made about the causes? What political lessons were drawn? Comparing national experiences from France, Belgium, the Netherlands, Germany, England, Wales, Italy, and Spain would be of interest to see how the event was taken into account in statistical and epidemiological studies and in the agenda of public health policies.

“Medical and Demographic Knowledge: Quantifying and Classifying Death, Seventeenth to Nineteenth Centuries.” Organizers: Christine Théré <ch.there@ined.fr> and Jean-Marc Rohrbasser <rohrbass@ined.fr>

“The Borderline Between Life and Death: Neonatal and Perinatal Deaths.” Organizers: Olof Gardarsdottir <Olof.Gardarsdottir@hagstofa.is> and Eilidh Garrett <eilidh.garrett@btinternet>.
BMJ Medical Milestone

On January 18, 2007, after ten days of worldwide online voting, BMJ <www.bmj.com> announced that the development of sanitation was the greatest milestone in the history of medicine since BMJ was founded in 1840. The discovery of antibiotics was second and the advent of anesthesia was third.

BMJ Editor Fiona Godlee announced the contest in the January 6, 2007 issue: “Seeking a way to mark the launch of the new BMJ, we hit on the idea of looking back at the most important medical milestones since the forerunner of the BMJ was first published in 1840. We asked readers to nominate milestones, which you did in good numbers. A panel of editors and advisers narrowed the field down from more than 70 to 15. We invited champions to write on each one; their contributions make up the commemorative supplement we are publishing on 20 January. And we are now inviting readers to vote for which you think is the most important of these medical milestones.”

11,341 people voted, including yours truly, who chose anesthesia. The full results are:

- Sanitation: 1795 (15.8%)
- Antibiotics: 1642 (14.5%)
- Anesthesia: 1574 (13.9%)
- Vaccines: 1337 (11.8%)
- DNA structure: 1000 (8.8%)
- Germ theory: 843 (7.4%)
- Oral contraceptive pill: 842 (7.4%)
- Evidence-based medicine: 636 (5.6%)
- Medical imaging: 471 (4.2%)
- Computers: 405 (3.6%)
- Oral rehydration therapy: 308 (2.7%)
- Immunology: 182 (1.6%)
- Risks of smoking: 183 (1.6%)
- Chlorpromazine: 73 (0.6%)
- Tissue culture: 50 (0.4%)

Since its first volume appeared in 1962, A Catalogue of Printed Books in the Wellcome Historical Medical Library has been a standard resource for historians of medicine. This five-volume set should really be called A Catalogue of Early Printed Books in the Wellcome Historical Medical Library, because its entered titles only go up to 1850. Nevertheless, it is a fantastic tool.

With the appearance in 2006 of Volume 5, Books Printed from 1642-1850, S-Z, compiled by H.J.M. Symons and J. Simpson, the set is now complete.

The series was the brainchild of the renowned British medical historian Frederick Noël Lawrence Poynter (1908-1979), then the Wellcome’s Deputy Librarian, who in 1954 offered A Catalogue of Incunabula to describe the over 600 books in the Wellcome collection that were published between 1467 and 1500.


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**The MIND Database**

A new database from the Smithsonian Institution’s Jerome and Dorothy Lemelson Center for the Study of Invention and Innovation guides researchers toward where to find invention-related documents and collections, and thus may be helpful in history of medicine research.

The MIND (Modern Inventors Documentation) database <invention.smithsonian.org/MIND/> identifies the relevant holdings of hundreds of archives across the United States and is the nation’s first database devoted exclusively to such documents. According to the “About the MIND Database” Web page <invention.smithsonian.org/resources/MIND_about.aspx>: “Information in the database was drawn from many sources: Research Libraries Information Network (RLIN); Online Computer Library Center (OCLC); National Union Catalog of Manuscripts Collections (NUCMC); online catalogs for universities, colleges, historical societies, and other organizations; ArchiveGrid (a service of RLG); *Sources in Electrical History 3: An International Guide to Corporate Records and Archives of Companies in Electrical, Electronics, and Computer Industries* compiled by the IEEE, 1995; and *A Directory of History of Medicine Collections*, 9th Edition, compiled by National Library of Medicine, 1999.”

The advanced search and browse options are friendly and allow users to search by repository, inventor, collection, keyword, or subject. Testing the medical possibilities, a quick search for “ether” yielded 47 hits, but “scalpel” yielded none, and “kidney” only one.

The Center invites repositories with relevant collections to contribute information about their holdings. Requests to participate in the MIND database can be sent to Alison Oswald at <oswalda@si.edu>.

The Lemelson Center <invention.smithsonian.org/> is part of the Smithsonian’s National Museum of American History <americanhistory.si.edu/>. It is worth a visit to Room 1016, MRC 604, 14th Street and Constitution Avenue NW, Washington, DC 20013-7012. You may contact the Center by phone 202-633-3450, fax 202-357-4517, or e-mail <LemCen@si.edu>.

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Answer to Quiz Question: Jules Adler’s painting, “Transfusion of a Goat’s Blood” in the Carnegie Museum of Art in Pittsburgh, shows French physician Simon Bernheim hard at work transfusing blood from a live goat into a tubercular young woman.
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*The Watermark* encourages submissions of news and stories about events, collections, catalogues, people, awards, grants, publications, and anything else of professional interest to the members of ALHHS. Please submit your contributions in a timely way to Eric Luft, preferably as e-mail attachments.

Information about membership in ALHHS is available from the Secretary/Treasurer: Patricia E. Gallagher, Special Projects Coordinator, New York Academy of Medicine Library, 1216 Fifth Avenue, New York, NY 10029-5293. <pgallagher@nyam.org>. Phone: 212-822-7324. Fax: 212-423-0266.

Submissions for the ALHHS Web site <www.library.ucla.edu/libraries/biomed/alhhs/> should be sent to the Chair of the Web Site Committee: Katharine E.S. Donahue, Head, History and Special Collections, Louise M. Darling Biomedical Library, UCLA, 12-077 CHS, Box 951798, Los Angeles, CA 90095-1798. <kdonahue@library.ucla.edu>. Phone: 310-825-6940. Fax: 310-825-0465.