

Newsletter of the Librarians, Archivists & Museum Professionals in the

History of the Health Sciences

The Watermark

Volume XLIV

Number 4 (Fall 2021)

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Submissions for the Watermark:

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 LAMPHHS. Please submit your contributions in a timely way to Stephen Novak, as e-mail attachments. Visuals should be submitted as jpegs with a resolution of at least 300 dpi if possible. Copyright clearance for content and visuals are the responsibility of the author.

Cover Image: Three men assemble military identification tags while others observe to commemorate National Employ the Physical Handicapped Week, circa 1950. See page 20.

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EDITOR'S MESSAGE



Among the many news articles surrounding the commemoration of the 20th anniversary of the terrorist attack on New York City's World Trade Center was an interesting *New York Times* <u>article</u> on the archives of the Port Authority of New York and New Jersey. Created by a bi-state compact in 1921 between New York and New Jersey, the Port Authority is responsible for building and maintaining all the interstate bridges and tunnels (the George Washington Bridge and Lincoln Tunnel for example), the port

facilities for the Port of New York, and the three metropolitan airports. Through various machinations too involved to go into here, it also planned, built – and until about 2 months before 9/11 – owned the World Trade Center, even though such ventures were never supposed to be part of its portfolio. Though not as well-known as Robert Moses, the "Power Broker," the Port Authority arguably has had just as large an impact on the infrastructure of metropolitan New York.

The agency, whose headquarters were in World Trade Center 1, suffered grievously on 9/11, losing 84 employees including its executive director and police superintendent. But among its other losses were its entire archives which were housed in the basement of one of the towers. Photographs, blueprints, correspondence, financial records, film and video, and reports—all were destroyed, though a few cartons of photographs were later salvaged from the ruins.

As the *New York Times* article recounts, over the last 20 years the agency has been painstakingly rebuilding its archives. They've obtained copies of records from firms that have worked on Port Authority projects and reached out to former employees and retirees for materials they may have. Even copies of photocopies of original records made by scholars who did research in the archives have been added.

This effort to recreate a vanished body of records illustrates, I think, the importance of what LAMPHHS members do every day when they collect, organize, and ingeniously use textual, artifactual, and illustrative materials that elucidate the history of the health sciences. Hopefully, none of us will ever have to recreate a destroyed collection, but the Port Authority's story may make us realize again the importance of what we do.



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Stephen E. Novak Editor, *The Watermark*

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FROM THE PRESIDENT



Plans are well underway for the 2022 LAMPHHS Annual Meeting in Saratoga Springs, New York. Committees have been filled and "calls" will be going out on the listserv and in *The Watermark*. I want to thank all of the members who volunteered to serve on those committees. We have a great mix of LAMPHHS veterans and new members who have joined in the last few years.

Local Arrangements Committee: Elise DeAndrea (Chair), Cara Howe, Nicole Topich

Local Arrangements Advisors: Russell A. Johnson, Micaela Sullivan-Fowler

Technology Committee: Alison Lotto (Chair), Gabrielle Barr

Program Committee: Dan Cavanaugh (Chair), Brooke Fox, Brooke Guthrie, Nancy Dupre Barnes

Recognition Awards Committee: Megan Keller-Young (Chair), Emily Brown, Gino Pasi, Bob Vietrogoski

Publication Awards Committee: Carrie Meyer (Chair), W. Bruce Fye, Toby Appel, Erin Torell

Travel Scholarships Committee: Steve Greenberg (Chair), Pat Gallagher, Adam Johnson

Nominating Committee: Lucy Waldrop (Chair), Dominic Hall, Emily Gustainis

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The plan is to organize a hybrid meeting that will offer portions of the meeting in a virtual format, while the conference as a whole will be in person. It is too early to announce a theme for the 2022 meeting but that should be decided by mid-November and announced to the membership via the LAMPHHS listserv. Responses to the post-conference survey sent out in May will give the Program Committee plenty to work with. Keep your eyes on the LAMPHHS website for up-to-the-minute updates on the meeting.

I am happy to announce that LAMPHHS is now officially a 501(c)(3) organization and registered as a public charity. I received the IRS letter of confirmation just last week. The process began in spring 2018 as Melissa Grafe assumed the presidency and made the possible merger of ALHHS and MeMA one of her priorities. The many months (3+ years!) of hard work by LAMPHHS officers, spirited input from members about a name for the new organization, and legal wrangling by pro bono lawyer, Jason Cotton, have finally borne fruit!

Enjoy the beautiful fall weather!

Jennifer K. Nieves

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CALL FOR NOMINATIONS 2022

LAMPHHS Needs You – Call for Nominations/Volunteers!

This is our third year as one organization, and we are electing our third set of officers!

At this time, the Nominating Committee is requesting nominations/volunteers for the following positions:

Vice President

Two Members-at-Large

This is an opportunity to help shape the direction of LAMPHHS as we move forward together. To volunteer or suggest a nominee, please contact one of the committee members before January 17, 2022.

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Emily Gustainis Deputy Director Center for the History of Medicine Countway Library, Harvard University emily_gustainis@hms.harvard.edu 617-432-7702

Dominic Hall Curator, Warren Anatomical Museum Center for the History of Medicine Countway Library, Harvard University Dominic_Hall@hms.harvard.edu 617-432-6196

Lucy Waldrop Assistant Director and Technical Services Head Duke University Medical Center Archives <u>lucy.waldrop@duke.edu</u> 919-383-2653

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LAMPHHS RECOGNITION AWARDS 2022

Librarians, Archivists and Museum Professionals in the History of the Health Sciences (LAMPHHS) is seeking nominations for the following awards:

LISABETH M. HOLLOWAY AWARD

This distinguished service award for members of the LAMPHHS and its predecessor organizations was named in honor of Lisabeth M. Holloway, who was a founder of ALHHS, served as president Pro Tem in 1975, and was for many years the editor of *The Watermark*. The award recognizes significant contributions through leadership and service to LAMPHHS/ALHHS/MeMA and the profession.

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Nominations Procedure:

Nominations should be submitted as a one- to two-page letter describing the nominee's outstanding professional achievements and the impact of his/her contributions on LAMPHHS/ALHHS/MeMA and the profession. A current *curriculum vitae* as well as letter(s) of support (a limit of 2) are not required but provide helpful additional information to the Recognition Awards Committee. All submission materials should be in Word or PDF format. The Committee may also seek additional information on a nominee from the nominator or other sources as needed.

Criteria for evaluation:

- Membership in LAMPHHS (ALHHS/MeMA).
- LAMPHHS (ALHHS/MeMA) office(s) held.
- LAMPHHS (ALHHS/MeMA) committee(s) chaired or served on.
- Outstanding service to one's institution.
- Contributions to the profession, *i.e.*, history of health science librarianship/archival administration.

The Lisabeth M. Holloway Award will be announced at the annual meeting of LAMPHHS in April 2022.

Submit nominations (including self-nominations) and any accompanying materials to the committee by **Friday, 21 January 2022**. For further information, please contact the committee.

RECOGNITION OF MERIT AWARD

There are two categories of recognition:

The first category of recognition: either members or non-members, who make gifts of an extraordinary nature to health sciences libraries. Gifts of magnitude would include, but not be limited to, the following:

- Materials such as rare/historical books, journals, or items in other formats, of significant value, book collections by author or subject, or furniture, computers, or other kinds of equipment.
- Artwork such as portraits, posters, paintings, photographs, sculpture, instruments, or medical objects.

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• Monetary gifts sufficient to establish memorials or endowments or significant donations.

The second category of recognition: non-members of LAMPHHS who have provided long-time excellent service to health sciences libraries. Examples include:

- A supporter of a library over a long period of time.
- A person who has made an intellectual contribution to a library by surveying or indexing a collection.
- A person who has given extraordinary support to a library by serving as an advocate to the administration of the institution.

Nominations Procedure:

Nominations for the Recognition of Merit should be submitted as a one- to two-page letter describing the nominee's outstanding scope of donations, for the first category; and his/her achievements and the impact of his/her contributions on health sciences libraries, for the second category. Letter(s) of support (a limit of 2) are not required but provide helpful additional information to the Recognition Awards Committee. All submission materials should be in Word or PDF format. The Committee may also seek additional information on a nominee from the nominator or other sources as needed.

The Recognition of Merit will be announced at the annual meeting of LAMPHHS in April 2022.

Submit nominations (including self-nominations) and any accompanying materials to the committee by **Friday, 21 January 2022.** For further information, please contact the committee.

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LAMPHHS PUBLICATIONS AWARDS 2022

Librarians, Archivists, and Museum Professionals in the History of the Health Sciences (LAMPHHS) is seeking nominations for the Publication Awards. These awards will be presented at the 2022 LAMPHHS annual meeting.

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Books, significant articles, catalogs, bibliographies, and electronic resources related to the history of the health care sciences, as well as works on the management of historical collections in the health care sciences are eligible for consideration.

Works must have been published within three years of the award date. Re-nominations are allowed if the publication date falls within the current three-year period. Nominated authors must be LAMPHHS members in good standing. Self-nominations are encouraged.

Nominations can be from one of three categories:

- Monographs published by academic or trade publishers.
- **Articles** published in journals, trade, or private periodicals of recognized standing.
- **Online resources** produced predominantly by LAMPHHS members.

All nominations must meet the following criteria:

- Published within 3 years of the award date;
- Author(s) must be LAMPHHS member(s) in good standing for the past 12 months;
- The nominated monograph, article, or electronic resource is related to the history of the health care sciences or works on the bibliography, librarianship, and/or curatorship of historical collections in the health sciences.

Nominations that meet each of the above criteria will be considered by the Publication Awards Committee. The Committee will look for the following benchmarks of excellence when evaluating qualifying nominations:

- Quality and style of writing;
- Contribution to the field;
- Relevance to the profession.

Up to one Publication Award in each category will be presented at the 2021 annual meeting. Winners do not need to be present to win.

Each nomination should clearly identify the work being nominated, the author(s) of that work, and an address at which the designated nominee(s) can be contacted. Only the first two authors named on the work can be considered for the award unless the



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nominee is the only LAMPHHS member in the list of joint authorship. Please include all relevant URLs. Submission of 3 copies of all print-only nominations will be required. Directions for the dispatch of these will be sent upon receipt of the nomination.

The deadline for nominations is Friday, **25 February 2022**. All nominations, along with any questions, should be sent to the 2022 Publication Awards Committee chair, Carrie Meyer, at <u>carrie.meyer@unmc.edu</u>.

LAMPHHS Publication Awards Committee Carrie Meyer, chair Erin Torell Toby Appel W. Bruce Fye

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MEMBER PROFILES



Name: Joel A. Klein, PhD

Member of LAMPHHS since: 2018

Hometown: Monroe, Oregon

Current Employer and Position: The Huntington Library – Molina Curator for the History of Medicine and Allied Sciences

Education: PhD, Indiana University Dept. of the History and Philosophy of Science and Medicine. BS, Chemistry, Oregon State University

Professional interests: At the moment I am developing several exhibitions, working on digitizing parts of our medical collections, and building our collections with an eye towards women's health, global medicine, and medical technologies. My own research focuses on the intersections between medicine, chemistry, and matter theory in early modern science. I have also worked on several digital humanities projects, and I have a related interest in the reconstruction of historical recipes and experiments.

Other facts, interests, or hobbies: I am dad to twin four-year-old boys who keep me very busy; I spent two years in Germany doing research for my dissertation; and my self-

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care while working from home during the pandemic involved a lot of DIY house projects and gardening.



Name: Diane Wendt

Member of LAMPHHS since: I have been an inconsistent member for some time-consistent for maybe the past 6 or so years. (However I have long felt connected to the organization through my close colleagues at the museum especially Ray Kondratas and Judy Chelnick. I was always getting reports of meetings and members—I have been "lurking" in the background for a long time!)

Hometown: Kensington, Maryland – outside Washington, DC - has been my home for about 35 years (but I grew up in Buffalo, NY, and Wilmington, DE)

Current Employer and Position: Curator, Division of Medicine and Science, National Museum of American History, Smithsonian Institution

Education: BA, Fine Arts (Chemistry minor), College of William and Mary (1982); but I would like to think that most of my "education" took place after that!

Professional interests: Material culture; history of US pharmaceutical industry; health and personal care practices, products, and associated marketing; public health campaigns; vaccines and other biologicals; botanicals and *materia medica*.

Other facts, interests, or hobbies: My first job at the Smithsonian was in the museum shops—selling M*A*S*H themed t-shirts, toys, and dog tags in the summer of '83. I wanted a job in an art museum or in graphic design but ended up at American History in 1985 and have been there in a few different capacities ever since.

I got involved in the medical history collections in the late 1990s. At the time I had two small children and was working part time, so my "professional development" was slow. No regrets. I have had an opportunity to learn the field through an incredible collection which I enjoy sharing with others.

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NEWS FROM THE HISTORY OF MEDICINE DIVISION, NATIONAL LIBRARY OF MEDICINE

<u>History Matters: In the Past, Present, and Future of the NLM</u> - Learn how—since the release of the report of the NIH's Director's advisory committee on the future of the NLM—history continues to matter at the NLM with its History of Medicine Division achieving many collaborative contributions toward the advancement of the library in the 21st century, indeed for the benefit of historical research today and tomorrow.

Division staff continue to work remotely to support YOU in your research and can be reached via the <u>NLM Support Center</u> via the "Write to the Help Desk" blue button. Due to COVID-19, the NLM Reading Room remains closed to the public until further notice. During this period, NLM online collection resources remain available, including <u>NLM Digital Collections</u> and <u>PubMed Central</u>. NLM continues to provide interlibrary loans (ILL). For the latest NLM ILL service information please see <u>this web</u> <u>site</u>. For the latest NLM Reading Room information check <u>here</u>.

<u>Tune-in</u> to the next NLM History Talk, next Thursday, September 9, at 2pm ET. Join us to welcome Angela Saward, Research Development Specialist (Moving Image & Sound), Research Development Team, Collections & Research, Wellcome Collection, and NLM's own Sarah Eilers, Archivist/Manager, Historical Audiovisuals, speaking together on *Peril in the Air: Pollution Activism on Film*. Learn more <u>here</u>. Watch past NLM History Talks freely via the <u>NIH Videocast archive</u>, and read interviews with speakers on our blog <u>Circulating Now</u>.

The NLM Web Collecting and Archiving Working Group continues to identify and select web and social media content documenting the Coronavirus disease (COVID-19) outbreak as part of NLM's Global Health Events web archive collection. Now including 9,500+ publicly available Seed URLs representing 2.7 terabytes of data, the collection includes federal, state, and local government COVID-19 pages, websites of aid organizations and NGOs, and content documenting life in quarantine, prevention measures, vaccines, the experiences of healthcare workers, patients, and more. The group is actively reviewing recommended content for inclusion in the archive (12,200+ URLs nominated to date), scoping and running crawls of content using Archive-It and Conifer (formerly Webrecorder), reviewing archived sites for quality, and adding metadata. The group continues to engage with other cultural heritage organizations archiving the history of COVID-19, including a group spearheaded by the

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leadership of the Smithsonian National Museum of American History, as well as the group of federal agencies who meet regularly to discuss their respective initiatives. The NLM Web Collecting and Archiving Working Group also continues to engage with the Society of American Archivists Web Archiving Section, the Archive-It community, the National Digital Stewardship Alliance, and is contributing to and following the growing list of institutions collecting COVID-19 related content maintained by the Documenting the Now project. Nominations for content to include in NLM's Global Health Events collection remain welcome via nlmwebcollecting@nlm.nih.gov. NLM also continues to participate as an institutional contributor to a broader International Internet Preservation Consortium (IIPC) Novel Coronavirus outbreak web archive collection. Learn more about NLM's efforts in the Journal of the Medical Library Association article "The National Library of Medicine Global Health Events web archive, coronavirus disease (COVID-19) pandemic collecting," and the broader context of documenting the pandemic published in Nature on December 17 "What are COVID archivists keeping for tomorrow's historians." A Circulating Now blog post, published in January 2021, reflects one year of collecting on this important topic.

Are you undertaking and/or have you completed historical research in NLM's collections? Would you like to share it freely with a wide audience? We warmly invite you to be a guest author on our blog <u>Circulating Now</u>. Featured in the <u>Washington</u> <u>Post</u>, *Circulating Now* circulates widely, reaching more than 5,500 direct subscribers and 348,000 followers as part of the official NLM social media network. If you would like to write about your research in our collections, please send an email proposing your topic to Beth Mullen, managing editor, at <u>elizabeth.mullen@nih.gov</u>. If you do not already subscribe to *Circulating Now*, please do—just look for the "Follow us via email" box on the right-side of the <u>homepage</u>.

NLM launches a new online exhibition!

<u>Emotions & Disease</u> is a newly designed online exhibition, launching October 15, 2021. The new online exhibition reimagines the popular physical installation presented in the NLM Rotunda Gallery 25 years ago! Two members of the original curatorial team, Esther M. Sternberg, MD (University of Arizona College of Medicine) and Theodore M. Brown, PhD (University of Rochester, NY), guest curated the new online exhibition.



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Featuring NLM collection items and borrowed artifacts, *Emotions & Disease* explores how the discourse around emotions and disease has changed as scientists and physicians have transformed medicine. In the course of history, perceptive observers regularly returned to the study of the interactions of body and mind in medicine. More recently, discoveries in a field of research that explores the connections between the nervous, endocrine, and immune systems confirm that emotions influence the onset and course of disease and show how this interaction works. *Emotions & Disease* examines our evolving understanding of the connection between physical health and mental state and points to a promising future that includes integrative medicine, a field incorporating science-based mind-body treatments into all aspects of medical care.

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REPOSITORY NEWS

Paul S. Russell, MD Museum of Medical History and Innovation & MGH Archives Offer Virtual Tour

"Teeth in the bathroom!" An escaped prisoner. A missing cornerstone.

These stories and many more are found in a <u>virtual tour</u> of Massachusetts General Hospital's original building.

Though MGH was chartered in 1811, a decade passed before it was ready to open and see its first patient: a saddler with syphilis. His admission to the hospital's grand granite edifice, later known as the Bulfinch Building, marked the beginning of MGH's legacy of patient care and its associated missions: education, research, and community.

Even as patient wards gradually moved elsewhere and numerous buildings have mushroomed around it, the Bulfinch Building, many would say, remains the seat of the hospital's soul, an object of awe for newcomers and enduring affection for those who spend time there.

Its most famous feature—the Ether Dome, site of the first successful public demonstration of anesthesia 175 years ago this October—remains closed to the public indefinitely. And even in ordinary times, most of the building—home to administrative offices and a few laboratories—is inaccessible to the public.

We at the MGH Russell Museum and the MGH Archives undertook creating a tour that would offer a glimpse behind the scenes and would celebrate not only its past but also its continued relevance to the hospital's missions.

Local 3D scanning company 3D Scansmith captured 360-degree views of most of the building's five floors. Meanwhile, we worked on the content: we pored over the six main histories written about the hospital, numerous annual reports, sometimes-cryptic floor plans from prior expansions and reorganizations, and narrative accounts with clues both to what was where when and to what various spaces in the building have meant to patients and staff over the years. We also teamed with our colleagues in the News and Public Affairs Office to film short videos with notable occupants.



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The result: an online tour filled with more than 160 "labels" replete with text, historical images, and modern videos. We encourage you to get lost in it—and let us know your comments.

Sarah Alger

George and Nancy Putnam Director Paul S. Russell, MD Museum of Medical History and Innovation Massachusetts General Hospital

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Mount Sinai Anniversaries



The Archives Committee of Mount Sinai Morningside/West would like to announce the celebrations of the 175th anniversary of the founding of Mount Sinai Morningside, formerly St. Luke's Hospital, on October 18, 1846 and the 150th anniversary of the opening of Mount Sinai West, formerly Roosevelt Hospital, on November 2, 1871. Both were founded as voluntary hospitals that would provide health care regardless of the patient's ability to pay for the costs of care.

St. Luke's Hospital opened on East 54th Street at Fifth Avenue and flourished there until the search for more space moved it to Morningside Heights and the current location on West 113th -114th Streets between Amsterdam Avenue and Morningside Drive.

Roosevelt Hospital opened on West 59th Street, between Ninth and Tenth Avenues, and originally owned the square block between West 59 and West 58th Streets. It currently resides on the western half of that block to this day.





While in-person celebrations, sadly, cannot be held, special programs tailored to each Hospital recounting its history and highlighting its medical advances will be aired via Zoom, and special gifts for each staff member will be distributed, along with cookies bearing the images of the original Hospital buildings. Large lobby banners with photographs of the original and current buildings are decorating the lobby areas of each Hospital.

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Historical timeline booklets, illustrated with photographs from the archival collections, have been prepared for each Hospital by archivist Michala Biondi and will be distributed with the anniversary presents. Exhibits highlighting the change of the physical plant of each Hospital will be installed in the Annenberg Building lobby display cases and the Mount Sinai West lobby case soon. Lastly, both cafeterias are planning a mid-1800s-era menu to enjoy on the anniversary dates.

Happy Anniversary to Mount Sinai Morningside and Mount Sinai West!

Michala Biondi Associate Archivist Arthur H. Aufses, Jr. Mount Sinai Medical Center

News from the Library and Center for the History of Medicine and Public Health, The New York Academy of Medicine

NYAM Library Reopens to the Public



On September 14, the NYAM Library reopened to readers and classes, by appointment. Reader space is limited, and vaccination, masking, and social distancing are required for all visitors. For more information, see our guidance on visiting the Library.

Virtual Visit: Natural History of New York The Library's Virtual Visits continued this fall with <u>A Nineteenth-</u>

state's flora, fauna, geology, and much more. Historical

Century Wonder: The Natural History of New York, exploring the



Collections Librarian Arlene Shaner uses our extensive collection to develop a theme. All the Library's virtual visits can be found on our <u>YouTube playlist</u>.

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Fall Library Events



Once again the Library opens its doors as part of <u>Open</u> <u>House New York Weekend</u>, offering four tours on Saturday, October 16. On Tuesday, October 26, at 5:00 ET, Dr. Nancy Tomes of Stony Brook University will speak on "Managing the Modern 'Infodemic': How the New Social Media are Complicating Old Public Health Problems"; register <u>here</u>. Previous events—Russell Johnson's talk on documenting the 1918 influenza pandemic and Keith Wailoo's talk on

how pandemics reveal systemic inequalities—are available through the Library YouTube playlist.

From the Blog

On the Library's blog, "Books, Health, and History," we celebrated National Hispanic Heritage Month by considering the career of <u>Dr.</u> <u>Ildaura Murillo-Rohde</u>, an activist for Hispanic nurses (pictured here), and took a look at the <u>people behind the Library research</u> <u>fellowships</u>, Paul Klemperer and William H. Helfand. For Banned Books Week, we consider <u>two early 19th-century books on</u> <u>contraception</u>.





Color Our Collections

Keep coloring! Here is the <u>melon</u> from the Library's copy of Elizabeth Blackwell's *A curious herbal* (London, 1739). In its <u>Color Our</u> <u>Collections</u> campaign, the Library collects coloring books from libraries, archives, and museums around the world and mounts them each year in the first week of February.

At Home with the NYAM Library

At Home with the NYAM Library

Our monthly e-newsletter highlights our collections, digital and otherwise; Virtual Visits; and our blog, <u>Books, Health, and</u> <u>History. Sign up for the e-newsletter here</u> and peruse earlier issues: <u>At Home with the</u>

NYAM Library.

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Adrian Scheltes Collection Open at University of Illinois, Chicago

The UIC University Library is excited to announce the acquisition of the Adrian Scheltes collection. Scheltes was the supervisor of counsel and guidance for the blind at the Illinois Division of Vocational Rehabilitation where he assisted blind people with learning professional skills to enter the workforce. He lost his sight at the age of 21, which motivated him to seek a career in public service assisting other visually impaired people.

The Adrian Scheltes collection contains 81 black-and-white gelatin silver photographs, two newspaper clippings, and four letters from the late 1940s-1950s. The photographs are of blind people working in a variety of jobs, including a florist, a disc jockey, switchboard operators, and assembly line workers. A few photographs show Scheltes at work as well. The letters are from employers of Scheltes' clients with updates about how they are faring in their work.

The purpose of the Illinois Division of Vocational Rehabilitation (DVR) is to find jobs for people with disabilities and provide support to help them grow and advance in their workplace. DVR's 1957 annual report states:

"Our job is to ameliorate the disability by medical services and to determine then what job a client can do, or to develop through vocational training an ability to do some job, and then to help him locate the job that matches his ability; when he is thus placed, he is no more handicapped than the rest of us."

A variety of services were offered, including medical services such as surgery, glasses and low vision optical aids, and diagnostic testing. Scheltes helped DVR's clients to enroll in various colleges, universities, and vocational schools to train for careers including teaching, journalism, law, social work, business management, and secretarial work.

The collection contains a 1955 letter from the commanding offer at the U.S. Naval Ordnance Plant in Forest Park, Ill., describing his satisfaction with hiring blind people over a period of seven years:

"...it is with sincere pleasure that I am in a position to advise that the undertaking has proved completely successful....our entire experience in the employment and placement of blinded personnel has been thoroughly enjoyable as well as profitable and it is difficult, with what is known now, to comprehend our initial

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apprehensiveness and fear of creating safety hazards in a strictly manufacturing operation by employment of the blinded."

The DVR assisted all their clients regardless of their race. A 1955 letter to Scheltes from the Association for the Advancement of Negro Blind praises his work to eliminate discriminatory practices against Black blind people:

"It is with a deep sense of gratitude that I, on behalf of the members of the association, extend to you our appreciation for your efforts in our behalf. You have done more in your division than any other single individual to eradicate discriminatory practices against Negro blind in the professional, industrial and social orbit."

Adrian Chester Scheltes was born September 1, 1916, in Chicago. He graduated from Northwestern University with a degree in education in 1943 and married his wife Lydia in 1947. They traveled often to Hong Kong, France, and Russia among other places. Scheltes died August 15, 2010.

The Adrian Scheltes collection is available at the UIC Library of the Health Sciences-Chicago Special Collections and University Archives reading room (see finding aid at <u>go.library.uic.edu/scheltes</u>). Appointments are currently limited to current UIC students, faculty and staff. Remote reference is available. Please call (312) 996-8977 or email <u>libspec@uic.libanswers.com</u> for more information or to make an appointment.



Three men assemble military identification tags while others observe to commemorate National Employ the Physical Handicapped Week, circa 1950. Adrian Scheltes collection (MSSCHE21), Box 1, Folder 24, Special Collections & University Archives, University of Illinois Chicago Library.

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BOOK REVIEWS

Pam Fessler. *Carville's Cure: Leprosy, Stigma, and the Fight for Justice*. New York: Liveright Publishing Corporation, 2020. 368 pages. \$28.95. ISBN: 978-1631495038

The chapter titles in *Carville's Cure: Leprosy, Stigma, and the Fight for Justice* display much of what a reader would want to know about the book. Beginning with "Exile," ending with "Lessons not Learned," and with titles such as "Rebellion," "Ripped Apart" and "The Hole in the Fence," in between, they evoke a story that is cinematic in its ups and downs, the underdogs finding and building a life for themselves despite powerful forces. *Carville's Cure* is also a deep dive into the archival materials and published memoirs that make up the body of information available on the Carville Hospital. From 1894 until its closure in 1999, the multi-building complex in Louisiana was a hospital for patients with Hansen's disease, better known as leprosy. For most of that time, it was the United States Public Health Service's national quarantine hospital or leprosarium.

The author, Pam Fessler, is an NPR correspondent with a family connection to a former patient. Written for a general audience, the book does not necessarily advance scholarship on the history of Hansen's disease or of stigmatized conditions in society, but it does not need to. Instead, the book contributes a nuanced and comprehensive picture of this single hospital from its founding through its closure. Fessler charts the history of medical advances and the varying levels of isolation and degradation the residents faced over the years. She highlights the ways in which both patient self-advocacy and the decisions of individual leaders influenced the residents' lives and freedoms, and describes patient advocates' role in starting to change the nation's view of their condition. The book has a narrow focus, discussing national and global context only when related to a particular patient or story the author is telling. Within that narrow focus, it shines, with one element that dims this shine.

It is complicated to write about a subject in which the most well-known language and the preferred language are different, such as the older term 'leprosy' and the modern term 'Hansen's disease,' which Carville patients themselves coined and advocated for. Often, it appears that Fessler's choice to use one term or the other is based on whose views she is describing, taking on a temporarily limited third person voice, as one might in a

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novel. For example, in an account of a column by a newspaper reporter, she says, "He then went on to correct some common myths about Hansen's disease, informing readers that leprosy was difficult to contract and that the modern illness was not the same as the one depicted in the Bible." However, at times Fessler switches within a paragraph without an apparent reason, so many instances of stigmatizing language go unflagged and unexamined.

On a number of occasions, Fessler failed to use an opportunity to trust the reader and bring them into her thought process by explaining her decision to use period language rather than more accurate language. At times this is distracting, and at times it's concerning because it is not clear whether she is paying attention to important issues. She adopts 1980s language to describe homophobia in the early years of the AIDS crisis, changing the tone and meaning of the passage while just barely implying a use/mention distinction. Fessler also describes Helen Keller as having "overcome" blindness and deafness to succeed in writing and activism. These examples are two of several this reviewer caught, but ultimately, the concerning thing is what a reader may not catch. How can a reader know that Fessler hasn't made similar exchanges of terms and concepts in other areas? How would those exchanges shape the narratives in the book?

Carville's Cure is impressively well researched. The vivid writing brings the characters and episodes of history to life, and in some senses, it is a very satisfying read, both as a work of history and as a work of narrative nonfiction. It inspires one to learn more about many of the subjects, both the key players such as Betty Martin, who wrote two memoirs about Hansen's disease, and side characters such as actress Tallulah Bankhead, who became a staunch advocate for Hansen's disease patients and a personal friend of patient Stanley Stein. The book also succeeds at telling untold stories, those of people whose lives are recorded in archival materials but who had not published or spoken widely about their own lives. The book would be valuable to history scholars and casual readers alike, but Fessler's choice to drop in period terminology while eliding key context about the use of those terms raises questions about biases in the text overall.

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A.J. Ammann, S. Brown, P. Burnett, E.A. Clement, L. Gerber, P. Ilieva, J.A. Levy, & P. Volberding. *Memory Lives On: Documenting the HIV/AIDS Epidemic*. San Francisco: University of California Medical Humanities Press, 2021. 113 pages. Paperback. \$19.99. ISBN: 978-1-678-0898-2-5.

While historical analyses and discussions of the AIDS epidemic are often rightfully anchored in the experiences of people with HIV/AIDS, the epidemic's impact affects health care workers, physicians, artists, as well as the librarians, archivists, museum professionals and others who help collect and preserve this history. While all these professions work toward a common goal, each field has a perspective not necessarily shared by the others and faces different challenges.

Memory Lives On: Documenting the HIV/AIDS Epidemic contains six presentations given at an interdisciplinary symposium of the same name in fall 2019, meant to bring together these disparate viewpoints and experiences. Due to the inclusion of viewpoints from some who have been on the front lines since the early days of the epidemic to those who are building new platforms to educate the public, the book itself serves as a historical document for people stewarding or researching archives, providing important contextual information and examples for implementing similar projects and initiatives.

Dr. Jay Levy's essay provides a fascinating look at the scientific research undertaken during the early days of the AIDS crisis by scientists, clinicians, and epidemiologists to determine the cause, which led to the discovery and isolation of HIV. AIDS research has often had funding issues, most famously when Ronald Reagan cut funding to the National Institutes of Health. It was additionally frustrating to read that Dr. Levy and the UCSF team had such little support from their administration. One has to wonder what could have been if full funding had been in place and easy to obtain in the early days. Not being from a medical background, I did not always understand the jargon, but Dr. Levy's obvious passion for his work comes across and provides an excellent start to the book.

Possibly the most timely section of the book is Dr. Arthur Ammann's chapter on the history of contact tracing and partner notification. Contract tracing in particular has become an important topic and part of our daily lives. Universal contact tracing has not been implemented to trace HIV infections despite its benefit for several reasons. At the beginning of the AIDS epidemic, it was difficult to know one had the disease until it had advanced. Before 1987 there were no drug treatments and additionally the gay

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community feared further discrimination. Ammann lays out arguments for and against universal contract tracing, as well as how medical treatments for people with HIV/AIDS and subsequent research should have led to universal contract tracing, only to be quelled by confidentiality and discrimination issues.

Due to the medical advances made towards treating people with HIV over the last twenty years, younger people may not be well-informed about HIV/AIDS. Shan-Estelle Brown argues that HIV narratives and information are still needed in school curriculums, using a medical anthropology course she taught as an example. The summary of where HIV information has been historically taught was interesting. Quite a few disciplines devote a class to this topic, although sporadically. As an anthropologist, Brown focuses on HIV and its intersections with health equity and power. The students are meant to come away from the class with general knowledge about HIV, but also empathy for people living with HIV.

I appreciated Brown's point that future classes should incorporate digital sources and social media. Millennials and Generation Z are digital natives, but still need guidance on information literacy and critical thinking. This chapter both shows the need for more classes like this and makes Brown's class easy to reproduce in other schools. Brown was able to add a coda on how this work relates to COVID-19.

Storytelling is a powerful outreach and education tool for all ages and can be especially effective in K-16 curriculum. Paul Burnett's presentation focused on reaching K-16 students using the HIV/AIDS oral history archive at the Oral History Center (OHC) at UC Berkeley and UC San Francisco. The AIDS oral history archive, which contains almost three dozen oral histories from the 1990s with epidemiologists, community physicians, and nurses, is only a small part of the OHC's content. OHC is using new technologies to build guides, curriculum content, and sample assignments aimed particularly at grades 8 and 11. Though this work to build a new platform with the Oral History Metadata Synchronizer (OHMS) was still underway when this presentation was given, the OHC has already laid important groundwork. To raise awareness of the AIDS oral histories, the OHC started a podcast, The Berkeley Remix – an excellent example of using digital media as Brown suggested.

Often a collection can bring new information to light when viewed through another lens. Elizabeth Clement brings a fascinating look at how obituaries from Utah newspapers were analyzed to see how the cause of death and the individual's partner were

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described. Clement begins with an interesting discussion of the ethical issues of reading obituaries of people who died from AIDS. Often AIDS was not mentioned in obituaries, so assigning this attribute runs the risk of violating medical privacy or inadvertently outing someone. I appreciated Clement citing the need to honor gay community norms as well as how she de-identified and used restricted archival records to conduct this research.

Clement's obituaries were collected by two people: Maggie Snyder a nurse on Utah's sole AIDS ward who worked closely with Dr. Kristen Ries, the only physician treating AIDS patients in the state; and Ben Williams, an out gay man who collected obituaries as part of his interest in preserving the history of Salt Lake City's gay community. Due to their different relative positions and levels of knowledge, their collections show interesting parallels and contradictions. These obituaries are important primary sources for understanding the history of the AIDS epidemic.

The experiences of people with HIV/AIDS in relation to religion and the work of religious communities to help this population are not often addressed. Jim Mitulski was the pastor of Metropolitan Community Church of San Francisco (MCCSF) from 1986-2001. Lynne Gerber uses recordings of Mitulski's sermons to draw information about how the congregation dealt with the AIDS crisis. Located in the Castro district at that time, MCCSF's congregation welcomed LGBT people. At the time Mitulski was hired in 1986, the church knew it needed to address and comfort people with HIV/AIDS and take an active role in the community. Luckily, the recordings were rescued from the trash a few years ago as the church was moving, or this resource would have ceased to exist.

Though this book is focused on AIDS/HIV memory work, it can serve as an example for anyone doing archival or historical work in the health sciences. Due to the symposium's goal of bringing together people from various fields, the book will be of interest to anthropologists, medical professionals, educators, etc. Archivists, librarians, and museum professionals who provide access and instruction to materials should read this book. As an archivist from the Millennial generation, I appreciated that the symposium included firsthand perspectives and experiences. Additionally, reading this in light of the current COVID-19 pandemic may give readers who are grappling with a COVID documentation project some perspective.

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Suzanne Koven. *Letter to a Young Female Physician: Notes from a Medical Life.* New York: W.W. Norton, 2021. 300 pages. \$26.95. ISBN: 9781324007142

Thirty years into a medical career, Dr. Suzanne Koven is inspired by a letter-writing activity with a group of medical interns to pen a note to "a young female physician." In the letter, Dr. Koven addresses the decades of apprehension she felt as a woman in a male-dominated profession. The resulting letter inspired Koven to publish an essay, released in May 2017, discussing her feelings of not belonging and imposter syndrome. The essay led to this book. *Letter to a Young Female Physician* provides a first-hand glimpse into the struggles women encounter in medical school, as residents, and as physicians.

Dr. Koven grew up in Brooklyn; her father was an orthopedic surgeon while her mother stayed at home before entering law school in her forties. Koven claims she did not aspire to be a doctor; instead she always felt it was something only men or people who were good at science could do. She describes applying to medical school in a panic after first trying to become a journalist and ending up as an assistant to the assistant editor of a trade magazine in Washington DC. According to Koven, this career trajectory scared her more than the daunting science prerequisites for medical school, so she went back to college for two years to take the mandatory courses, then applied to the Johns Hopkins University School of Medicine. Following medical school, Dr. Koven became a primary care physician. She is also a prolific writer and the inaugural writer-in-residence at Massachusetts General Hospital.

In *Letter to a Young Female Physician,* Dr. Koven tackles many controversial topics such as the pay gap between women and men; the challenges of being a mother or caregiver with a demanding career; the sexism and borderline harassment faced by female medical students and physicians; and racism in the medical field. She discusses major healthcare concerns including AIDS, mental health, diet culture, cancer, heart disease, and COVID-19. All of these topics are presented in first-hand accounts and anecdotes from her long career as a primary care physician. The reader—especially those who identify as female—can really connect and empathize with Koven through these stories.

However, the book often reads like a stream of consciousness narrative, making it hard to follow at times. For the most part, Koven sticks to a chronological order but there are moments where she jumps around from her childhood to later career and other times

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connects two tangentially related stories in one chapter. Yet, the book is an easy read without a lot of medical jargon.

The book is most valuable as a memoir, capturing the stories and memories of a seasoned physician. Future researchers should find value in the first-hand account of medical education and residency described by Dr. Koven as well as her experiences as a woman physician. Her honesty about her own mental health and body struggles are insightful and comforting.

Unfortunately, Dr. Koven does miss an opportunity to comment further on the complicated and controversial topics she presents. She describes racism, sexism, burnout, mental illness, and harassment in the medical profession in a candid manner, but at times it feels like she is stretching for examples instead of using her book as a platform to present solutions or really describe the effects these problems have on patients and physicians alike. An example of this, is in her chapter titled, "We have a body" where she addresses racism in the medical field. Here she presents multiple stories of racism against patients and medical professionals but instead of commenting on how things have changed for the better or suggesting areas for improvement, she instead states "Medicine is much more diverse now," which instead suggests these same issues are now gone from the profession. Further commentary on how the medical profession could move forward and address these issues would be valuable.

That being said, the book does an excellent job at bringing to light the struggles women professionals—both those in and out of the medical field—face. Everyone could benefit from reading this book as it shows the difficulties all physicians, as well as all professional women, generally face. The book is an enjoyable, relatable read.

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Country E. Thompson, *An Organ of Murder: Crime, Violence, and Phrenology in Nineteenth-Century America*. New Brunswick, NJ: Rutgers University Press, 2021. 278 p. Hardcover, \$120, Paperback, \$28.95. ISBN: 978-1978813069

In 1849, Walt Whitman visited the Phrenological Cabinet of Fowler and Wells in New York City's Clinton Hall, where he sat for a cranial examination. The brothers Orson and Lorenzo Fowler and their brother-in-law Samuel Wells were practitioners of phrenology, the nineteenth-century practice that encouraged the study of the shape of the skull to determine a person's mental faculties and character. Fowler and Wells' Phrenological Cabinet served as a museum and repository of phrenological merchandise; it attracted as many visitors as did the nearby P.T. Barnum Museum. Lorenzo Fowler examined Whitman, determining that he was strong in "animal will" with large Amativeness, Self-Esteem, and Individuality. Whitman quoted widely from the analysis in subsequent publications. The Fowlers sold Leaves of Grass at their Phrenological Cabinet to visitors and reviewed it in the pages of their American Phrenological Journal.¹ Whitman's poetry embraced phrenology and sowed its popularity in the imagination of his nineteenthcentury readers. The art of reading skulls-originated on the Continent by the German physician Franz Joseph Gall in the 1790s and translated to the English-speaking world via the United Kingdom by his assistant Johann Spurzheim and by the Edinburgh barrister George Combe in the 1820s—was now seeded in the American imagination. It had been immortalized in the poetry of America's finest contemporary poet.

Whitman belonged to the nineteenth-century phrenological category of "good heads," a grouping that was primarily white and masculine. As Courtney E. Thompson illustrates in her slim but densely-packed monograph, this consolidation of "great men" was contrasted both explicitly and implicitly in phrenological conversations about the "bad head" of the criminal. *An Organ of Murder*, an expansion of her dissertation project in the History of Science and Medicine program at Yale University, demonstrates the vital role phrenology played in notions of criminality in the 1870s and in the development of the study of criminology in the United States. Ideas about criminality and the propensity for violence were disseminated, as Thompson shows, not in the lofty register of poetry and literature, but in the nation's courtrooms and prisons as well as in publications devoted to medico-legal discourse.

¹ Mackey, Nathaniel. "Phrenological Whitman." *Conjunctions*, no. 29 (1997): 231–51. http://www.jstor.org/stable/24515733.

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At its most powerful in the 1840s, phrenology was a significant social influence, with critical implications for nineteenth-century American ideas about human behavior, gender, and race. It flourished in antebellum America before more rigorous scientific protocols and professional boundaries in science had been established.² As Thompson deftly shows in this important study of the application of phrenology in the criminal justice system, phrenological frameworks were used in very different ways, depending on the agent and the context. Phrenology was deployed as a mechanism of social control in support of racial science. It was also used by women, who used it to advance women's rights, and by abolitionists, to make the case for emancipation. Distinctions between "good" and "bad" heads were made to exorcise anxieties about strangers, foreigners, and the influx of new populations in cities. And lastly, the courts deployed phrenologists and phrenological language to offer evidence for insanity and criminality between the 1830s and the 1850s. Phrenologists routinely visited prisons and measured and commented on the capacity for rehabilitation among the incarcerated they examined.

Thompson's book begins with an anecdote about another phrenological reading conducted by Fowler in 1849, the same year as Whitman's. This reading transpired not at the Fowlers' museum but in the New York Halls of Justice and House of Detention, where Fowler conducted test examinations on three prisoners. When his examinations were complete and the individual charges against the prisoners were revealed, Fowler pronounced stunning correspondences between the heads he saw and their rap sheets. Here was proof of the "triumphant success of phrenological truth" (p. 1). Prison officials routinely extended invitations to phrenologists to "read" the heads of both living and executed criminals, just as legal practitioners asked them into the courts, to provide "expert witness" testimony on the stand.

Thompson, now an assistant professor of the history of science and medicine at Mississippi State University, organizes her analysis into six chronological chapters written in clear, incisive prose. She begins by revisiting phrenology's European origin story, reframing the narrative to focus on Gall and Spurzheim's dependence on access to British prisons in the development of their phrenological theories. The titular "organ of murder" refers to a space on the skull these phrenologists understood to be the site of Destructiveness, located near the ear. Gall had first identified this organ, associated with "animal" propensities as the organ of *Würgsinn* (strangling or choking) or sometimes

² Daniel Patrick Thurs, *Science talk: changing notions of science in American popular culture*. New Brunswick, NJ: Rutgers University Press, 2007. 22-52.

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Mordsinn (murder); Spurzheim and Combe softened the translation to "Destructiveness" when they published their phrenological work in English (p. 20).

In chapters three and four, Thompson shows how phrenological theories gained traction in American courtrooms and prisons, where phrenologists testified that the size of the organ of Destructiveness could be linked to a propensity for violent criminal behavior, and prisoners who were determined to possess large Destructiveness were considered lost causes, unfit for rehabilitation. Whether it was called the organ of murder or Destructiveness, Gall, Spurzheim, and Combe all linked the size of a subject's Destructiveness with criminality and violent impulses. By the middle of the nineteenth century, Thompson explains in Chapter 5, established practitioners of phrenology as well as canny entrepreneurs monetized phrenological readings and popularized its tenets through visual displays while charging fees to read heads in cities and small towns alike. While the Fowlers claimed devotion to phrenology's scientific rigor, their critics accused them of profiteering and quackery.³ Nevertheless, both skeptics and believers, curious and eager to test phrenology's validity, continued to submit themselves and others for comparison with its charts of the mind, keeping the practice alive well into the twentieth century.

Chapter 6 examines the "new phrenology," exhibited by a new set of practitioners interested in the correspondences between the brain's topographies and the criminal impulse. While Cesare Lombroso researched the incarcerated and institutionalized to solidify his theories of biological criminality, the French police officer Alphonse Bertillon introduced his practical system of anthropometry, advocating that the careful measurement of the head and the body could help law enforcement accurately identify criminals (pp. 140-148). Thompson notes a throughline from Gall and Spurzheim's phrenology to twentieth-century scientific ideas about brain localization that persists in contemporary conversations about genetics, profiling, and rehabilitation today. This chapter on phrenological legacies, a strength of Thompson's book, might be further enhanced by a discussion of the rise of an interest in determining the parameters of the normative body in the first half of the twentieth century, as recounted by the scholar Anna Creadick and others.

Phrenology was a regional phenomenon. Northeasterners and Midwesterners frequently middle-class white men and women—eagerly devoured the Fowlers' popular

³ Thurs, 23.

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American Phrenological Journal and its attendant literature. Thompson's use of the discipline's literature and her close readings of the text pay dividends, often producing sophisticated observations about the interplay between phrenological ideas and racial identity. A comparison of two descriptions of convicted murderers in the American Phrenological Journal published a year apart offers insight into the ways abolitionist sympathies may have impacted phrenological interpretations.

In 1848, the Irish immigrant John Haggerty was described as an "animal [possessing a] desperate, dangerously shaped head, poorly balanced, with a powerful body to stimulate a powerful animal, selfish mind, with comparatively weak moral and intellectual brain" (p. 24). Conversely, the enslaved man called George in a journal article published one year later in 1849, exhibits "investigating and applying qualities [that] would have made him a proficient under fair advantages....if he were to read law two months, he would beat any lawyer in the county" (p. 24). Thompson's perceptive considerations of the literature suggest that American phrenologists were cautious about offering slavery supporters ammunition in the form of phrenological evidence. Her research contributes to larger conversations about the relationship between racialization and criminality in nineteenthcentury America and offers considerable evidence that criminality was not specifically racialized in the antebellum United States. Thompson argues that it was, in fact, the racialization of phrenology that characterized its decline. Blackface phrenology is incorporated in set pieces in minstrel shows and in nineteenth-century stories like Edward Foote's Sammy Tubbs, the Boy Doctor, and "Sponsie," the Troublesome Monkey (1874), suggesting that it had been embraced as a Black science and positioned as a pastime prone to ridicule.

Thompson's observations here raise intriguing questions about the ways phrenology is enacted in understudied media including local theater and medicine shows, ephemera, and dime museum displays and suggest an avenue for further research by historians of medicine, performance studies, and Black print culture. How did ideas about "good heads" and "bad heads" play out in widely circulated ephemera and popular amusements? Another strength of her book is her use of visual evidence. She uses period illustrations effectively to demonstrate the circulation of phrenological ideas about brain localization and what a "bad head" might look like. Her book is enhanced throughout by her careful selection of images that contribute to our understanding of the places ordinary Americans might be confronted with phrenological portraits of criminal types. It is a compliment to Thompson's work that her book raises so many fascinating questions about the ways nineteenth-century bodies were read legally, medically, and



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socially as moral and immoral, sane and not sane, criminal and capable of rehabilitation. Readers interested in the fields of criminology, medico-legal studies, the histories of psychiatry and psychology, and the history of nineteenth-century America more broadly will benefit from reading this well-researched and thoughtfully written work.

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