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outlines the overall attitude of both the central and provincial governments towards the control of malaria. Colonial policies regarding yellow fever are also discussed in detail, especially the strikingly different position that was adopted on the subject of quarantines against yellow fever.

In making these observations, though, Polu also makes some controversial remarks. For example, while discussing malaria research in India, she notes that 'over the course of four decades (between 1890 and 1930), the government of India had gradually achieved its goal of establishing India's pre-eminence in the world of medical research' (p. 67). In a similar vein, she also notes that the government of India made 'continued efforts to make research in India rank among the best in the world' (p. 66). Such statements depict the colonial government as single-mindedly pursuing the goal of research excellence and effectiveness. Contrary to this, it could be argued that the colonial government in India was in fact distinguished by its strikingly small investment into medical research, despite huge mortalities and regular outbreaks of 'tropical diseases'.

Polu also uses the concept of 'risk' in an interesting way. At several points in the book, she refers to the Indian government's perception and management of risk in the context of epidemic outbreaks. These concepts have borrowed from the financial sector and used in the historical context without adequate reformulation. Indeed, several other recent ideas and notions have also been applied somewhat unreflexively to the nineteenth century. For instance, in one place Polu makes the observation that epidemics led to a loss of working days, loss of efficiency and so on (p. 14). Such quantitative cost—benefit analysis in terms of loss of working hours is a rather recent development, and is perhaps not equally relevant in the context of the nineteenth century. At another point, the author betrays her proclivity for free-market policies by noting that the Indian government's policies against yellow fever amounted to 'reactionary public health protectionism' (p. 136). What is forgotten is that such 'reactionary protectionism' was in fact proposed and adopted in the first instance by many European governments, who are today the chief advocates of free markets and non-interference.

These minor quibbles apart, the book is an important contribution to the historiography of public health in India and would be useful reading for specialists working in the field. It also places Indian epidemic outbreaks squarely within the international context, which yields some valuable insights.

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doi:10.1017/mdh.2013.10

**C. Promitzer, S. Troumpeta** and **M. Turda**, *Health, Hygiene and Eugenics in Southeastern Europe to 1945* (Budapest and New York: Central European University Press, 2011), pp. vii, 466, \$50.00, hardback, ISBN: 9789639776821.

Maria Bucur argues in the conclusion that in this volume the Balkans are transformed 'from a relatively vapid area on the map of modern Europe into a vibrant locale of change, modernization and contestation' (p. 430). *Health, Hygiene and Eugenics in Southeastern Europe to 1945* is certainly an outstanding achievement and represents a significant breakthrough in scholarship on health politics, eugenics and population control in Europe's 'backward' region. Progressing in a loosely chronological format, it reveals how both

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the individual and the state became increasingly defined in biological terms, with the focus of each chapter not the political elites, as is often the case, but leading medical professionals. Thus the introduction describes the volume as an exploration of the 'porous border between care for the population and the repression of their individual rights' (p. 21). Above all, these thirteen original studies demonstrate that modernisation in southeastern Europe was coloured by strong, indigenous expressions of national character.

Neatly framing the volume as a whole, Weindling asserts that, until now, historians have given undue credence to the idea that 'German racial superiority' was 'imposed on other European countries by the Third Reich'. The reality is, at this time in southeastern Europe, 'race and the racialization of hygiene, health and medicine were contested and open to a multiplicity of interpretations' (p. 40). With this in mind, a number of new discourses emerge from the second and third parts, which deal with 'Health and Hygiene' and 'Eugenics and Reproduction' respectively.

The contributors use various methodologies, ranging from broad narratives on the modernization of health, such as Papastefanaki on occupational health in Greece, to the narrow investigation of individual eugenic ideas, such as Georgescu on Saxon eugenics in Romania. The result of this is to highlight how the 'culture of health' was dispersed (whether to help fight diseases, like typhus or malaria, or promote national biological improvement via eugenics) in each national context, through books and journal articles, targeting the well-educated, but also pamphlets, posters and even parades as means to overcome widespread illiteracy and engage with the masses.

There are also more specific discourses established throughout the book. In part II, for example, various chapters detail the interactions between Bosnian and Bulgarian medical professionals and the Muslim communities, often considered a symbol of 'backward' former-Ottoman rule, gender roles and the nature of 'civilising' in general. Elsewhere, the 'Europeanisation' of public health in Greece produced remarkable reactions from factory workers. Many refused to utilise the new protective legislation put in place, which is explained by Papastefanaki as 'not merely a matter of 'backwardness' (p. 185) but often more an 'unspoken resistance to a technocratic 'civilization' process from above' (p. 191).

In part III, the influence of orthodox religion on eugenic policies is striking. In Romania, for example, Turda describes how members of the orthodox clergy were enlisted to help diffuse eugenic arguments for sterilisation, whereas in Croatia, Yeomans highlights how Catholic doctrine influenced a more pro-natalist approach, resulting in extreme punishments for those undergoing and performing abortions. Other chapters reveal how different understandings of the nature of heredity were taken from outside influences and in turn helped shape native eugenic ideas. For example, Theodorou and Karakatsani demonstrate how the adoption of Neo-Lamarkist ideas by a number of French eugenicists influenced Greek arguments on puériculture and 'biological capital'.

The scope for comparative analysis between the studies is rich, with four chapters focusing on Greece, three on the former Kingdom of Yugoslavia, two on Bulgaria, and two on Romania. The earlier chapters are generally successful in comparing how widespread disease was managed differently across southeastern Europe. It could be suggested that more comparisons may have been made in the later chapters. For example, Catholicism appears to play a prominent role in shaping the eugenic ideology in Yeomans' chapter on Croatia, and Fuchs spends much time discussing how the perceived cultural 'backwardness' of the Muslim minority effected the efficiency of health care modernisation in Bosnia and Herzegovina. However, while Dudac's chapter on public health in Yugoslavia successfully explains how priests were used to promote new ideas on

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health and hygiene, more perhaps could have been said on how the presence of religious minorities and the different national religious contexts across the Kingdom of Yugoslavia effected the development of public health. Also, following the two Romanian chapters, one may ask, how did Manliu and Facaoaru, who argued for Romanian racial improvement through negative eugenics, view Csallner's Transylvanian Saxon movement, a pro-natalist German minority? It would seem that a comparative study could prove an interesting discourse within Romanian historiography.

Minor criticisms aside, this is a superb collection. It is to be hoped that the participants now move towards acknowledging each other as part of a larger dialogue on the 'culture of health' in southeastern Europe. Such incisive and intriguing contributions to this field suggest that there are exciting times ahead for the history of this fascinating region.

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doi:10.1017/mdh.2013.11

Christine Wolters, Tuberkulose und Menschenversuche im Nationalsozialismus. Das Netzwerk hinter den Tbc-Experimenten im Konzentrationslager Sachsenhausen [Tuberculosis and Human Experimentation in National Socialism. The Network behind the Experiments on Tuberculosis in the Sachsenhausen Concentration Camp] (Stuttgart: Steiner Verlag, 2011), pp. 287, €49.00, hardback, ISBN: 9783515093996.

Medicine under National Socialism – there is barely a single field in the history of medicine that has been more intensively researched in recent years. However, the conjecture that no more new insights can be expected in this area is unfounded. With respect to criminal experimentation on humans in concentration camps, an astonishing number of questions remain unanswered, particularly in the field of victim research. The research project 'Victims of Human Experiments and Coercive Research under National Socialism', led by Paul Weindling, is only now shining some light in this field: not even the exact number of victims of Nazi human experiments has been known until now, let alone their narratives.

Due to the sources, the study by Christine Wolters on the tuberculosis experiments in Sachsenhausen concentration camp is able to only partly include the victims' perspective. However, it does show that, even in perpetrator research, new insights are by all means possible. From the scope of the completed source analyses alone, the work by far exceeds the usual framework of medical history dissertations which, while going into great detail and taking various aspects into consideration, are moreover highly contextualised.

The main objective of the author is to combine the topic areas tuberculosis research and human experiments. Here she justifiably takes as a starting point the argument that human experiments in concentration camps should be analysed against the backdrop of contemporary research, and are by no means to be dismissed at the outset as 'pseudoscientific'. The author first outlines the development of tuberculosis research and control in Germany. From Robert Koch's unsuccessful attempt to establish 'tuberculin' as a therapeutic agent, up to the evidence for the effectiveness of Conteben, Streptomycin and para-aminosalicylic acid, she starts by tracing the research on effective measures against tuberculosis. She not only details the search for medication, but also addresses the BCG vaccination, developed in 1921, which, however, was viewed with scepticism in Germany,