

HOCHMAN, Gilberto; María Silva DI LISCIA and Steven PALMER (organizers), 2012, *Patologías de la patria. Enfermedades, enfermos y nación en América Latina*, Buenos Aires, Editorial Lugar. 278 pp.

This book deals in an attentive and, at the same time, sophisticated manner with the intersections between illness and scientific, national and even nationalist discourses. The authors, though their articles are each about a specific region – Cuba, Colombia, Brazil, Argentina, Peru, Costa Rica and North American California – and deal with time frames that stretch from the beginning of the 19th century to the end of the 20th, were able to successfully employ a variety of sources to investigate the relations between illness, national identity, and their social meanings.

Invented, constructed, imagined nations have stopped being primordial realities for the majority of western historians. They are studied as historical constructs and as cultural artifacts destined to demarcate new networks and social institutions. Nevertheless, the intertwining of national discourses and the legitimation of supposed «national» biological characteristics or, on the contrary, natural reasons that are consequently considered immutable and therefore incapable of falling into decadence did not have a central place in research as they do in the articles gathered in *Patologías de la patria*. **National knowledge** – geography, history, linguistics – required scholars and propagators who would fulfill the nationalistic mission and the intertwining of these disciplines with medical knowledge provided the tools to establish Manichean associations between «inferiority and superiority». «Docility», «resistance», and «immunity» were seen as innate characteristics which made certain populations more resistant than others and elites were seen as being responsible for strengthening these characteristics because they were viewed as positive factors and because of a desire to eradicate those characteristics deemed unsuitable. The mechanisms were varied and included repopulation with idealized populations, urban and rural sanitation, vaccination campaigns, measures to protect mothers and their children, and environmental reforms.

The theme that runs through the book is how the experience of illness should be deciphered using a code that goes beyond the biological and must be interwoven with the concepts of nationality, ethnicity, and scientific ideas. Thus, the question of how national discourse is linked to illness is the main focus and, following this idea, the way that articulations of the national and the foreign went about creating frontiers of exclusion in which the supposed illness or the longed-for health occupied a space in national discourses that led to a reconsideration of the notion of citizenship.

Despite the differences in the time periods covered by the articles in the book, one finds that neo-Hippocratism, French medical geography, eugenics, positivism, knowledge of ecology and developmentism provided pseudoscientific tools to justify who was inside and who was outside the frontiers of the desired «national essence». In this way, domination based on scientific knowledge was justified and healthier spaces were designed to condition the formation of more upright and modern citizens.

One of the central ideas of the book, presented in the introduction by Hochman, Palmer and Di Liscia, is to propose the concept of «patriotic pathology», understood as a critique of the self-celebrations of the medical community that claimed responsibility for its discoveries and technical innovations. These self-celebrations should be examined analytically and submitted to theoretical and empirical reflection in order to construct a complex account that permits us to stop reproducing the same heroic version of the history of medicine. At the same, this proposal constitutes a critique of the diffusionist model since, while international influences in the development of local science are noted, attention is also given to vernacular developments and to how, in many cases – for example in the implementation of vaccination campaigns – local experiences were more sophisticated and efficient than metropolitan ones.

Medical and political reports about smallpox, typhus, trachoma, tuberculosis, Chagas' disease, cholera, and malaria; medical surveys of the conditions of populations and rural endemic diseases; literary sources about stigmas and stereotypes regarding certain immigrants; doctors' ideas about climatic and geographic factors in the diagnosis of certain diseases; and demographic data – all of these are the subjects of the documents chosen by the authors to study the main theme of this compilation: how can the relation between history, health, and nation be studied?

The essays collected in this book point to the necessary connection between local knowledge and the authority of national states. Thus, reports produced by public agencies, scientific records, health policies, and the implementation of sanitation projects play leading roles in the narrative. But it is well to remember that the producers of knowledge often generate that knowledge without the support of the state. While national states are important agents for the generation of knowledge, they are not the only such agents nor are they the most important.

While the studies concentrate on large urban centers, they also report on the problematics of distant and socially marginalized areas and populations. Indigenous people, slaves, and peasants all appear in the articles through the dense descriptions of experts, academics,

and scientists. Of course, while these descriptions tell us nothing about how these populations resignified the experience of domination, they do provide some elements that make it possible to reconstruct, in the future and through comparison with other documents, their population movements, their illnesses, and some of their customs.

By tracing the importance of ideas about eugenics, this compilation unintentionally touches on one of the richest debates in the field in recent decades: the importance of conceptions relating to eugenics in Latin America. Eugenics made it possible to provide a pseudoscientific cloak for strategies of identification, classification, hierarchalization, and exclusion of persons. In this context, two approaches developed: the Anglo-Saxon, more predisposed to strategies of exclusion through euthanasia, abortion, and forced sterilization of those who were not «normal»; and the Latin approach, which, though it supported exclusion and population control, did not resort to mechanisms of forced exclusion, influenced as it was by the Catholic Church. The essays collected in this book suggest that eugenics in Latin America promoted the establishment of systems of medical relief and assistance; that is, priority was given to socially inclusive institutions by means of public policies. The mechanisms of control and subjection of people, such as prenuptial medical certificates or medical checkups in schools were subverted by the incapacity of the state to institutionalize these regulations due to a lack of skilled personnel to carry out the tasks required, a lack of funds or recurring political changes.

From this interlacing of state intentions, eugenic artifacts, and conduct of individuals, there emerges a more opaque terrain that, though difficult to reconstruct, challenges us to achieve greater analytical complexity so as to ponder both discourses and practices. The success of the processes of medicalization is not only based on the imposition of state biopolicies, but also on their acceptance and appropriation by individuals, who understand that they can obtain some benefit by putting themselves in the hands of those who say they can cure.

The essays in this compilation are the product of research processes which were well-documented and especially attentive to the permanent interrelation between illness, institutional and administrative intrigues, their political undercurrents, the complexity of the process of the construction of states, scientific debates, processes of national identity, and prevailing scientific ideas.

Despite the fact that its conclusions deal with the ways that processes of illness are interwoven with processes of national integration and exclusion, the book also contains theoretical and historiographic ingredients that render it an altogether broader and more

ambitious proposition, inviting reflection about how one can study the characteristics of institutionality and the distinct dimensions of politics, science, and the nation through the lens of illnesses. In this way, the book illuminates questions that at first glance appear to be lost in conventional historiographic works.

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