

about experiments on human blood transfusion in *The Fair Maid of Perth* (1828). In this timely essay on the fictional figure of the ‘revenant’, or the dead-alive, Inglis argues that the topic has a far wider reach than simply the medical: such advances in emergency medicine inspired larger existential questions about the increasingly blurry line between life and death. Scott is also the focus of Lindsay Levy’s chapter, which, however, focuses on the writer’s collection of medical texts – or, rather, the notable lack of medical self-help texts in Scott’s collection. Notably, David Shuttleton’s essay on medical biography as a literary genre – specifically, the hybrid and multi-authored biography of William Cullen – appears to reprise the organising principle of the first part of the volume because it concerns one of the founding figures of nerve theory, which G. S. Rousseau and many after him have linked most convincingly with the culture of sensibility. Cullen is thus mentioned frequently in the initial essays of *Scottish Medicine and Literary Culture*, which makes the placement of Shuttleton’s essay somewhat curious initially. Yet, the publication date of the last volume of Cullen’s biography – 1859, even though the first volume was published in 1832 – suggests that chronology drove the placement of Shuttleton’s chapter in this volume, for which the range of years is 1726–1832. The figure of Cullen and the late time period also links Shuttleton’s chapter to the final one, written by Gavin Budge, who discusses the work of Cullen’s ‘wayward pupil Dr John Brown’ and the transatlantic reach of his ideas about Brunonianism and nervous exhaustion (15). Budge’s essay reaches late into the nineteenth century – and even across the ocean in its discussion of Harriet Martineau – and it therefore concludes the volume suitably by gesturing to the wide-reaching effects of Scottish medicine and its influence on literary culture.

Scottish Medicine and Literary Culture is a valuable contribution to the field of literature and medicine. It argues convincingly that the Scottish Enlightenment was at the root of what we think of as interdisciplinarity today. However, this review would not be an honest one if I did not mention that the volume is plagued by several technical problems, which include: an incomplete index that does not account for all of the critical sources mentioned in the essays; punctuation errors and typos (eg. pages 14, 147, 149); erroneous spelling of proper names (eg. ‘Papavoine’ (179) versus ‘Papvoine’ (181, 182)); and the presentation of the name of James Tilly Matthews as ‘James Matthew Tilly’ (which is moreover spelled ‘Tilley’ on page 222). But these quibbles cannot overshadow the usefulness of a work that offers a range of highly original insights and lively, informative discussions about the ‘centrality of natural philosophy and medicine to the project of the Scottish Enlightenment’ (1), as Coyer and Shuttleton summarise the project. *Scottish Medicine and Literary Culture* is of great value for the field of literature and medicine and offers a necessary corrective to the past marginalisation of medicine and privileging of the ‘scientific and philosophic over the literary’ (3) by too many other histories of science.

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Marcos Cueto and Steven Palmer, *Medicine and Public Health in Latin America: A History* (New York: Cambridge University Press, 2015), pp. vii + 306, \$29.99, paperback, ISBN: 978-1-107-63301-8.

In the last three decades, the range of scholarship examining the history of medicine and public health in Latin America has expanded immensely, generating new insights about

the region's role as a producer of medical knowledge and site of medical pluralism, among other things. We have long lacked, however, a monograph dedicated to synthesising this work and providing a comprehensive account of the region's medical history. Marcos Cueto and Steven Palmer fill this gap with *Medicine and Public Health in Latin America: A History*. Published as part of Cambridge's 'New Approaches to the Americas' series, their work will be of value to experts and lay readers alike.

Medicine and Public Health in Latin America is organised both chronologically and thematically. The first chapter examines practices of healing in pre-colonial and colonial Latin America, emphasising both the range and depth of indigenous medical knowledge and the diversity of healing traditions that came to characterise the region as European and African populations took root there. By drawing on ethnohistorical studies, research on enslaved people's healing practices, studies of the Catholic Church's involvement in medicine, and analyses of how different practitioners and colonial officials engaged the ideas of the Enlightenment, the chapter demonstrates that healing traditions did not simply coexist side by side in colonial society but also mixed and led to the generation of new medical knowledge. Chapter Two builds on this work by examining the formation of national medical traditions and sanitary states in the nineteenth century, after Brazil and most of Spain's colonies gained independence. This chapter emphasises the centrality of medicine and public health to state- and nation-building processes and outlines various ways that professionalising Latin American healers gained influence in national politics. It also examines how such professionals engaged scientific advances from Europe and North America in their research and contributed to international scientific debates, focusing especially on the example of tropical medicine in Brazil.

Chapters Three and Four cover much of the twentieth century, yet they examine it from distinct angles. Chapter Three traces the rise of the international health movement and outlines how the movement's approach to disease control and health improvement changed from the early days of the Rockefeller Foundation's philanthropic hookworm campaigns to the disease eradication efforts of the Cold War. Throughout, Cueto and Palmer argue that Latin America proved central to the development of international health as a larger field, a phenomenon they attribute in part to the pressures of modernisation, changing demographic conditions, and the chronic problem of unequal access to health care for the region's rural poor. They suggest that Latin American countries constituted attractive sites for the development of overseas medical interventions because they were no longer subject to forms of European colonial domination that persisted elsewhere. This exposed the region to the hegemony of the US on medical matters, but it also meant that Latin American medical professionals, who were amenable to working with outside agencies and experts, became key protagonists in the development of international bodies focused on health. Latin America thus became home to ambitious, creative, and experimental approaches to addressing health needs, which furthered advances in modern medicine. These themes of medical excellence and the contributions of Latin American experts garner additional attention in Chapter Four, which surveys some of the region's key innovations and profiles those responsible for them. Drawing on the long-standing theme of medical excellence on the periphery, this chapter highlights the work of such figures as the Peruvian high-altitude physiologist Carlos Monge, the Brazilian rural health specialist Carlos Chagas, and the Venezuelan malariologist Arnoldo Gabaldón. A final section discusses the role of medical experts in politics and social movements and highlights, in particular, the example of Ernesto 'Che' Guevara.

The fifth chapter of *Medicine and Public Health in Latin America* examines how the practice of medicine and public health has changed in more recent decades in

response to calls for expanded primary healthcare, the introduction of neoliberalism and structural adjustment, the emergence of HIV/AIDS, the return of cholera, the rise of new global health institutions and leaders in medical philanthropy, and the development of alternative models for addressing health inequities. Cueto's and Palmer's explanation of how neoliberalism transformed approaches to the provision of medicine in Latin America is excellent, especially when juxtaposed with their discussion of the alternative path Cuba has taken. Of particular note, however, are their overviews of the HIV/AIDS and cholera epidemics, which serve to illustrate the pitfalls of neoliberal approaches to managing, and ultimately trimming and privatising, state-administered healthcare. The chapter thus provides a comprehensive picture of current healthcare challenges in Latin America, the persistence of old problems and inequities inadequately addressed, and the innovative ways in which Latin American medical and public health experts, as heirs to a tradition influenced by medical pluralism, have pursued solutions.

Some of the concepts that are central to the book's argument will be familiar to those already acquainted with Cueto's and Palmer's scholarship. Of particular note, the concepts 'culture of survival' and 'health in adversity', which figure prominently in the later chapters, have appeared elsewhere in Cueto's publications. Several of Palmer's works, moreover, have explored extensively the theme of medical pluralism. These ideas, however, prove indispensable for conveying some of the more important points about the history, implementation, and practice of medicine and public health in the region. In particular, they succinctly describe how populations and health practitioners have overcome structural challenges and obstacles to the attainment of health and provision of care, creating in the process new forms of medical and public health practice that reflect their ingenuity and tenacity.

This authoritative monograph is so well organised that it is difficult to find quibbles with its content and form. Although some readers may wish there were greater coverage of medicine during the three centuries of Spanish and Portuguese rule, the decision to address the colonial period in a single chapter is reasonable given the relative paucity of scholarship in comparison to the nineteenth and twentieth centuries. Others may wish certain works were cited more extensively in the book's chapters and its useful list of suggested readings. None of these concerns, however, detract from what the work achieves. Indeed, its greatest impact may be in demonstrating to a non-Latin Americanist audience the region's importance in shaping the broader history of medicine and public health.

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Matthew Heaton, *Black Skin, White Coats: Nigerian Psychiatrists, Decolonization, and the Globalization of Psychiatry* (Ohio: Ohio University Press, 2013), pp. 288, \$32.95, paperback, ISBN: 978-0-8214-2070-6.

Matthew Heaton's *Black Skin, White Coats* represents the first full-length monograph to examine psychiatry in early post-colonial Africa. Focusing on the period of decolonisation in Nigeria (1950s–1980s), Heaton shows how Nigeria's indigenous-born psychiatrists became more open to collaborations with traditional healers and attempted to free their discipline from the weight of colonial racism. In doing so, Heaton contends, Nigeria's psychiatrists were not only concerned with reinventing psychiatry within their own