

rhetoric buoyed by the support of violent youth groups, both significant components of the fascist push for national rejuvenation. Negative measures like sterilisation – so popular in other countries at the time – were overlooked in favour of positive racial hygiene that placed 'physical education on a par with academic training' and encouraged citizens to start 'large, "valuable" families' (p. 213). In accordance with Self-Help's Third Reich benefactors, the exclusion of Jewish people was a 'practical benchmark towards re-homogenising the Saxon national body and Lebensraum'. Elsewhere, in a remarkable example of how eugenic racism became part of Saxon society, we hear the story of a German 'girl' who 'had obligations to her nation that went beyond her personal happiness. While she was free to marry whom she desired, the national community reserved the right to exclude her for abandoning her heritage' (p. 111). As the study ends in the 1940s before eugenics was widely discredited, Saxon eugenic discourse moved from what was once passive education to totalitarian influence, as one eugenicist concluded 'the individual's health is no longer his private matter; [...] the right of a person to his own body is surpassed by the nation's right over it' (p. 253).

This study provides a fascinating insight into the existential struggles of an ethnic minority trying to make sense of the unpredictable challenges of the post-war climate after the First World War. The modernist desire for national rebirth was shared in other countries (and in other manifestations within Romania itself), yet Georgescu brilliantly tells the story of the changing nature of *Saxon* identity, which was consumed by the need to build a *Eugenic Fortress*.

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**Judith Godden**, *Crown Street Women's Hospital: A History, 1893–1983* (Sydney, Melbourne, Auckland, London: Allen & Unwin, 2016), pp. xi, 382, \$45.00, paperback, ISBN: 978-1-74331-840-9.

Crown Street Hospital, founded in 1893, was to become Sydney's largest women's hospital with over 6000 births recorded each year by the early 1960s. It was the centre for major research into pre-eclampsia for which it gained international acclaim in the 1950s, and Dr William McBride from the hospital was credited with discovering the link between thalidomide and birth defects in 1961. But just as significantly as its contributions to medicine was the fact that it impacted on the lives of many Sydney women over its ninety-year history, priding itself on caring for the most impoverished and marginalised women in society and the sickest babies; it was, Godden tells us, 'a hospital with a heart'. From the time of the 1930s Depression its declared policy was never to turn a woman away, and despite staff shortages and overcrowded wards, with births occurring in corridors, it kept that promise.

This is a commissioned history and as such Godden strove to be comprehensive in telling its story, including management, building construction, finance and staffing issues. These details of the hospital's institutional history make for less compelling reading (appearing in short sections under subtitles such as 'Buildings,' 'Renovations,' 'Administration' and 'Board'), and the lack of footnotes detracts from its academic usefulness. Nevertheless, there is much here to keep the reader engaged.

Godden deftly captures the culture of the hospital. We learn how Sydney's immigrants in the period after the Second World War (particularly Greek, Italian and Maltese women)

came from cultures that encouraged the expression of pain and tended to shout loudly during birth, scaring some of the other first-time mothers; epidurals apparently sorted this. Some of the accounts are of pain, suffering and death, sometimes of harsh treatment by staff (this is no romantic history of the hospital), but often of kindness, gentleness and understanding. Godden rightly keeps the midwives in the foreground, not surprisingly given her background in nursing history, and she devotes a whole chapter to Edna Shaw, matron from 1937 to 1952, whom she describes as a nursing icon in the Florence Nightingale tradition.

Marginalised patients who ended up at Crown Street included 'social outcasts due . . . to their sexually transmitted diseases (STDs), septic (infected) abortions, and unwelcome pregnancies' (p.102). Possibly the most interesting side to the hospital was its catering to unmarried mothers (also called 'waiting patients') and adoption. Godden discusses this along the way, for instance in a short section entitled 'The Social Outcasts' on pp. 102-3, where we learn among other things that unmarried mothers were used in teaching (the hospital was a teaching hospital linked to the University of Sydney), and in the chapter on Shaw and her kindness to unmarried mothers. Godden then devotes a chapter to this, covering the period 1952-73. This chapter draws on a parliamentary inquiry and the narratives that emerged during the inquiry of 'cruel and misguided treatment'. Yet Godden also acknowledges that personal reflections, like other sources, could be fallible and selective, with memories being influenced by public narratives and responses to current concerns (not least compensation issues). She also cautions that these stories might not be representative. One account which stretches credulity was that of a three-day labour, which resulted from an unnamed professor allowing midwives 'to push my baby back up the birth canal' so they could go to the hospital ball (p. 272).

The chapter on measures taken at the hospital to address pre-eclampsia and eclampsia, which affected one in every 300–500 pregnant women in the 1940s, makes for fascinating reading. Antenatal care and a strict diet were the solution to this common and serious medical issue, and the hospital secured the services of the police to help persuade women with worsening pre-eclampsia to be admitted to hospital. The use of police, one doctor pointed out, presumably caused immense fear in migrant women who had lived under Nazi or Communist dictatorships. The harsh treatment extended to the antenatal ward: 'Our lockers were checked each night after visiting to make sure no food was being smuggled in'. The results of the campaign, overseen by medical superintendent Reginald Hamlin and matron Edna Shaw around 1950, were apparently 'so astounding that initially many refused to believe it'. Godden cites British obstetrics professor W.I.C. Morris who said that 'Crown Street Hospital had "shown the world the way" in the most important advance in obstetrics this century' (p. 159).

The chapter on thalidomide is of course of much wider interest than this hospital's history. Godden contextualises the tragedy in the light of the post-war innocence relating to drugs and their possible teratogenic effects. She tells how, with his exposure of thalidomide in 1961, McBride became Sydney's favourite obstetrician, winning honours which included the Order of Australia, as well as a prestigious French prize from the Institut de la Vie in 1971, with which he set up a research institute, Foundation 41. She explains how later, in 1993, he was struck off the medical register for medical fraud relating to experimental results about Debendox, but was conditionally reinstated five years later; she does not go into detail, but the section is intriguingly sub-titled 'Hubris or a Tall Poppy?'

Finally, mothers' voices permeate this fascinating social history. For instance one mother who recounted her experience arrived in 1948 following the closure of a private

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hospital she had booked into. She was shaved, enema-ed, and wheeled into the labour ward, a huge room with beds of screaming women, separated by curtains and with students checking them. After the birth she was wheeled into a corridor for a day or two until a bed in a ward became available. She only had contact with her baby at feeding times, she was in bed for nine days, home on the tenth, 'with infant dressed by staff in his best outfit'. This would not be the treatment of choice for modern mothers but this mother concluded, 'It was a magnificent hospital staffed by saints, truly' (pp. 115–66), a gentle reminder that we should not judge the past.

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**Elizabeth Hallam**, *Anatomy Museum: Death and the Body Displayed* (Chicago, IL, and London: University of Chicago Press, 2016), pp. 444, \$57.00, hardback, ISBN: 978-1-86189-375-8.

Anatomy Museum is a book about all things to do with anatomy museums from Renaissance anatomical teaching to that of today, and at the same time it is a book about one single, small museum of anatomy in Aberdeen, the Anatomy Museum at Marischal College. Anatomy Museum thus unfolds a history of the display of the dead body in the broadest sense out of a close study of a particular museum.

Its landscape crosses several academic fields: the history of medicine, museology, anthropology, didactics and materiality studies. It provides a history of anatomical collections and British museums in the nineteenth and twentieth centuries, covering colonial collection, social networks, and differentiation of disciplines. It contributes to anthropological insights on current practices of dissection and relations between persons and cadavers. And lastly it is a material history of anatomy teaching and changes in seeing, handling and conceptualising the body through different media.

Anatomy Museum is thus not a one-thesis-book. The teeming story is bursting at the seams with relics, cabinets, colonial collection, taxidermy, modern medical students, cadaver supply, plastic models and memorial services. The integrity of the story, however, is anchored by the Marischal College and through thematic threads that run through the whole book: the connections between the living and the dead, between objects and bodies, and between scientific and social networks.

The book is thematically organised with a loose underlying chronology following the prehistory, formation and development of the Marischal Museum.

The first chapter concerns contemporary uses of the dead in anatomical teaching in Aberdeen and thus deviates from the chronology, but it sets the scene and introduces the main themes. Hallam explores the relation between the living and dead in the fundamental tension between trying to understand the living body by investigating the dead one. Teachers establish connections between students' bodies and cadavers using mirrors, models, face paints, diagrams and texts. Another theme is the tension between the long history of anatomical investigation and the supposed a-historicity of anatomical knowledge. A fine observation is that bones or models with traces of use are thought distracting. Hallam cleverly parallels the removal of historical traces with the removal of the personhood of the cadaver. In this way the museum-objects and dissected body are 'de-historicized and de-personalized' in parallel. *Anatomy Museum* puts both the history and the people back.