

economically vibrant regions, like the Indian Ocean. Magellan, Fernández-Armesto underlines, sailed during the Little Ice Age, when vicious cold snaps were accompanied by outbreaks of the plague that more than decimated European populations. Even as Iberians were making tentative voyages in rickety ships, their petty kingdoms were dwarfed by rapidly expanding land empires from Mesoamerica to Russia. From this perspective, why the Ottoman conquest of mighty Egypt is less well known than Magellan's voyage is puzzling.

Fernández-Armesto leads the reader through the motivations and miscalculations of this dissatisfied minor noble brought up on chivalric romances and millenarian fantasies. As the inglorious and ultimately tragic tale unfolds, every page features a shining nugget or two to surprise and delight even the most informed reader. At one point, we find the historian of the voyage, Antonio Pigafetta, attempting to make indigenous language word lists to satisfy his humanist tendencies. At another, we find Magellan attempting to bring local chiefs under the control of the rajah of Cebu (baptized as Don Carlos in honor of Charles V), although Cebu would prove unequal to the role of local hegemon. Short excursuses then provide background for particular events, such as the frequent impact of the "stranger effect," which led exotic new arrivals to be revered by host cultures (142, 195, 226).

As with all ambitious works of history, hairsplitting readers will find something to complain about. For instance, one does get a clear understanding of the ongoing debates about the role played by Sufi missionaries in Southeast Asia (21). Nevertheless, such issues can be cleared up in all instances by referring to the literature quoted in the voluminous footnotes—replete with word-perfect quotations in German, Latin, Spanish, and Portuguese—that the publisher has generously accommodated. Few other historians could have written this book. The master has not lost his touch.

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## MEDICINE, RACE, AND DISEASE

*Medicalizing Blackness: Making Racial Difference in the Atlantic World, 1780–1840.* By Rana A. Hogarth. Chapel Hill: University of North Carolina Press, 2017. Pp. 290. \$27.95 paper.  
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In delving into late eighteenth- to mid nineteenth-century medical literature, Rana Hogarth was prescient, writing a book whose implications about medical authority, treatment of infectious disease, and race have direct bearing on some of the most tragic and dramatic events of the past few years. She examines evidence from the Greater Caribbean, broadly

construed, opening up many sources dealing with people, places, and events in Jamaica and the Carolinas and British-trained medical and scientific practitioners.

Hogarth's elucidation of the racial foundations of medical knowledge is an excellent complement to the work of Pablo Gómez, Andrew Curran, James Sweet, and others. She carefully and compellingly argues that "physicians' objectification of Black people's bodies in slave societies became an essential component to the development of the medical profession in the Americas" (2). A profession attuned to "visually distinct physical and physiological traits," medicine in the fledgling United States rewarded practitioners who promulgated observations and interpretations that made racial inequalities seem objective: "More than simply validating the existence of racial differences, they spoke about them with great authority, transforming the knowledge of managing black health into a medical specialty of sorts" (xiii). Claims of such knowledge by specialists naturalized racial difference in the face of contrary facts about disease mortality and morbidity. Hogarth calls attention to how this bias is insidiously entrenched, informing some practices and attitudes today.

Before the COVID-19 pandemic, there was the periodic scourge of yellow fever, the topic for the two chapters in Part I. Race was an inflection point—either Black people were exceptionally tough (in contrast to those with fragile white constitutions; Chapter 1), or they became susceptible—and thus characterized as weak—due to white mismanagement of what physicians and military evaluators argued were innately different needs in diet, ability to endure suffering, and suitability for specific kinds of labor and climate (Chapter 2). These contradictory interpretations shared the concept that "black and white peoples' bodies lacked physiological parity." (23)

Yellow fever can infect anyone, but a scheme of biologically distinct races invites ideas of uniquely Black pathologies, the focus of Part II (Chapters 3 and 4). Hogarth explores an example that has long been a particular interest of mine: geophagy, the consumption of soils, usually particular kinds of clays. Geophagy is fairly common in different world regions and within a variety of social groups. Some equate soil with filth or uncleanness, a view that does not recognize the specific substances, the manner of their consumption, and their measurable health effects, for bad or good. Anthropological studies show that rather than an attempt to satisfy nutritional deficiencies, general hunger pangs, or irrational compulsions, eating the clays people most often favor creates a coating in the gut that protects against infections and disease—a practice especially beneficial to pregnant women and young children. In the nineteenth century, influential white medical practitioners vilified geophagy as a severe illness, *Cachexia Africana*, one they claimed afflicted only Black people and occurred across the Greater Caribbean. Hogarth shows that the negative fiction of *Cachexia Africana* was a convenient way for white physicians to stifle competition from Obeah practitioners, codify claims about Black mental and corporeal insufficiencies, disparage Black women in particular, demonstrate the superiority of white medical expertise, and emphasize the importance of white supervision of Black bodies.

The last section of the book, Part III, turns to the places of treatment, showing how they facilitated white supervision, correction, and discipline, as well as race-based spatial segregation. These facilities, a public one in Kingston (Chapter 5) and a private one in South Carolina (Chapter 6), provided a steady supply of Black bodies for career-building clinical experience and lucrative economic gain. In contrast to the example Hogarth provides from Jamaica, slave hospitals in the US South gradually transitioned from business enterprises to medical training grounds. Hogarth points out that “the pervasive beliefs about Black peoples’ distinctive physiology did not deter their use as clinical specimens,” particularly for dissection (181).

The white supervision and control of Black bodies in these facilities often blurred the line between prison and hospital. Rana Hogarth’s pivotal study is heartbreaking, horrifying, and revelatory; I keep returning to it as I ponder questions of race in other contexts.

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## COSTA RICA’S TRANSITION FROM COLONY TO REPUBLIC

*Costa Rica (1821–2021). De la independencia a su bicentenario.* Edited by Iván Molina Jiménez. Editoriales Universitarias Públicas Costarricenses, 2021. Pp. 382. \$15.00 paper.  
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In his latest edited volume, Iván Molina, along with his nine collaborators, has provided ten perspectives on Costa Rica’s transition from colony to republic. Most of the articles in this collection center their analysis on the period between the 1780s and the 1840s. Molina’s prologue outlines his desire to counter renditions of the late colonial and early national period that have suggested an egalitarian agrarian past. He accomplishes this goal: the volume’s authors consider from different vantage points how socioeconomic divisions, racial hierarchies, rural-urban frictions, gendered inequities, and regional tensions shaped the state-building project in the first half of the nineteenth century.

Several articles will be of considerable interest to Costa Ricanists. Scholars interested in poverty and racial inequities will find much to consider in Chapters 2 and 3, written by Andrea Montero Mora and Elizet Payne Iglesias. Together these authors provide a thoughtful analysis of how changing demographics, Independence, and the inauguration of coffee reshaped broader class relations in Costa Rica and indigenous communities and rights. Political historians will want to consider Carlos Humberto Cascante Segura’s fascinating analysis of how elites in the first half of the nineteenth century developed a foreign policy strategy focused on preserving or expanding the national territory.