

made to represent. The perspective is almost exclusively on the US, but the contributions provide inspiration and insight also for those grappling with the paradoxes of organ transplants in other settings.

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Petteri Pietikainen, *Neurosis and modernity: the age of nervousness in Sweden*, History of Science and Medicine Library, vol. 2, Leiden and Boston, Brill, 2007, pp. xiii, 391, €99.00, \$129.00 (hardback 978-90-04-16075-0).

This book presents us with a study of the changing concepts of nervous illness (neurosis) in Sweden in the “Nervous Century”, that is 1880–1980, and, equally important, of the social and cultural reception and diffusion of what the author refers to as a “contagious diagnosis”.

The 1880s witnessed an intensified attention towards nervousness. George Beard launched his diagnosis of “neurasthenia”, Charcot started his lectures/demonstrations of hysteria and, more locally, a neurological clinic was opened in Stockholm. For Pietikainen this attention heralded the Nervous Century, which lasted until the American Psychiatric Association in 1980 eliminated “neurosis” from the diagnostic list of the influential DSM-III (Pietikainen’s study only goes up to 1950, thereby leaving out the last three decades of the Nervous Century). In this century, Pietikainen argues, Sweden saw a veritable epidemic of nervous diseases, due to an affinity between “nervousness” and “modernity”, and to the very contagious nature of the concept of neurosis. During this epidemic, the category of nervous illness went through a profound conceptual transformation that is variously, and at times confusingly, presented in the book as a “paradigm change”, a change of “cultures”, a shift between two “languages” and as a transition between two “ages” or “eras”.

When nervous diseases occurred as a mass phenomenon in the 1880s they were linked with the physical reality of the *nerves*, and described in a language where *energy* was a central metaphor. Nervousness was understood as “overtaxing of the nervous system or the constitutional weakness of nerves” (p. 10). This physicalist (or naturalist) paradigm for thinking around and talking about nervous disease reigned from the fin-de-siècle until the 1930s. But from the early twentieth century this paradigm was challenged by a discourse of the psyche, most emblematically represented by psychoanalysis. By the end of the Second World War, as the “era of psychoculture” began, the physicalist language was fully replaced by the psychodynamic frame of reference in which neuroses were understood as the result of psychic conflicts and traumas. This shift also implied a change in the inter-professional relationship between neurologists and psychiatrists as neurosis moved from the domain of the former to that of the latter. Nervousness was now predominately located in the mind of the patient, and the mind was embedded in the social body, rather than in the brain. Hence mental problems to a large degree came to be perceived as problems in the social environment of the patient or in the larger social body. This new conceptualization of many mental problems fitted well with the ideological horizon of social democracy, based on reformism and interventionism, and hence came to have bearings also on the politics of health promotion.

Pietikainen draws on a broad spectrum of historical sources, including psychological, psychiatric and medical journals, minutes of the meetings of medical associations, case records both from private practice and a neurological clinic, medical manuals, textbooks, popular books on neuroses and nerve illnesses, and more. One of the merits of the book is this diversity of sources, and especially the use of clinical records, which are rarely used in this kind of broad historical narrative.

The book presents itself as a history of nervous illness *in Sweden*, taking as its

departure point that “the Swedish experience of neurosis differed from that of most western nations” (p. 9), and therefore, since this experience is different, also the “history of neurosis in Sweden” is different from that of “other Western countries”. These initial statements are hardly substantiated in the book, and this reader was therefore left unsatisfied with the comparative aspects of the book. It may be unfair to demand an even broader analysis, but the introduction invites a reading that is bound to disappoint. An investigation of the possible specificities of Swedish neurosis, which would also have to confront the mobility of medical discourses, would probably demand a more systematic comparative approach. This book might, however, be a fruitful starting point for an analysis of national variations in the interpretation of neurosis.

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Chad Ross, *Naked Germany: health, race and the nation*, Oxford and New York, Berg, 2005, pp. xi, 239, illus., £50, \$95 (hardback 978-1-85973-861-3), £16.99, \$28.95 (paperback 978-1-85973-866-5).

Given the strong scholarly interest in the history of the body it is not surprising that the history of German nudism or *Freikörperkultur* has been the subject of several books. Most recently the German-language monographs by Maren Möhring and Heiko Stoff (both published in 2004) have explored different aspects of the phenomenon in innovative ways. *Naked Germany* is the first book-length study on the subject in English. Covering the period from 1890 to 1950, the author for the most part prefers a thematic approach in his presentation. After a short historical survey, he looks at the relationship between nudism, the churches, the state, and the Nazis in a single chapter. This is followed by chapters that focus on the relationship between nudism and medicine, and on nudist discourses on health,

beauty, women, sex and race. Such a thematic approach has advantages. It can emphasize historical continuities that might otherwise have been overlooked. But there is the danger that such an approach obscures shifting emphases and developments in German body culture over time.

Ross has not been entirely successful in avoiding this danger. The period from 1900 to 1945 was not only characterized by radically different political regimes, it also witnessed fundamental cultural and social changes. Some of them—such as changes in gender relations—have significant implications for the author’s study but he does not explore them in a systematic fashion. While Ross concedes that the symbolic meanings of the body were subject to constant change because “it has been the site of restless struggle between individuals and various political, religious, and scientific authorities” (p. 6), he also claims that there was a clearly identifiable ideological core to the nudist movement that remained mostly unchanged for the first half of the twentieth century. In his view, nudists aimed at the transformation of the German nation “into a harmonious, strong, racially pure *Volk* by first transforming Germans into healthy and beautiful bearers of the racial seed” (p. 1). This characterization might be true for some nudists but others had rather different political agendas. During the Weimar years, communists like Friedrich Wolf and Social Democrats like Adolf Koch advocated nudism because they thought it fortified workers for the class struggle or helped them overcome the debilitating effects of their social situation. In any case, given his emphasis on the racial goals of nudism, Ross’s claim that nudism itself was apolitical (p. 58) seems strange.

There are a few problems from the medical history view-point. Since the author neglects the specific historical context of the Weimar period, he conflates the issues of eugenics or racial hygiene with Nordic racism advocating racial purification. Not all advocates of eugenics subscribed to Nordic racism even though quite a few leading Weimar eugenicists