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**Diego Armus**, *The Ailing City: Health, Tuberculosis, and Culture in Buenos Aires, 1870–1950* (Durham: Duke University Press, 2012), pp. 432, \$27.95, paperback, \$99.95, hardback, ISBN: 9780822350125.

For the past several years, those who sought to understand the history of tuberculosis in Buenos Aires turned to one comprehensive source: Diego Armus's *La Ciudad Impura* (Durham: Duke University Press). Based on his dissertation and published in 2007, this book provided scholars of Latin American history and the history of public health with a wealth of detail into the many ways in which the inhabitants of one of the region's great cities suffered, both physically and metaphorically, from the disease. It is therefore quite fortunate that, after much anticipation, a revised and translated version of the work has finally brought it before an even larger audience.

The book has a simple and tightly delineated goal: to describe the effects of tuberculosis on the culture and society of Buenos Aires from the end of the nineteenth century through the first half of the twentieth. Tuberculosis was very common in many cities during these decades. The book, however, does not aspire to broader claims regarding the disease or, for that matter, Argentina. Rather it examines in great detail how tuberculosis affected the inhabitants of a single city at a time when the disease was well understood by bacteriology and recognised as common, but before medical knowledge provided a cure or any effective treatments.

The first part of the book focuses on the lived experiences of tubercular Bonaerenses. It describes the fear the disease could instill in people living in the city, and the ways in which the sick struggled to find relief in settings from the home to hospitals and sanatoria. These latter institutions provided a place for medical and state authorities to regulate behaviours and transform the sick into modern hygienic moral citizens, but they also were spaces that allowed patients to organise and advocate for their rights. These chapters also reveal how medical knowledge of disease transmission, bacteriology and the eventual development of effective treatments only slowly and unevenly became part of the general public's understanding of the disease.

The rest of the book turns to the diverse efforts that were justified by tuberculosis to reconstruct the culture of Buenos Aires. Many interests groups, sanitarians and government officials attempted to define a culture of hygiene in which behaviours they considered deviant were controlled. Immigration officers sought to deny entry to immigrants who arrived from what were viewed as regions, cultures or races more susceptible to the disease. Babies born of tubercular mothers were taken to be raised by 'healthy' families. Schools took children outside for physical education exercises aimed at creating healthier bodies. Adults too gained spaces to work on their bodies as the city grew and spaces created for leisure and rest were incorporated into the plans. Doctors fought fashion to encourage women to not wear tight corsets that altered breathing and changed lung function. Even those involved in temperance movements used the supposed increased susceptibility to tuberculosis caused by drunkenness as a reason for limiting drinking in the city. Although none of these efforts notably affected the incidence of tuberculosis, collectively they demonstrate how pervasively the concern for the disease shaped, and was mobilised to shape, the lives of the people of Buenos Aires.

The foregoing suggests what is perhaps the book's greatest strength: its wide-ranging scope and rich detail. Although Armus ultimately concluded that, in light of the available sources, his original aspiration to write a total history of tuberculosis in Buenos Aires was impossible to achieve, the detailed portrayal he succeeded in providing of the shadow the disease cast on so many aspects of life in the city is truly impressive. Many readers will be struck, however, by the lack of contextualisation of Buenos Aires through comparison to how tuberculosis was experienced in other parts of the world as described in the extensive historiography of the disease. Armus is unapologetic on this point. After all, he notes, historians of tuberculosis in the cities of the global north paid little attention to works on the disease in the periphery. One can easily understand this position and yet regret his decision to repay these earlier authors' parochialism in kind. Our understanding of the ways in which the tuberculosis in Buenos Aires of this period was a phenomenon necessarily bound to its geographical and historical context would be far richer for knowing more about how it was distinctive and how it was similar elsewhere. The work would have been stronger, too, had the author included a more explicit argument: one example left unstated regards the relative importance of controlling tuberculosis in relation to broader efforts to remake the population of Buenos Aires into responsible, moral citizens deemed appropriate to a growing, modern city of international stature. These omissions notwithstanding, *The Ailing City* serves as an exemplary work in the social and cultural history of disease, and it will justifiably become a prized resource on its topic.

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**Nancy Leys Stepan**, *Eradication, Ridding the World of Disease Forever* (Reaktion Books Ltd, 2011), £25, hardback, ISBN: 9781861898616.

The concept of disease eradication, the reduction of cases from a single disease to 'zero', has a long history stretching back to the early part of the twentieth century. It is also a concept that has persisted despite the fact that the strategy has only been successful twice, and only once in eliminating a human disease – smallpox. Today, thanks to the Gates Foundation's commitment to malaria eradication and continued efforts to eradicate polio and guinea worm, eradication remains a viable strategy for many global health leaders. For others, it is a costly and ultimately doomed quest for a public health chimera.

Nancy Stepan's engaging new book attempts to trace the application of this concept from early attacks on yellow fever and hookworm at the beginning of the twentieth century to the current campaigns against polio and guinea worm. She charts the successes and failures of these eradication efforts and by doing so informs current debates about the usefulness of this strategy for improving the health of the world's populations. The histories of the various eradication efforts she details have been examined by others and will be familiar to specialists in the history of international or global health. However, Stepan makes an important contribution by linking these eradication efforts together in a single historical narrative, highlighting the connections among them. In addition, she provides original case studies of eradication efforts in various parts of Latin America.