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developed their genocidal methods, inventing and refining the techniques of transportation, selection and gassing, and the schemes of subterfuge used to hide these atrocities from relatives and potential pockets of opposition.

To demonstrate the “intimate connections” between these two programmes, Friedlander chronicles the various stages in the Nazi campaigns against their most helpless victims, children and the mentally ill, whose tragic stories he sensitively narrates. He also spends considerable time on the identities, backgrounds and motivations of the perpetrators, often pointing out generational, social and psychological similarities. His attempt to deal with both sets of atrocities in the same framework is admirable, as is the attention Friedlander gives to relatively neglected groups, such as “Gypsies” and, in particular, “handicapped” Jews. He impressively incorporates a wealth of primary research into a tight and cogently argued study.

However, Friedlander’s central thesis imposes limitations on the material and at times seems overstated. Unlike Michael Burleigh, whose outstanding book on German “euthanasia” appeared one year earlier, Friedlander shows little interest in the economic roots of Nazi medical policy or in the pre-history of euthanasia in the Weimar era psychiatric reform movement. Determined to point out the connections between euthanasia and genocide, he offers too narrow an account of the origins of the “final solution”. That the path to Auschwitz was “twisted” and was reached by trial and error—as Karl Schleunes so convincingly demonstrated—seems to contradict Friedlander’s claims, which ignore such causative considerations as the impact of the war on Nazi racial policy or the strength of anti-Semitic sentiment in the German population.

Finally, the book is plagued by an even more significant problem. Friedlander argues against the notion of “medicalized killing”, repeatedly insisting that the murderous campaigns had little to do with medicine, and that doctors’ constant presence at gassings was merely incidental. That the physicians who staffed the

killing centres had medical degrees is, he asserts, “quite beside the point” (p. 219). Moreover, he sets out to show that Nazi eugenics “lacked a true scientific basis” and represented “scientific fraud” (p. 126). With statements like these, Friedlander seems to miss one of the essential points of this story. Indeed, as shown by Robert Proctor in 1989 and by many others subsequently, Nazi programmes against racial minorities and the disabled represented not a vulgar politicization of science, but rather the realization of ideas furthered by many of the leading scientists of the period.

Friedlander himself asks near the end of the book why doctors were always present at these killings, but he finds no satisfactory answer, other than claiming that this was Hitler’s wish and their presence facilitated bureaucratic aspects of the procedure. But the fact that it was doctors who ordered and carried out the murder of tens of thousands of disabled Germans seems to be far more than incidental and should be the starting point for a critical engagement with this period and its legacy.

Ultimately, as an argument about technical aspects of Nazi atrocities, Friedlander’s book is well-researched, cogent and informative. Yet, in his complete dismissal of the idea of “medicalized killing”, he ignores the biologization that characterized German society and politics in this period and thus fails to address the issues that historians of science and medicine, and many students of German history, will find most interesting and urgent.

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Eric L Santner, *My own private Germany: Daniel Paul Schreber’s secret history of modernity*, Princeton University Press, 1996, pp. xiv, 200, illus., £16.95, \$22.95 (0-691-02628-9).

The deluge of Schreber scholarship shows no signs of abating. After being psychiatrized, psychoanalysed, historicized, Lacanized and antipsychiatrized, Daniel Paul Schreber’s role

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as one of the longest running serial paradigm cases in history continues.

From Eric Santner's *My own Germany*, he re-emerges as emblematic of the crisis that marked the passage to modernity, and that led to National Socialism. In Santner's words, "The series of crises precipitating Schreber's breakdown . . . were largely the same crises of modernity for which the Nazis would elaborate their own series of radical and ostensibly 'final' solution. I am, in a word, convinced that Schreber's breakdown and efforts at self-healing introduced him into the deepest structural layers of the historical impasses and conflicts that would provisionally culminate in the Nazi catastrophe" (p. xi). No small claim. Schreber's symptoms are re-diagnosed as signs of a wider socio-historical crisis in the individual's relation to authority, which Santner dubs symbolic investiture. Schreber's *Memoirs* are re-figured as an attempt to answer the question, "What remains of virility at the end of the nineteenth and beginning of the twentieth century?" (p. 9). Not only does Santner invoke this to provide a new interpretation of Schreber's breakdown, but also of the historical transition to modernity: "The social and political stability of a society as well as the psychological 'health' of its members would appear to be correlated to the efficacy of these symbolic operations—to what we might call their *performative magic*—whereby individuals 'become who they are,' . . . We cross the threshold of modernity when the attenuation of these performatively effectuated social bonds becomes chronic, when they are no longer capable of seizing the subject in his or her self-understanding . . . It is, I think, only by way of understanding the nature of this unexpected, historical form of anxiety that one has a chance of understanding the libidinal economy of Nazism, and perhaps of modern and postmodern forms of totalitarian rule more generally" (p. xii). From his humble beginnings as a case history, Schreber has become the avatar of modernity, and postmodernity.

The major shortcoming of Santner's book is that the supposedly pervasive crisis of symbolic investiture that is invoked to explain

Schreber's breakdown is nowhere adequately mapped or substantiated. The exemplarity accorded to texts by Franz Kafka, Walter Benjamin and others stands in for the more detailed historical reconstruction that would be required to make sense of such claims. Indeed, Santner's arguments are unlikely to carry any conviction unless one shares his commitment to a post-structural version of psychoanalysis—a Freud retooled by Lacan, Žižek *et al.* As is typical of such literature, theoretical reworkings do not extend to Freudian articles of faith: Freud, it is again said, "founded psychoanalysis to a large extent on the basis of his own self-analysis" (p. 19). Ultimately, it is such precommitments that preclude a historical comprehension of Freud's reading of Schreber, the development of psychoanalysis, and its role in forming the modern.

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Hans-Georg Gadamer, *The enigma of health: the art of healing in a scientific age*, transl. James Gaiger and Nicholas Walker, Oxford, Polity Press, 1996, pp. x, 180, £39.50 (hardback 0-7456-1367-5); £11.95 (paperback 0-7456-1594-5).

Are the thoughts of famous and influential academics important because they emanate from the famous and influential? Or does one become a famous and influential academic by having important thoughts? As the famous and influential philosopher, Hans-Georg Gadamer, Emeritus Professor of Philosophy at the University of Heidelberg, would no doubt appreciate, the pair of questions that opens this review reprises a famous question that Socrates once put to Euthyphro. In his influential work *Wahrheit und Methode* (1960, translated as *Truth and method*, 1975) Gadamer argued that the positivistic methodologies of empirical social science can never fully comprehend human culture because the long historical horizon along which culture is transmitted exceeds the grasp of methodologies rooted in the present. Thus we today are still influenced