

that killed 24 whites in Iowa after 1873) acted out a harsh, communalistic vision of criminal justice when they sought both blacks and whites, even if the motivations differed. Madison recounts several lynchings of blacks in Indiana, but we learn nothing about the substantial number of whites who were lynched in the Hoosier State. Second, Madison is too harsh on James Cameron and his latter-day celebrity. Madison seems to think that Cameron has distorted the details of the lynching (the only documented discrepancy here is that Cameron places the by then defunct Ku Klux Klan at the scene of the lynching) and has benefited from his status as a near victim of lynching. One should hardly begrudge Cameron the fact that he avoided a fate that thousands of African Americans did not.

Quacks & Crusaders: The Fabulous Careers of John Brinkley, Norman Baker, and Harry Hoxsey, by Eric S. Juhnke. Lawrence: University Press of Kansas, 2002. xvi, 215 pp. Illustrations, notes, index. \$29.95 cloth.

The Bizarre Careers of John R. Brinkley, by R. Alton Lee. Lexington: University Press of Kentucky, 2002. xvii, 283 pp. Illustrations, notes, index. \$29.95 cloth.

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We live in an age when even orthodoxy can seem alternative. Over the past half-century, for instance, chiropractors and osteopaths have found new respect through Medicare reimbursement. Many other regimens, such as acupuncture and massage therapy, teeter on the cusp of acceptance. Even xenograft transplantation—the therapeutic use of animal cells, tissues, and organs—once a horrifying apparition of the “mad doctor,” has found limited acceptance in clinical and surgical practice.

Yet the multiple yardsticks we now use in managing and assessing medical care, as well as in interpreting historical evidence, today make us cautious of complaint and judgment—even in the case of outright chicanery. Two fresh books on the subject of quackery, which so often has been identified as a peculiarly midwestern institution, test our presumptions on such matters in new and useful ways: Eric Juhnke’s synthetic *Quacks & Crusaders: The Fabulous Careers of John Brinkley, Norman Baker, and Harry Hoxsey* and R. Alton Lee’s biographical *The Bizarre Careers of John R. Brinkley*. The central questions of both of these books deal with the essential tension between individual free-

dom and monopoly power found in twentieth-century medicine. What is the status of the alternative in health and disease? Who has privilege over medical matters? What constitutes conformity? What is the purpose of professionalization—to increase standards of practice, or to undermine the Other?

Juhnke's book covers three of the most popular quacks of the first half of the twentieth century: John Brinkley, Norman Baker, and Harry Hoxsey. Lee's book covers only Brinkley, but in correspondingly greater depth. Brinkley was famous as the "Goat-Gland Doctor." He touted his unusual xenograph procedure as a source of virility for older men and women. He also campaigned repeatedly for political office over the airwaves of radio stations he operated: KFKB radio in Milford, Kansas, and XER in Mexico. Baker also owned a radio station, KTNT, which advertised the dubious cancer cure available from the Baker Institute in Muscatine, Iowa. Harry Hoxsey, who hailed from Illinois, extolled the virtues of his own cancer cure from the compound of his deceptively named National Cancer Research Institute and Clinic. All three men moved to Texas by the late 1930s, each looking for greener pastures.

Juhnke's and Lee's balanced assessments provide a fresh view of old historiographical terrain. Their new view is largely achieved by building context and by scrutinizing the American Medical Association's claims and authority. The effect is, on the whole, to rehabilitate partially—and only partially—these colorful quacks. Juhnke, for instance, sees the life stories of his characters as evidence of "their genius, if not as healers" then as "businessmen and propagandists" (xiv). Lee, in turn, asserts that Brinkley was "pure con artist" (xvi), but inexorably erects a series of well-reasoned defenses of some aspects of this tragicomic figure: Nowhere, of course, do they excuse the huge egos, exquisite moral failings, or behavioral disorders of these men.

With meticulous research, Lee in particular creates an almost empathetic account. Brinkley failed early and often to adhere to a high standard of conduct. But, Lee asserts, he did not suffer from shiftlessness, nor was he particularly uneducated. In the three years he studied full-time at Bennett Medical College in Chicago, Brinkley moonlighted seven hours each night as a telegrapher and managed the affairs of his nuclear family. The results were predictable: estrangement from his wife, difficult alimony payments, and a fainting episode in class.

Brinkley's credentials as a licensed physician hinged mainly on his ability to pay tuition, which condemned him to a paper chase for degrees awarded by diploma mills. Yet, as Lee attests, Brinkley at the time "possessed as good a medical education as many of his contem-

poraries" (22) and probably would have escaped the attention of the medical police had he avoided dubious treatments and instead founded a more orthodox practice focused on prostate problems. Few, even among his critics, denied Brinkley's enormous surgical talent. Indeed, as the decades passed, it could be said that aspects of his work got more "normal," as in his use of a now well-established procedure for bladder surgery. Brinkley could be churlish, yes, but also exceedingly generous to the poor. He supplied a costly and direly needed iron lung to the citizens of Del Rio, Texas, purchased shoes and coats for children in need at Christmas, and treated thousands to free fireworks shows on the Fourth of July.

More significantly, both authors explain why quack medical treatments might have the unintentional consequence of actually working: the bodies of the elderly are often refreshed and renewed by "a good cleaning out"; some diseases are the product of hypochondriasis; the power of expert suggestion alone heals ills, as does faith in a higher power or material placebo; an incorrect surgery may correct an otherwise undiagnosed or hidden disease. The authors also make the point that Brinkley's cures were an option when regular medicine had failed or cost too much. Brinkley and the others appealed to those without resources or hope in a quite commonsensical way.

These attempts to find a new balance in the character descriptions and regimens of quacks stand in contrast to the erosion of respect accorded the American Medical Association (AMA). Lee's and Juhnke's depictions of AMA activists, and especially Morris Fishbein, are mostly approximations, serving as fodder for the quacks' wrath. From Lee we learn of a possible link between an attorney retained by the AMA and shamefully unfulfilled bribes to one of Brinkley's old partners-in-crime in exchange for testimony: "At least among thieves there was a code of honor," Lee comments (135). From Juhnke we learn about orthodoxy's "haughty M.D.'s" and high talk. Both authors agree that the AMA elite brought their troubles, at least in part, down upon themselves.

Juhnke and Lee also agree for the most part in their assessment of the connection between the outlook of homespun quackery and nostalgia for populism. Juhnke argues that Brinkley, Baker, and Hoxsey "presented a vision of medicine that championed common Americans, denounced elitism, and affirmed rustic values. . . . their fiery attacks against trusts, government interference, and urban encroachment fit within . . . a long tradition of 'populist persuasion' in American history" (xii). Lee admits that Brinkley was no Populist, "unless one accepts Richard Hofstadter's interpretation of them as Fascists," but argues that Brinkley's election results "suggest great mass discontent

similar to that during the days of Populism, and belies the importance of the impact of his radio addresses" (147-49).

I have one quibble regarding the authors' treatment of this new and crucial technology. It might be surmised from a reading of these books that the AMA disapproved of radio as a suitable medium for dispensing health advice. It did not. Rather, the AMA disapproved of the quacks' methods, particularly in diagnosing and prescribing over the airwaves. Both authors admit as much, but the point could have been handled with a bit more finesse, perhaps by building a counterpoint out of such popular radio health shows of the time as *Highways to Health*, *The Health Hunters*, or *Your Health*. This quibble, though, in no way overshadows the excellent start both authors have made in revising our understanding of quackery in Middle America.

Growing Up with the Town: Family and Community on the Great Plains, by Dorothy Hubbard Schwieder. Iowa City: University of Iowa Press, 2002. xvii, 198 pp. Illustrations, notes, index, \$29.95 cloth.

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American urban historians have devoted most of their attention to places like Chicago, Boston, and Los Angeles. In recent years, increasing attention has focused on smaller towns and communities. Dorothy Schwieder, a native of the small town of Presho, South Dakota, uses this memoir of growing up with the town during the first 18 years of her life as a vehicle for examining what that kind of life was like on the northern plains before mid-century. Presho, established in 1905 when the Chicago, Milwaukee, and St. Paul Railroad extended its line west of the Missouri River from Chamberlain to Rapid City, grew to a population of 635 by the 1910 census, before leveling off as the community engaged in a long-term struggle for survival as a service center for its surrounding agricultural hinterland (its population in 2000 was 588).

Schwieder, professor emerita of history at Iowa State University and author of a number of books on Iowa history, including *Iowa: The Middle Land*, skillfully applies her academic expertise in this engaging narrative to provide broader meaning and significance to the daily events and developments of her town and family. She draws on her own personal memories and those of her siblings (there were ten children in the family, Dorothy being the second-youngest), but she supplements those memories with research in newspapers, county histories, census manuscripts, and other historical sources. From her vantage point in Iowa, she remains close enough to her hometown to retain a

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