Harvard medical historian Allan Brandt has done us a considerable kindness in writing this book on venereal disease. He has written what is essentially a cultural, as well as a social, history of VD in America from the late 19th century to the present time. In chronicling professional and lay conceptions of and responses to VD in this time period, he has succeeded in giving us the key to understanding the development of a host of social institutions, practices and policies, social categories, stigmatized identities, political movements, individual medical, social, legal and political careers, military policies and programs and Biomedicine itself. Rather than catalog the contents of this interesting, informative and extremely well-researched work, I shall here only point out some of its many important substantive and theoretical contributions to the study of the progressive era and the history of American medicine (Biomedicine).

Brandt takes as his task the interpretation of shifting attitudes and perceptions concerning venereal disease among lay and professional people, including physicians, political and military figures, during the last 100 years. He assesses the impact of cultural beliefs and values, including scientism, religious moralism, racism, sexism, elitism and other forms of communalism, upon medical and public health policy and practice, military programs and social behavior.

The book's title derives from Dr. Ehrlich's discovery, at the turn of the century, of Salvarsan, a drug then thought to be a cure for syphilis. It was from this discovery that a professional and cultural thought model developed — one specific drug to cure a specific disease with rapidity; therapeutic elegance, "the magic bullet." The discovery of the potential bullet was to elude researchers for another fifty years. But when penicillin was found, it did not lead to the eradication of VD as would be expected if the health enterprise were acultural and scientific rather than cultural and therefore objectively irrational, infused with America's forms of communalism in general and the moralism of the social hygienists in particular.

Brandt's analysis charts the reciprocal influences and impact of cultural
beliefs and values on health care policy and clinical actions and the impact of conceptions of a scientific medicine on social values and behaviors. Recognizing history as more than a recounting of events, Brandt turns to interpretive social science to draw forth his methodology and his key insight; venereal diseases do not constitute natural, unified, empirical biological realities. Rather, they are symbolic entities whose meanings are socially constructed and vary from group to group over time. What is God's revenge to one is a medical challenge or a racial or class characteristic to another. Brandt recognizes his task as one of interpretation of words, acts, events and gestures, symbols all, related to VD.

From Brandt's perspective, the historian who conceives of VDs simply as diseases and sets as his or her task the description of a linear history of medical advances and seemingly rational responses to both the diseases and their treatments (and non-treatments) totally misses the point. One is unable to account for the variety of self-contradictory and conflicting social, political and military responses to the variously perceived sexually transmitted diseases. (STD is current term).

Brandt shows the error of writers like Sontag (1978), who believe that diseases such as tuberculosis and cancer should and can be perceived 'in nature' (rather than wrapped in metaphorical, cultural symbolic thought), the better to conquer them. Unswayed by such empiricism, the very same which afflicts and restricts Biomedicine itself, the author shows clearly that it is especially the frightening and the sexually related diseases (because of ambivalence) that are necessarily conceived in cultural terms, terms which encompass the biological perspectives of medicine and public health. Brandt recognizes that people are rarely solely pathologists or epidemiologists but are not infrequently, as both laypersons and professionals, ignorant, frightened and prejudiced.

Another valuable feature of this book is the author's forthright recognition of the enormous importance of sexual beliefs and practices in social processes. As is the case on the individual level, whether conscious or unconscious, sex is a profoundly vexing and troublesome topic in American society, and diseases transmitted by sexual acts receive the full force of conflictual beliefs and actions born of American ambivalence. Brandt makes us take account of sexual behavior and attempts to control it in the development of many aspects of our culture and society.

The work as a whole clearly demonstrates the very great importance that attempts to deal with VD have had for the development of a host of expired, but also many extant institutions, including those of the military, the government (the National Institutes of Health and other parts of the United States Public Health Service), municipal, county and state agencies, and for many social beliefs, medical customs and professional careers (e.g., those of Thomas Parran, Eliot Ness and General Pershing). It would appear that the very ambivalent feelings discerned in the course of the research also may have led other historians