offered the possibility of providing them with economic security—and the company was only one of several contestants they confronted.

Andrews has interesting analytical hunches about the significance of this story, particularly with regard to the motives of his characters, and he attempts to tie the local story to broader issues of social control, gender, and politics. Unfortunately, however, despite his zealous reporting of every detail of clue and character no matter how minor, he cannot corroborate these hunches with hard evidence. This is particularly true with regard to his labored efforts to make the conflict into one about Missouri’s antebellum Republican and Democratic politics, when, from the data he presents, it is certain only that the conflict was about the economic exigencies of the American middle class in the late nineteenth and early twentieth centuries. The story of that economic struggle and the litigiousness of the people who waged it among themselves in this small midwestern town is in itself worth telling.


Reviewer Philip L. Frana is NSF Software History Project Manager at the Charles Babbage Institute for the History of Information Processing. His dissertation was “Coordinating the Experts and the Masses: The Professions of Health and the Creation of American Community Health, 1915–1940” (Iowa State University, 1999).

Quinine and Quarantine is a brief popular history of Missouri medicine from aboriginal times to the Managed Care Reform Bill of 1997. The book, written in narrative style, traces the development of medical practice from “argument” to “action.” The author, Loren Humphrey, professor emeritus at the University of Missouri–Kansas City and former chair of surgery there, describes the use of showy milkweed, foxglove, and ginseng by the pioneers. He touches on several devastating cholera epidemics in the nineteenth century and the poor state of surgery during the Civil War. Humphrey also recites a number of accomplishments of Missouri medical men in the twentieth century, including the isolation of aureomycin, diagnostic tests for gallbladder disease, and the discovery of the mechanism for glycogen’s conversion into sugar by the body. The book ends abruptly with a comment that history is a tool for resolving current ethical dilemmas in medicine.

Quinine and Quarantine is part of the Missouri Heritage Readers series for “adult new readers” and incorporates substantial quantities of undocumented “informal literature.” By design, the book also in-
cludes long passages on Missouri history generally. These passages, however, are rarely made relevant to the history of Missouri medicine. The book is most intriguing where Humphrey describes his own adventures in Missouri medicine. Unfortunately, these passages are few and far between. For these reasons, *Quinine and Quarantine* is of limited value to historians or others interested in the history of midwestern medicine.