bodies of evidence necessary to derive them. Speculating credibly, for example, about “how... normative models of masculinity affect(ed) disabled veterans” (p. 24), or that *Ebony*'s readers may have viewed Bentley’s story as a “barometer of the changing conditions of African American political progress” (p. 146), requires more than pondering photos, cartoons, or other sources that offer no access to the thoughts or experiences of amputees or magazine subscribers. In such cases the reader is awkwardly left to toggle between suggestions of how historical subjects and their contemporaries understood medical choices, on the one hand, and how these choices may be understood generally as abstract cultural dynamics, on the other.

Still, the essays largely succeed in suggesting that postwar Americans utilized medical options for reengineering the body in ways that validated the dominant social order. This important insight is only the most ubiquitous of the many to take away from this valuable consideration of American culture.

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It is remarkable how much contemporary American culture has been shaped by the polio epidemic that gripped the United States from 1885 until 1955, whether through the artistic gifts of so-called “polios” with their unique perspectives on the various forms of denial and management that spurred our culture of wellness, or through the institutional and technical means adapted to handle large numbers of people in the face of what was understood to be a contagious disease. It is even more remarkable how quickly polio has been “forgotten” in the wake of the Salk vaccine. Marc Shell’s book addresses both sides of the polio coin.

Shell analyzes what he calls the vast field of “polio literature,” namely published and unpublished works of poetry and prose, fiction and nonfiction, children’s and adult literature that addresses polio either overtly or implicitly. Most of this literature remains uncollected and uncataloged, a symptom of the drive to forget and one that makes the process of remembering polio all the more difficult. Shell examines, too, a plethora of visual images, most notably dozens of films. Interpersed with his discussion of these cultural artifacts and technical developments is his personal account of contracting polio in Canada at the age of six. Shell moves easily between his own painful recollections and a dazzling array of texts, including *The Velveteen Rabbit* (1922), the paintings of Andrew Wyeth, and the film version of *The Wizard of Oz* (1939), to name just a few. As might be expected, ample space is awarded to Frank D. Roosevelt.

Of all the literary and visual texts that Shell examines, he devotes the most attention to Alfred Hitchcock’s already much analyzed film *Rear Window*, released just prior to the widespread introduction of the polio vaccine. Shell points to all the ways in which the film engages popular beliefs about polio in 1954. The film’s main character, L. B. Jeffries, called “Jeff” and played by Jimmy Stewart, is a former wartime journalist who has become a magazine photographer. When the film opens, we learn from a phone conversation between Jeff and his boss that Jeff has broken his leg photographing a car race. On Jeff’s cast, someone has penned the words “Here lie the broken bones of L. B. Jeffries.” Shell reads this as a pun. That Jeff has broken bones is a “lie,” a lie meant to cover up the fact that Jeff is suffering from something else. Jeff’s cast was a common enough sight on polios, who often needed casts to keep their bones, muscles, and tendons straight. The other aspects of Jeff’s treatment were also standard for polios. He receives daily massages from an insurance company nurse who diligently checks his temperature. As Shell notes, “Broken bones... rarely make for high fever of the sort Jeff suffers after his accident... Polio does, of course” (p. 161). Most importantly, the pivotal plot point of the film, Jeff’s lack of sexual interest in his girlfriend Lisa, played by the stunning Grace Kelly, is polio related. As Shell notes, “One of the common myths about polios is that poliomyelitic paralysis leaves them without sexual capacity” (p. 162). Awake throughout much of the night and clearly concerned that Lisa wants more than he can give her, Jeff becomes interested in investigating the disappearance of another bedridden person who lives across the courtyard from him. The film thus asks the question “What am I supposed to do with a disabled person who makes me uncomfortable?” (p. 149). The answer is twofold: murder her, in the case of the neighbor, or cure him, as Lisa aims to do for Jeff by entering the apartment across the courtyard and thereby forcing her voyeur boyfriend to become interested in her. And yet, insofar as the film never directly addresses the polio epidemic, *Rear Window* was very much in keeping with the rest of mainstream American culture. Polio was a disease that nonpolios were highly anxious about, even as they tried to hide it from view. Or as Shell puts it, *Rear Window* “is about polio, which was a concern central to its time, but it appears not to be about polio, an avoidance that was also central to its time” (p. 12).

This book will be useful to anyone interested in the history and psychology of epidemics, in childhood in the first half of the twentieth century, and/or in disability studies.

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This is a provocative, historically informed inquiry into the effects of prenatal testing on pregnancy and public attitudes toward disability. Joan Rothschild argues that,