

recognition of sovereignty that characterized much of the first decades of contact” (p. 108). Any sense of what this “mutual recognition” entailed is absent from the book, making it difficult to assess whether Morgan is describing a truly “European” process of racialization or a specifically English one. A deeper engagement with this literature might also trouble the central contention of *Black Marxism*—Morgan’s theoretical pillar—that European racism *gave rise to capitalism*, and not the other way around (p. 16). Still, these are critiques around the margins. I would recommend spending a long time sitting with *Reckoning with Slavery*, and coming back to it again and again.

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Masters of Health: Racial Science and Slavery in U.S. Medical Schools. *By Christopher Willoughby.* Chapel Hill: University of North Carolina Press, 2022. 282 pp., 9 halftones, notes, bibl., index. Hardcover, \$99.00. ISBN: 978-1-4696-7184-0.

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Reviewed by Brice Bowrey

During the summer of 1796, one of the Founding Fathers and a signatory of the U.S. Declaration of Independence, Benjamin Rush, was busy conducting experiments. He was not writing about the workings of the federal government or experimenting with the structure of the fledgling nation. Instead, he was studying Henry Moss, a Black man who had developed spots of white skin over his body. In his capacity as a physician, Rush, like many other members of the Medical Department of the University of Pennsylvania, sought to use medical science to describe and explain race and racial differences. Rush and his contemporaries argued that environment, culture, and social factors could alter one’s race. However, as the medical profession solidified and expanded during the early nineteenth century, Rush’s views were replaced with a racial science that reified racial hierarchies, promoted imperialism, and ensconced teachings about racial difference into the canon of the medical curriculum (p. 19). Christopher Willoughby’s *Masters of Health*

catalogs the shift among medical practitioners from viewing race as superficial and malleable, to seeing race as embodied and permanent. In the process, he argues that notions of racial difference, and the systems of slavery and imperialism that made racial science research possible, became deeply intertwined with the development of early medical education in the United States.

Using lecture notes, theses, and published works from medical practitioners, Willoughby argues that antebellum medical students were thoroughly schooled in the supposed racial differences between Black and White people. These teachings emerged jointly from the introduction of French methods of anatomical study to U.S. medical education and from the exploitation of enslaved bodies for dissection and experimentation. Even in northern medical schools, students received training in racial science. The shared curriculum forged bonds between medical practitioners that transcended the sectarian conflicts of the era. "Thus, when the United States was beginning to break apart over the question of slavery," Willoughby writes, "anatomists had created a medical education system that trained and socialized students to support essentialist white supremacy" (p. 95).

Although primarily targeted toward historians of race and medicine, Willoughby's book also speaks to economic factors that facilitated and propagated racial medical science in the nineteenth century. Enslavers had a financial incentive to control and manipulate the bodies of Black individuals, while physicians with knowledge of racial science profited by offering their services to the enslaver community. Medical schools also benefited from teaching racial curricula because it legitimized the budding medical profession and attracted more paying students from across the country. Furthermore, the transnational communication and commerce networks established in service of imperialist projects disseminated racialized medical knowledge overseas and throughout the nation. Although he focuses more intently on medical ideas, Willoughby argues that these economic forces made it possible for physicians to build the edifice he calls the "clinical-racial gaze" (p. 49).

Themes related to international capitalism and imperialism appear most prominently in Part 3 of the book, which business historians will likely find most stimulating. While the first two sections discuss scientific theories of racial origins and the pedagogical techniques of early medical professors, Part 3 analyzes the practical consequences of racial science theories. The fifth chapter traces the path of human skulls as they made their way into American medical collections. Building on Sven Beckert's notion of "war capitalism," the author argues that colonizers, graver robbers, and enslavers traded skulls as

commodities (p. 128). The seventh chapter shows how physicians promoted environmental health theories that justified exploiting Black people in tropical plantations while laying the groundwork for the later “Scramble for Africa.” In these chapters, Willoughby posits previously underexplored intersections between racial science and global capitalism, contributing to the growing body of literature on the role of slavery in the nineteenth-century American economy.

Willoughby’s treatment of commercial exchanges of humans, human remains, and medical knowledge is thoroughly grounded in the New History of Capitalism (NHC). He extends the conclusions of scholars like Edward Baptist and Walter Johnson to the realm of medicine, contending that slavery and racism were integral to the rise of modern capitalism and the modern medical profession. Scholars skeptical of NHC literature will likely find themselves equally dissatisfied with Willoughby’s approach, especially given his tendency to suggest that racial medicine was connected to “capitalism” without defining that term or demonstrating that the transactions he describes occurred at large scales. However, *Masters of Health* identifies several important connections between medicine, race, and American capitalism that warrant further exploration from business and economic historians.

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Courteous Capitalism: Public Relations and the Monopoly Problem, 1900–1930. *By Daniel Robert.* Baltimore: Johns Hopkins University Press, 2023. 336 pp., 38 halftones, 5 line drawings. Hardcover, \$64.95. ISBN: 978-1-4214-4734-6.

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Reviewed by Ben Kodres-O’Brien

When John Maynard Keynes heralded “the end of laissez-faire” in a speech of the same title at Oxford in 1924, he singled out the large corporation as its defining feature: “A point arrives in the growth of a big institution—particularly a big railway or big public utility enterprise,” he stated, “at which the owners of capital, i.e. its shareholders, are almost entirely dissociated from the management.” As a result, Keynes