

# Epidemic Entertainments: Disease and Popular Culture in Early-Twentieth-Century America

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Over the last 20 years, “killer germs” and “superbugs” have become familiar features of American popular culture. Against the backdrop of a global AIDS pandemic that has claimed almost 14 million lives, the news media and entertainment industries have used the specter of real and imagined plagues to promote a wide variety of cultural products, from nonfiction tomes to made-for-TV movies. Through their efforts, Americans have become familiar with a host of frightening new ailments, including AIDS, Ebola, flesh-eating streptococcus, and the West Nile virus. Since September 11, what once seemed implausible scenarios involving bioterrorists and international conspiracies have taken on chilling new believability. With memories fresh in mind of airplanes used as bombs and anthrax sent through the mails, Americans seem headed for another “epidemic of signification,” to use Paula Treichler’s phrase, in which books, television specials, and movies explore the theme of disease apocalypse (1).<sup>1</sup>

The events of September 11 make the purpose of this special issue more complex and urgent. As Priscilla Wald writes in the introduction, this issue aims to provide “a richer and more nuanced understanding of the multifaceted relationships among culture and contagion.” Responding to the various plague scenarios being circulated in media and policy circles today requires engagement with a larger crisis in what sociologist Ulrich Beck has termed our modern “risk society,” that is, a culture increasingly aware of its potential for self-annihilation through nuclear war, environmental degradation, and pandemics of deadly disease. Since the end of the Cold War, widening disparities between the economic resources and ideological outlooks of the developed and developing worlds, coupled with the greater ease with which people and ideas move about the globe, have seemingly expanded the potential for

political and biological disruptions. Simultaneously, improved global telecommunications have ensured that these disruptions will be broadcast around the world, courtesy of video cameras, satellite networks, cable TV, and the Internet. New biological realities of disease converged with more intense scientific and media scrutiny of them have combined to heighten anxieties about what Jacqueline Foertsch terms “postmodern plagues” (4). As she writes, “Despite multiple medical and social advancements throughout the twentieth century, fears of plague have not been eradicated by science, politics, or religious fervor but have instead spawned a *plague of fears* that worsens the crises attending any period of true biological threat and fuels the fires of mistrust and misinformation in contexts where this threat is nonexistent” (4).

Given renewed anxieties about bioterrorism, it is all the more important that we reflect more deeply on how this “plague of fears” gets conceptualized and acted upon. Over the past decade, critical theorists have done exemplary work exposing the manifold ways that class, race, and gender differences have shaped popular representations of infectious diseases. A generation of AIDS-inspired scholarship has raised our consciousness about the ways that popular narratives of disease and risk, whether in fictional or nonfictional form, influence health care politics and policy. Critics have raised important questions about the way that media attention defines a disease’s newsworthiness. Barry Glassner and Susan Moeller describe how media competition has helped make Americans overly fearful of rare diseases they are unlikely to encounter, such as Ebola and the flesh-eating streptococcus, while distracting them from more widespread public health problems. Similarly, Treichler and her colleagues, in an unpublished presentation delivered at the twelfth World AIDS Conference, have identified a “global AIDS template” evident in policy statements and media coverage, a narrative in which “dramatic themes of microbiological apocalypse or merciless chemical and biological genocide obscure the more lethal and prevalent threat to human populations of boring, unromantic diseases like TB [and] malaria” (16).

Scholars such as Treichler, Lisa Lynch, and Heather Schell have shown how representations of infectious diseases frequently become a vehicle for expressing cultural anxieties about economic interdependence and racial mixing. Yet we still know too little about how the multiple disease narratives circulate and intersect, and the cumulative impact they have on their hearers. Over the last century, an escalating number of disease facts, possibilities, and rumors have become part of the everyday texture of American life. Although historians and literary critics have produced many useful studies of individual diseases, they have only rarely

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explored the larger process of competition for attention that operated in making one disease seem a more compelling subject than another. We need to better understand the cultural mechanisms of selection, comparison, deflection, and denial that work to highlight specific disease patterns at the expense of others.

Even brief reflection on the question of what makes one disease threat more culturally salient than another suggests how complicated an answer it requires. The obvious explanation, that attention follows numbers, is in fact quite problematic. Although sudden spikes in disease incidence do tend to attract both scientific and media attention, the overall relationship between rates of mortality and morbidity and popular preoccupations with specific diseases is actually much, much messier. As David Morris points out, the leading causes of death in the US are cardiovascular disease and cancer, not infectious diseases (221). Yet narratives about superbugs still remain popular subjects for media attention. Even more curiously, at a time of heightened concern about anthrax and AIDS, popular awareness of other, more common infectious diseases, such as syphilis or the various forms of hepatitis, remains muted.<sup>2</sup> We are left with questions such as: Why AIDS and Ebola and not syphilis and hepatitis C? How do we compare the significance of five deaths from an unknown terrorist's mailing of anthrax versus almost three million deaths from AIDS in the last year?

As these questions suggest, the dynamics governing popular attention to specific diseases are not easily reducible to patterns in the rise and fall of mortality and morbidity rates. Nor does a simple model of popularization, which sees public perception as a transparent reflection of scientific knowledge, provide a satisfactory model of understanding these complexities. Like all forms of popular culture in a modern consumer society, popular awareness of disease outbreaks reflects a complex interaction among many producers and consumers of meaning. To understand the ebb and flow of disease concerns, then, we need to better understand which groups have played leading roles in making and sustaining attention to disease problems and what common patterns of cultural angst they have reflected.

I want to focus on one aspect of this problem, namely, how portrayals of deadly disease function as cultural commodities—that is, ideas and experiences that circulate through the medium of modern consumer culture. Narratives of disease serve not only as personal accounts or ideological markers of cultural anxieties; they also constitute potentially profitable forms of news and entertainment. The newspaper scoop, the best-selling book, and the blockbuster film seek to translate cultural anxiety into economic

gain. I am especially interested in how certain new features of modern American consumer culture, specifically the close connections among journalism, advertising, and entertainment media, produced new conventions of representing dread disease.<sup>3</sup>

But rather than focus on the post-1980 period, as most discussions of “risk society” and the “culture of fear” typically do, I propose to look much earlier in the twentieth century. The genesis of our modern plague of fears lies not in the post-Cold War period but in the decades from 1900 to 1940. As I argue in more detail in “The Making of a Germ Panic, Then and Now,” this period shares many interesting similarities with our own: high immigration rates, diffuse fears of economic interdependence, and concerns about the global movement of people and diseases. Preoccupations with infectious diseases figured not only in public health measures and immigration restriction; they also shaped the contours of the marketplace through efforts to develop and refine an effective disease “sell.” Starting in the late 1800s, simultaneous revolutions in science, media, and entertainment altered existing mechanisms governing the flow of information and images of disease. Makers and distributors of new forms of mass media, including newspapers, magazines, films, and radio, discovered that stories about disease outbreaks and treatments helped to sell their own and their advertisers’ products.

Exploiting the news and entertainment potential of deadly diseases encouraged new kinds of collaborations among scientific researchers, politicians, activists, journalists, and advertisers. Powerful synergisms grew up among these five groups, so that arguments and claims made in one arena were replicated and amplified in others. Through reading in a wide range of sources, such as popular magazines, advertising agency records, and trade journals, I have eavesdropped, so to speak, on their insider conversations about how to “sell” disease. These conversations provide revealing insights into the assumptions that publishers and advertisers used to guide their coverage of infectious diseases. Although not necessarily accurate, their beliefs about what attracted or entertained the “masses” played a crucial role in shaping the flow of information and images available in popular domains of culture.

By exploring their conceptions of what made epidemics entertaining, I hope to offer more than the historian’s customary gesture of insisting that phenomena considered new and unique have important precursors in the past. For theoretical as well as policy reasons, we need to better understand the underlying dynamics of cultural attention as they operate in modern consumer societies. Too often critics implicitly contrast the sad state of contemporary media and entertainment industries with some mythic

good old days, when supposedly the dividing lines between fiction and nonfiction, information and advertising, advocacy and objectivity were sharp and clear. But a closer look at the history of disease-related journalism, advertising, and entertainment reveals that these boundaries have never been firm. Moreover, past practices of writing about and visualizing disease risks have considerable persistence; disease templates forged at the turn of the last century continue to shape popular culture and public policy to this day. Understanding historical continuities in the selling of stories about dread disease serve to remind us how deeply the dynamics of consumer culture shape perceptions of what is—and is not—a “real problem.” With that knowledge in hand, we can better comprehend our own predilections for turning epidemics into entertainments.

### **1. Newsworthy Science**

The new forms of epidemic entertainment that emerged in the late 1800s reflected the convergence of two revolutions, one in the scientific world, the other in the newspaper industry. The scientific revolution was precipitated by the work of Louis Pasteur, Robert Koch, and their contemporaries, who in the late 1800s provided convincing experimental proof of what came to be known as the germ theory of disease, that is, the role that living microorganisms play in the cause of many human and animal diseases. Between 1885 and 1915, the increasingly sophisticated science of bacteriology produced an explosion of knowledge about disease transmission and prevention. The discovery of the germ coincided with the late-nineteenth-century print revolution, which both cheapened the cost of newspapers and books and quickened the pace of news reporting. The so-called penny press pioneered a new kind of print journalism that redefined the conception of newsworthiness to include regular reportage on health and disease issues. As Bert Hansen has shown, American journalists first discovered how marketable scientific breakthroughs could be in 1885. Soon after Pasteur announced the first successful use of a rabies inoculation for humans, citizens of Newark, New Jersey, raised money to send four local boys bitten by a rabid dog to Paris for treatment with Pasteur’s new vaccine. Picked up by newspapers all over the US, the Newark rabies story became a media sensation. As Hansen notes, it established a template for coverage of medical breakthroughs that persists to this day, a formula featuring in his terms “heroic scientists,” “worthy patients,” and local “Good Samaritans” (411).

Although newspaper coverage of medical science tended to emphasize discoveries and cures, a less event-oriented but equally strong emphasis on health and disease developed in the mass circulation magazines of the period, especially those aimed at women. Late-nineteenth-century magazine treatments of hygiene built upon a long tradition of self-help and domestic medical practice in the US. From colonial times onward, Americans from diverse class and racial backgrounds sought to offset the strains of rapid change by careful attention to personal hygiene. The nineteenth-century cult of domesticity designated familial health as a particular area of female concern. Articles on child rearing and domestic health became a staple of mass circulation women's magazines such as the *Ladies' Home Journal* and *Good Housekeeping*. Concerned less with "breaking" news, this kind of magazine coverage emphasized the implications of new knowledge for individual and household health regimens.<sup>4</sup>

By the early 1900s, American newspapers and magazines had developed a kind of protoscience journalism in which infectious diseases and their prevention had pride of place. Although they often complained loudly about the distortions of the "yellow press," both public health officials and scientific researchers tried to turn this media interest to their own advantage in order to build support for better funded and more sweeping health measures. As urban politics and newspaper competition contrived to make public health issues more newsworthy, commissioners of public health in large cities such as New York and Chicago became media personages second only to the mayor. Although more removed from the public fray, researchers also courted positive press attention to raise money for their laboratories. For example, Hansen has shown how the Newark rabies sensation led directly to the founding of Pasteur Institutes in the US (407).

Collaborations among scientists and journalists searching for newsworthy discoveries depended on the efforts of a third set of players who emerged in this time period: large, well-organized groups of health activists and reformers who had their own keen sense of publicity. Between 1900 and 1940, lay advocacy groups began to play an increasingly important role in building and sustaining public attention to specific diseases. National organizations to promote awareness about mental illness, cancer, and sexually transmitted disease were founded in this period, but by far the most successful of these groups, in terms of numbers and influence, were the anti-TB societies. A dense network of state and local anti-TB groups coordinated by the National Tuberculosis Association (now the American Lung Association) worked not only to publicize scientific discoveries about the disease but also

to connect its ravages to other reform issues, such as better housing and working conditions. Borrowing heavily from advertising and marketing methods, TB workers became skilled in the art of making their disease newsworthy. Coverage of the movement's countless parades, exhibits, and Christmas seal campaigns became a familiar feature of early-twentieth-century journalism.<sup>5</sup>

TB became the "master disease" of early-twentieth-century reformers and editors not because it was on the rise but because it served other compelling agendas. First, the TB crusade helped to popularize the legitimacy of the new germ theory of disease; before 1882, when Robert Koch isolated the tubercle bacillus, now known as *Mycobacterium tuberculosis*, consumption was regarded as a constitutional, not a communicable, disease. Thus, spreading the "gospel" of its communicability served as powerful evidence of the new authority of the laboratory. Although declining in frequency, TB remained common enough that many people were familiar with and frightened of its ravages, and thus motivated to avoid it, especially as it became typecast as a disease of the "other." Unlike sexually transmitted diseases, which were on the rise and generating considerable concern in this period, the TB problem could be openly discussed in public without offending social mores. Finally, TB served well as a vehicle for pushing a wide range of societal reforms aimed at easing the dislocations of urbanization and industrialization.<sup>6</sup>

## 2. Epidemic Exposés

But after World War I, TB was becoming essentially "old news." Ironically, the movement's heyday coincided with a dramatic decline in TB death rates; during the interwar period, it became a disease increasingly associated with poor, immigrant, and nonwhite Americans. By the late 1920s, cardiovascular disease and cancer had replaced infectious diseases, including TB, as the leading cause of death among Americans. Still, germ diseases, especially the epidemic forms manifesting dramatic peaks of incidence, by no means lost their appeal. In search of new topics to attract readers, newspaper and magazine editors began to follow the medical literature, looking for new scientific discoveries that might be converted into stories or unusual disease events that might have interesting political implications. A different style of reportage featured what might be styled mini-epidemics; that is, comparatively small outbreaks of an unusual disease garnered intense but short-lived newspaper attention, often with an overtly political purpose in view. Following the muckraker tradition of

the pre–World War I period, these epidemic exposés were used to highlight the incompetence and corruption of public officials and businessmen.

During the 1920s and 1930s, these epidemic exposés familiarized American readers with a new panoply of strange disorders. They read articles about undulant fever, also known as brucellosis, a bacterial disease contracted by drinking raw milk; amoebic dysentery, a parasitical infection spread by fecal contamination of water and food; and psittacosis or “parrot fever,” a respiratory infection caused by a strain of chlamydia carried by infected birds. In sharp contrast to TB or influenza, outbreaks of these diseases tended to flare up and subside quickly, and affected comparatively small numbers of people, from a handful to at most a hundred. Such mini-epidemics were eminently newsworthy, in that they were serious enough to cause concern without being so overwhelming as to produce extreme denial or despair.

Two talks given by magazine editors to members of the J. Walter Thompson advertising agency in New York City provide insight into the making of an epidemic exposé in the interwar period. Their presentations were part of a series run by the agency to acquaint its creative staff with publishing trends. Given that mass-circulation magazines depended heavily on advertising for their financial survival, publishers, editors, and advertisers had a common interest in gauging readers’ interests and preferences. Addressing the Thompson staff in 1930, Loren Schuler, editor of the *Ladies’ Home Journal*, articulated his sense of ease with the audience, saying, “I feel always a sense of friendliness when I am with advertising people because I feel very distinctly that we have common problems to solve; after all, there is comparatively little difference except in the method of operation between the editorial and the advertising sections of the book—both of us must be prepared, at any moment, overnight if need be, to overturn old policies” (1).

In his 1930 talk to Thompson executives, Morrill Goddard, the editor of *American Weekly* (the prototype of the Sunday newspaper magazines), articulated the more general appeal of science topics. In recent years, Goddard noted, “a good deal of propaganda” had been “done for the masses on science,” and seeing scientific topics on newspaper front pages, “the public mind has come to feel that science is a wonderful thing—that science can do almost anything” (4). Yet he admitted that “a great deal of science is technical and tiresome” and beyond the average person’s understanding (4). “But when you take science and select your topic then you have a great advantage over the scientific press which

must give a fair report of every blessed thing that has happened the whole world" (4). As a publisher, he looked for topics with "human appeal to a man or a woman" and then decided "whether or not there are enough details to warrant presenting it" (4).

In choosing stories, Goddard looked for the "surprise value, the unexpected, the unknown in science" (8). As a publisher, he aimed to unsettle his readers, and "a great deal of science nowadays is in upsetting the things that grandma used to do and told mother and mother told us" (8). Malaria provided a good example, he noted: although our grandparents believed "bad air" caused the dread fever, "now we know about germs and mosquitoes" (8). As a journalist, he recognized that in modern times, "a large percentage of our science is in setting people right on those things they have been doing all their lives and that mother used to do and telling them what the trouble is—that what they have been doing is futile and telling them the right way to do it as science finds. We try to print as much as possible with a personal application so the individual will read it and say, 'now, I am going to do that'" (8).

As Goddard's references to grandmothers and mothers suggest, the task of "setting people right" often focused specifically on women, who were widely assumed to have both more interest in and responsibility for preserving the family's health. In his talk to the Thompson staff, Schuler made it clear that health was a central preoccupation of the *Ladies' Home Journal* as well. As he put it, "The interest of the greatest number of people still lies in health, wealth and happiness," so the magazine's leads generally reflected those topics (11). Like Goddard, Schuler made it clear that he looked for the new and unexpected in shaping a story: "[W]hen it comes to controversy that is where we live, as a matter of fact," he explained (12). For example, he noted, "We like it very much when we can run into such a thing as a De Crief [*sic*] article of last fall on 'Undulant Fever'" (12). Then he bragged, "[N]obody had ever heard of undulant fever before, outside of scientific stories and suddenly here was a story in the Journal with enormous circulation which said to the mothers that milk is a fine food but be sure it is pasteurized because they may get a bad fever if it has this germ in it" (12).

This article, titled "Before You Drink a Glass of Milk," combined science and drama in a formula Paul de Kruif had earlier proven successful in his best-selling *The Microbe Hunters* (1926). The piece combined frightening details of a new disease with a biographical portrait of the "girl bacteriologist" Alice Evans, who identified its cause (8).<sup>7</sup> De Kruif began the article with a dramatic warning: "Before you drink a glass of milk, it will be mighty wise

for your health, it may even save your life, to ask a simple question,” a question he wisely does not reveal right away. He continued, “For in American milk today there lurks a terrible, wasting fever, that may keep you in bed for a couple of weeks, that may fasten itself on you for one, or for two, or even for seven years—that might culminate by killing you” (8). Intertwined with accounts of Evans’s investigations into the disease, de Kruif presented evidence that drinking raw milk, even from herds certified to be free of disease, could lead to infection with the brucellosis bacteria, which produced fever, night sweats, loss of appetite, and fatigue. The “simple question” that could save lives turned out to be asking if one’s milk was pasteurized.

It is easy to see why this article, combining the tale of a “girl microbe hunter” with warnings about milk-borne disease, pleased Schuler so much. Editors believed that outraged protests over an article, colloquially referred to as “kicks” or “howls,” provided the best proof that it had hit the target. With the *Ladies’ Home Journal’s* story on undulant fever, Schuler reported, “there was the devil to pay right away. We were hammered by certified milk people, praised by pasteurized milk producers, accused of all kinds of things and all kinds of ways” (12). But, he continued, “we stuck to our guns because we knew absolutely what information was back of that article” and, he noted proudly, “our position has been verified in numerous ways since the publication of that article,” including an editorial in the *Journal of the American Medical Association* “devoted entirely to facts on undulant fever” (12). From the *Home Journal’s* perspective, not only had the magazine scored a scoop in being the first publication to sound the alert about the hidden dangers of drinking raw milk but its journalistic coup had been affirmed by the highest medical authorities.

Epidemic exposés appealed to editors and publishers also because of their potential political uses. Both Schuler and Goddard expressed great pride in their ability to goad politicians and public health officials into action. Goddard told a particularly revealing story about tainted oysters that suggests the journalistic capital to be gained from exposing a public health problem.

. . . I read a despatch [*sic*] from Chicago that a number of people had been stricken with typhoid fever and it was suspected that it was from oysters. I sent two men to Chicago right away; they went to the restaurant and traced the thing to the wholesaler, went from him to the railroad and got the car number, traced the car back to Jersey City, followed the thing through and found the nasty sewer bed that carload of

oysters came out of. We printed a double page with large pictures of New York sewage pouring out on the oyster bed and it killed the oyster business; . . . We got all kinds of complaints from wholesalers and retailers. . . . It gave them such a jolt that starting with the people in Washington, they went all down the line in the state and city inspectors and I have not read of any typhoid oyster epidemic since then. Now the oystermen say "You did us a good job; nobody is afraid to eat oysters any more. You scared us to death and we cleaned house." That was a public service and I suppose that could be called propaganda against typhoid germs in oysters. (9)

Psittacosis, colloquially known as "parrot fever," provides another example of the interwar epidemic exposé. A pneumonia-like illness contracted from pet parrots, the disease first got wide press coverage in American newspapers after cases of the disease appeared in New York City in 1930. In his Thompson talk, Goddard bragged about getting the scoop: "We were the first newspaper to present it to the American public, to warn them that parrots might be deadly in the home" (9). Once again, his account of this coup emphasized the importance of spotting a potential story before the competition. Goddard had heard about an opera singer in Argentina whose pet parrot started an epidemic, forcing the opera company to close. He had his regular correspondent in Argentina get details and write it up for a story printed "about four or five weeks before the first case developed in New York" (10). Again, press coverage led to government action against the disease. President Herbert Hoover ordered an investigation after the 1930 outbreak, and in 1932 the federal government banned interstate shipment of birds capable of transmitting the disease ("Parrot Fever" 227).

The popularity of the epidemic exposé placed a new premium on writers capable of crafting entertaining stories that were simultaneously accurate enough to withstand scrutiny from scientists and public health officials. As Goddard observed, such journalists were few and far between: "Newspaper science is beneath contempt as a rule," a fact he admitted was "not surprising," given the nonsense many reporters wrote (11). "We have been nearly ten years slowly climbing out of the category of newspaper science and we are now welcomed in any of the laboratories of the important scientists of the day, here or abroad," he noted (12). Goddard explained that his paper improved its reputation by being scrupulous in what it covered. "We try to be as careful as possible about facts—we don't print it on the say so of some casual

writer” (12). Goddard reported that he himself read about six medical papers and 30 to 40 scientific magazines each week in order to keep up (10).

The most successful of these interwar science journalists was Paul de Kruif, who left a career as a bacteriologist to become a professional writer. After his success with *The Microbe Hunters*, he became much sought after as an author of books and articles on science topics. “When we want an article dealing with a medical subject, Paul de Crief [*sic*] is the man to do it,” Loren Schuler explained (17). Newspapers, magazines, and news syndication services also began to court physicians who could write regular columns on health issues. Among the earliest and most successful of these newspaper doctors were Royal Copeland, later US senator from New York; Logan Clendenning, who wrote for the King Syndicate; and William Brady, who wrote for the National News Service based in Chicago. With the introduction of radio in the 1930s, these kinds of medical features went on the air as well.<sup>8</sup>

As popular coverage of medical discoveries and epidemic exposés increased, editors and publishers inevitably had to develop conventions about what was and was not fit to print. In a 1933 talk to Thompson executives, Ward Greene, executive editor of the King Features Syndicate, noted of publishing generally, “The whole subject of what is taboo and what is not gives us headaches” (13). Coverage of sexually transmitted diseases was so vexed that after World War I, publishers avoided it almost entirely. In discussing other disease problems, the new journalism had to find the proper tone. Humor, for example, rarely worked in stories or advice columns about health problems. Greene noted of Logan Clendenning, who wrote a syndicated column for King Features, that he was “a very intelligent man and he writes very well,” but “he likes to get a bit humorous in his column once in a while, and people don’t like that” (13). Greene concluded, “They want doctors to be serious and not joke with them in the doctor’s column” (13).

The need for delicacy carried over into what was the most widely read features of interwar magazines and newspapers, namely cartoons and comic strips. The funnies had their own code of permissible conduct, as J. D. Gortatowsky, the editor of the Hearst papers’ comic pages, noted in a 1933 talk at the Thompson agency. Along with rules about cartoon characters not swearing or philandering, he explained, “There are no references in the comics to infirmities” (6). To illustrate that point, he recalled the following example: A cartoonist drew a strip based on a popular vaudeville gag reflecting anxieties about the stock market, in which a man says, “I have diabetes at 32,” and his friend replies, “That’s nothing, I have General Motors at 250.” The paper’s in-



"NONE BUT THE BRAVE." ETC.

TOM. — May I kiss you?

SALLY. — They say kissing tends to the propagation of microbes.

TOM. — Well, you can kiss me, then — I'm not afraid of 'em.

Fig. 1. "'None but the Brave,' etc." *Puck* 7 Sept. 1892: 39.

ternal censor would not allow the comic to run. To get it printed, the editor recalled, "He had to invent a disease. Too many people have diabetes. He had to invent a name like 'haliobetes' or something like that" (6).

Similar gradations of humor apparently applied to jests about germs and infectious diseases. On the one hand, cartoonists might invoke the subject of germs, so long as their connection to disease was muted, as in an 1892 *Puck* illustration about an amorous young couple (Fig. 1). Cartoon characters could suffer from colds and other mild ailments; they might even express fears of serious illness, so long as they proved unfounded. In a revealing 1924 cartoon from the New York *Herald Tribune*, reproduced in the *Journal of the Outdoor Life*, a man's persistent cough, which he and his friends fear signals his impending doom from TB, turns out to be a smoker's cough, much to his delight (Fig. 2). The threat of serious disease had by definition to be discounted in order to be a fit subject for levity.



promotions, interwar advertisers faced far deeper suspicion of their motivations and selling techniques than their media counterparts. Yet by adopting some of the same strategies as publishers, the interwar advertising profession sought to develop an upscale disease sell that moved products without appearing to profiteer from popular fears of dread disease.

Interwar advertising campaigns built upon decades of prior experience in transforming fears of infectious disease into lucrative product promotions. From the late 1890s on, the germ theory of disease became one of the most widely replicated scientific “truths” to be found in American commercial culture. At its peak in the interwar period, the germ sell was used to market everything from refrigerators and vacuum cleaners to antiseptic paint and toothpaste. Marketing campaigns for these products helped to disseminate public health cautions about the dangers of casual contact, insect vectors, and food contamination. Borrowing from contemporary popular culture forms, advertisements presented a steady stream of minidramas illustrating the dangers of germs in everyday life.<sup>9</sup>

In crafting their campaigns, advertising agencies followed many of the same general principles as their journalist colleagues. Indeed, it was that sense of shared goals that led J. Walter Thompson executives to invite editors and publishers to give talks at the agency. In sentiments that echoed Schuler’s and Goddard’s presentations, Thompson executive William Legler explained the power of negative copy appeal in his own talk for the agency staff. “It is generally believed by advertisers that the desire for health is one of the primal instincts of mankind; therefore that health is a powerful advertising appeal for almost any product that is related in any way to health,” he said (2). But Legler argued that it was not the desire for health, but “*fear of ill health that is the powerful appeal in advertising*” (3). To be sure, he admitted, some ad agencies avoided negative headlines. “Scare advertising may have a certain stopping value,” these people maintained, “but it is repellent. Nobody likes to be reminded of unpleasant possibilities” (7). Legler recalled working previously for a “not very successful” agency where he was told “always to write about the good things the product will bring—not the bad things it will prevent.” But Legler disagreed, arguing “*self-preservation* is a more vital human instinct than self-gain” (8).

In support of his argument, Legler provided a roll call of successful fear campaigns. The fear of coughs, colds, and pneumonia was selling 25 million jars a year of Vick’s VapoRub. The fear of “athlete’s foot,” infectious ringworm disease, increased sales of Absorbine Jr. The fear of “germs from spit-tipped cigars” sold

two million more Cremo cigars per day last year than the year before. The fear of “what will happen to the wife and children after you are gone is what sells life insurance” (8). He concluded, “Fear is a vital human characteristic—one that we simply cannot ignore in this business. And if the strongest way to sell a product (legitimately, of course) is with scare headlines and scare illustrations—then that’s the way it should be done, even if we do it with our tongue in our cheek” (9).

As Legler’s comments suggest, advertisers had to be very careful in their use of fear copy, especially during actual times of epidemic. A pair of articles by A. Rowden King, editor of the influential advertising trade journal *Printers’ Ink*, made this point in terms of influenza-related advertising during the great pandemic of 1918–19, which killed some 675,000 Americans. In “Chance for the Health Appeal,” he noted that the epidemic “has quickened the health consciousness of the nation. . . . Never before has there been such a legitimate opportunity for advertisers to sound a conservative health note in their copy” (165). Since doctors agreed that medicine could do little to help flu victims recover, they were likely to turn instead to more general health preservatives and strengtheners. “For the person who has been close to death appreciates life as a person who has always been well never can,” he noted (165). As a consequence, “these people have an entirely new set of interests. They are going to eat different foods, to seek new kinds of recreation, and in fact to alter considerably their methods of living” (165). This was good news for “advertisers of sporting goods, outdoor equipment, food, clothing and all such accessories of vigorous living” (165). King concluded, “Obviously, there is a chance for all kinds of advertisers to tie up their selling appeal with this situation” (166).

At the same time, respectable companies did not want to take the chance of appearing to profiteer from the influenza epidemic. As King subtitled an earlier article on influenza and advertising, “Epidemic Days Not the Time to Reap Sales but to Develop Good Will” (“Spanish” 81). But King went on to suggest that tasteful advertising had the capacity to both educate the public and sell the product. To illustrate this point, he showcased the educational advertisements run by Colgate, the makers of Ribbon Dental Cream. Unlike a regular advertisement, the Colgate ad did not prominently display the product’s name or maker in large type, nor feature a picture of the toothpaste tube (Fig. 3). The text instead emphasized “some facts about [influenza] and how to prevent its spread,” including an inset of the “Rules to Avoid Respiratory Diseases” distributed by Surgeon General William Gorgas. The blocks of solid text, observed King, “breathe



Some companies might well have tried stronger scare copy to sell their products. But Fowler was quoted as saying, “[A]n epidemic is a matter of life or death for thousands. It is not the part of wisdom to capitalize and make use of such a subject and such a time in too mercenary or too selfish a way” (qtd. in King, “Spanish” 82). Thus Colgate “chose not to put the stress upon our dentifrice but upon the great wisdom of more-than-usual regularity in the brushing of the teeth during the worried days of an epidemic, with only a secondary tie-up with our product Ribbon Dental Cream” (82).

*Printers’ Ink’s* praise for the Colgate campaign suggests the blurring of boundaries between news and advertising produced by the new journalism. As King put it in “Spanish Influenza,” these sorts of advertisements “constituted just as vital and interesting reading in Boston as anything the front pages could offer of war news during the days it appeared” (82). He pointed to this kind of goodwill advertising as an “example of the way the doctors and their associations could serve the public, as a whole, under similar situations by disseminating health information by the far reaching all including advertising route” (81).

Influenza as well as other respiratory infections continued to figure prominently in interwar advertising for over-the-counter drugs. Companies timed these advertising campaigns to peak during cold and influenza season. Advertising copy often struck the theme of “don’t neglect a cold or it might turn into something worse.” As memories of the pandemic faded, the identity of the influenza strain changed as well; by the 1950s, references to Spanish influenza had given way to newer variants such as Asian or Hong Kong influenza. But in emphasizing the potential dangers of a neglected cold, advertisers continued to work a deep vein of anxiety dating back to the great epidemic of World War I.<sup>10</sup>

#### 4. A Story Is Fundamental

Disease templates developed in interwar news and advertising carried over into popular entertainment forms. The corrupt politicians featured in newspaper epidemics and the domestic dramas invoked in advertising fear copy had their counterparts in contemporary fiction, films, plays, and ultimately radio. These popular narratives built upon a long literary tradition of using arresting illnesses and dramatic deaths as plot elements; as Athena Vrettos has shown, during the second half of the nineteenth century, illness and the body were central preoccupations not only of medical writings but of fiction and prose as well. As scientific and popular knowledge about infectious diseases increased, plot lines

became increasingly based on specific diseases and their known modes of transmission. Simultaneously, the rapid multiplication of media and entertainment forms opened up a wide range of cultural arenas, from serious literature and drama to the penny press and the nickelodeon, where disease plots might be explored as forms of epidemic entertainment.

Properly surveying this explosion of creative interest in disease narratives is beyond the scope of this essay. Instead, I want simply to point out some connections I see between the representational styles developed in journalism and advertising and their counterparts in early-twentieth-century entertainment forms. As I have argued in *The Gospel of Germs: Men, Women, and the Microbe in American Life* (1998), the popularization of the germ theory of disease generated a complex set of beliefs about individual and collective responsibility for the spread of germ diseases; these beliefs were particularly well suited to the melodrama forms so dominant in early-twentieth-century popular culture (ch. 4). Not surprisingly, given the prevalence of consumption both in real life and in literary portrayals, the “great white plague” predominated in early efforts to develop new forms of epidemic entertainment.

Just as they early recognized the potential of advertising methods for public health education, anti-TB reformers quickly realized the potential of film as an advocacy tool. The National Tuberculosis Association commissioned Thomas Alva Edison’s film company to start making disease melodramas for them soon after the first commercial movie theaters opened in the US.<sup>11</sup> These early TB films clearly demonstrated the power of hooking education to entertainment. As Philip Jacobs, the publicity director of the National Tuberculosis Association, noted in 1912, “A story is fundamental to the motion picture scenario, since the dry details of taking the cure and of the various other propaganda in the tuberculosis movement are hardly of sufficient interest to arouse the enthusiasm of the million people who visit the motion pictures every day” (303). In his review of *The White Terror* (1915), writer Randolph Bourne observed in more ironic language that experience having proven “the public does not take kindly to pure ‘education’ in the movies,” the educational bits “had to be smeared on in the spots where it was thought it would best stick” (233).

The most widely distributed TB films, such as *The Red Cross Seal* (1910), *Hope—A Red Cross Seal Story* (1912), and *The White Terror*, played upon familiar conventions of early American melodrama. For example, in *The Red Cross Seal*, a wealthy young man named Jordan falls in love with a tenement girl named Edith, who aspires to be an artist. As Jacobs summarized the plot, “He gives up his seemingly aimless life of ease and pleasure” and disguises

Fig. 4. Still from the film *The Awakening of John Bond*. Reproduced from the *Journal of the Outdoor Life* 9.12 (Dec. 1912): 305.



SELLIE O'BRIEN DENOUNCES JOHN BOND AS THE MURDERER OF HER BROTHER

himself as a common laborer, so he can live near her (303). To prove his love for Edith, he buys and renovates the tenement house, hires a visiting nurse for a consumptive tenant, and “helps thus to restore the consumptive to health and to remove from his family the danger of further infection” (304). Themes of cross-class infection and romance were staples of such disease melodramas. Sick workers infected the beloved wives and children of greedy businessmen and slum lords; innocent young women and noble doctors served as instruments of their salvation (Fig. 4). Similar to conventions used in the newspaper epidemic and the advertising sociodrama, these films invoked familiar themes of public and private culpability. As Bourne noted in his review of *The White Terror*, the film sought to mix “love, crime, political corruption, industrial exploitation, social service, redemption, pathos and personal hygiene . . . into an unforgettable work of art” (233).

But moving beyond the simplistic conventions of early melodrama to explore the cultural significance of TB proved more difficult. A case in point is Eugene O’Neill’s autobiographical play *The Straw*, which he wrote between 1918 and 1919. Based on his treatment for TB in a 1910s sanatorium, the play revolves around the doomed love affair of two patients, a young woman named Eileen Carmody and a journalist (modeled on O’Neill) named Stephen Murray (Fig. 5). Four of the five scenes take place in a sanatorium, and the action is interwoven with the minutiae of the disease and



MARGOLA GILMORE AS EILEEN CARMODY, AND OTTO KRUGER AS STEPHEN MURRAY  
IN "THE STRAW," EUGENE O'NEILL'S POWERFUL DRAMA DEALING WITH THE  
TUBERCULOSIS PROBLEM.

*Fig. 5. Photograph of  
main characters in 1921  
production of Eugene  
O'Neill's The Straw.  
Reproduced in the  
Journal of the Outdoor  
Life 19.1 (Jan. 1922):  
opposite p. 1.*

its treatment. The dramatic finale, in which Murray declares his love for Carmody in a desperate bid to save her life—by giving her a “straw” to hold onto—ends with a fusion of the romantic and the clinical. The play ends with the dying woman’s instructions to her beloved: “See that you rest so many hours a day—and drink your milk when I drink mine—and go to bed at nine sharp when I do—and obey everything I tell you—and—” (794).

By the time the play was produced in 1921, O’Neill already had a reputation as a promising young playwright, and the play aroused considerable interest among both anti-TB activists and

theater critics. Most reviewers viewed *The Straw* as an interesting, if flawed, piece of work, and noted that anyone writing about the “TB problem” faced a creative challenge. Their commentaries suggest the fine line a playwright or film producer had to walk in portraying the ravages of disease: in order to be entertaining, such an account had to avoid being too graphic or upsetting. For example, the *Journal of the Outdoor Life*, the monthly magazine of the National Tuberculosis Association, enthusiastically praised the piece for its sensitive portrait of two people trying to “overcome the power of the tubercle bacillus”; the reviewer Helena Williams noted that the play had been generally criticized as too depressing (1). Alexander Woollcott of the *New York Times* took pains to report, “The squeamish and delicate may feel reassured,” for “the piece is not unduly clinical and of the coughing heard last night at the first performance . . . not more than one percent came from the stage” (16).<sup>12</sup>

As the history of *The Straw* suggests, making an artistic or commercial success of a play or film about dread diseases required neutralizing audience fears of material that would be too graphic or depressing. Anchoring plot lines with a heroic doctor-scientist figure became one popular way of containing these anxieties, a strategy that helped make popular the interwar medical “bio-pic” noted by Peter Mann (xv–xvii). The prototype of this new creative strategy was the productive (if short-lived) collaboration between bacteriologist-turned-journalist de Kruif and novelist Sinclair Lewis that produced both the best-selling novel *Arrowsmith* (1924) and the film version made of it in 1932. The success of de Kruif’s nonfiction *Microbe Hunters* also helped to inspire Hollywood “bio-pics” of Pasteur and Paul Ehrlich.

In making such films, producers had to contend, just as cartoonists and playwrights did, with representational conventions about what disease experiences were or were not fit to present for popular consumption. The act of translating successful books into successful films often required softening or avoiding difficult subjects. The growing importance of movie production codes further complicated American moviemaking. The film industry’s trade association, the Motion Picture Producers and Distributors of America, began to formulate in the 1920s more detailed “strictures about representing sex, crime, violence, the professions, and morality” (Bernstein 2). An even more stringent Production Code, developed and applied by the Production Code Administration (also known as the Hays Office), was adopted in 1934. Prohibiting any sexual references that might undermine “the sanctity of the institution of marriage and home,” the Motion Picture Production Code of 1934 explicitly stated that “sex hygiene and vene-

real diseases are not acceptable subject matter for theatrical motion pictures” (qtd. in Gardner 209, 210).

As Susan Lederer and John Parascandola have shown, this ban posed obvious problems when Warner Bros. decided to make *Dr. Ehrlich's Magic Bullet* (1940). The German scientist's stature as a medical hero rested on his discovery of an effective chemotherapy for syphilis. The movie censors finally agreed that some mention of syphilis had to be allowed for the story's humanitarian message to work, but insisted that the film's script and promotional advertising make as few references to the disease as possible. Significantly, the issue of inappropriate commercialization of dread disease figured in the censors' anxieties about the film. The head of the production board, Will Hays, expressed the fear that Warner Bros. only wanted to mention syphilis as a way to boost ticket sales. Like advertising toothpaste during the influenza epidemic, promoting a film by mentioning venereal disease smacked of “the profit motive,” as he put it (qtd. in Gardner 183). Lederer and Parascandola note that the chief reason Warner Bros. persisted in making the film was political: they wanted to dramatize the life of the German-Jewish Ehrlich in order to protest the anti-Semitism of Hitler's regime. Like the newspaper editors of the era, movie producers valued disease narratives because of the political agendas they could be used to address.

### 5. National Hypochondria

Between 1910 and 1940, new styles of representing dread disease emerged in American journalism, advertising, and entertainment industries. Selecting what stories to feature in their pages, journalists looked for “surprise value, the unexpected, the unknown in science,” as Goddard summed it up. Advertisers sought to mobilize fears of disease that might be linked to specific products such as toothpaste and disinfectant. Filmmakers and novelists searched for a good story that would enliven the “dry facts” of disease prevention. In crafting these epidemic entertainments, all three groups had to negotiate delicate questions about what was suitable for such public discussions. Bids for attention had to be presented as informative and in the “public interest”; too blatant an effort simply to make money from a frightening ailment would offend rather than attract interest. Discussions of dread disease needed to avoid both the “taboo” and the comic.

Not surprisingly, these representational conventions attracted criticism. Some observers complained that the aggressive pursuit of new diseases frightened readers unnecessarily about in-

significant ailments. Magazine journalists, who were less dependent on daily sensations to sell their publications, took the lead in critiquing newspaper epidemics. An editorial in the *New Yorker*, for example, described the parrot-fever craze as “the latest and most amusing example of the national hypochondria,” the result of “newspapers, playing up bizarre items, [that] have a neat way of turning an isolated case into a national menace.” The editor predicted sarcastically that “some reporter will invent a disease traceable to something that happens to everybody: ‘Otis heart’ from riding in elevators, maybe, or ‘corn-flake itch’ from eating breakfast food, and we’ll all die of autosuggestion” (“Talk of the Town” 11).

In a more serious vein, Randolph Bourne expressed his dislike of the new breed of disease melodrama in a blistering 1915 editorial in the *New Republic*. “As a would be democrat, I should like to believe passionately in the movies,” he began, but the National Tuberculosis Association’s latest film, *White Terror*, struck him as “not only not harmless but all crooked and unreal” (233). Complex problems had to be made simple, sweeping solutions had to come quickly, for “no time can be lost in the movies or in the movie interpretation of life” (233). If this was educational melodrama, Bourne concluded, he would rather have the old-fashioned kind, “untainted with current moral and social issues” (233).

These commentaries from the early twentieth century sound surprisingly familiar, a reflection of the fact that many of the media “sins” usually attributed to the post-1980 period were already evident by the interwar era. What David Morris describes as the “Disneyland” treatment of chronic illness and disease obviously started much earlier than World War II (218–46). Coterminous with the birth of a new kind of consumer culture at the turn of the last century, representations of disease acquired new salience as cultural commodities; properly “spun,” they attracted attention and promoted sales. But in the process, epidemic entertainments popularized disease templates that inevitably skewed public discourses about disease. The privileging of the new and startling over the old and familiar, the selection of disease threat to match political agendas and marketing goals, and the premium placed on telling a good story: these trends laid the foundation for the modern culture of fear and its attendant “compassion fatigue,” as Moeller has dubbed it.

Given how deeply these trends are predicated by the dynamics of information flow in a modern consumer society, they will not be easily changed. Treichler has argued that “the social is as much the reality we inherit as a river or a body or a virus and often even more intractable” (328). This intractability provides all

the more reason to think deeply and critically about the way that practices of reporting, selling, and entertaining affect popular understandings of disease in modern consumer cultures. By recognizing the complexity of the processes involved, we understand better how they shape our collective discourses about public health and form the constraints on change. We can more effectively question, as scholars of AIDS and emerging diseases have asked us to do, the kinds of linkages being made today in coverage of the biological warfare threat or the latest appearance of the West Nile encephalitis virus. We can begin to study more seriously the way that popular cultural forms, such as feature films and hand soap advertisements, shape popular disease beliefs. With no immediate end to our own germ panic in sight, this kind of engaged scholarship is desperately needed.

### Notes

1. For an overview of popular preoccupations with germ terror, see Tomes, "Making of a Germ Panic."
2. These questions about the different levels of interest in AIDS, syphilis, and hepatitis are suggested by the Institute of Medicine and Muraskin, "Silent" and "Hepatitis B."
3. On consumer culture and medicine in this period, see Tomes, "Merchants of Health." For more on medicine and advertising, see also "Medicine and Madison Avenue," a Web site I designed in collaboration with Duke University Libraries.
4. On Progressive-era science and health journalism in this period, see Burnham and Ziporyn. My observations on magazine coverage are also based on my own research for *The Gospel of Germs*.
5. On the anti-TB movement, see Teller and Tomes, *Gospel*, ch. 4.
6. Tomes, *Gospel*, ch. 4. Sontag describes TB as the "master disease" of the nineteenth century; Teller makes a strong case for its dominance through World War I.
7. The "girl microbe hunter" Alice Evans was one of the most eminent American women scientists of the interwar period. See Rossiter 229–30.
8. Little has been written about doctors' newspapers or radio work. I have compiled this list from material in the J. Walter Thompson Company Archives, Duke University, Durham, NC.
9. See Tomes, *Gospel* ch. 7.
10. Crosby has argued for a kind of cultural amnesia about the great influenza pandemic of 1918–19 that killed an estimated 21 million people worldwide,

675,000 of them Americans. But my survey of interwar advertising suggests that anxieties about influenza did persist, albeit in muted and indirect form. See, e.g., the cold advertisements reproduced in “Medicine and Madison Avenue,” such as MM0439, “Mother! Your Child’s Cough at Night May Be the Asiatic Flu” (1958), and MM0470, “Virus Cold or Asiatic Flu?” (1958).

11. On the early TB films, see Pernick, “Ethics.” By 1928, almost 1,300 silent films on medical topics had been made for lay audiences. See Pernick, *Black Stork* viii.

12. On critical views of *The Straw*, see also Parker.

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