
Neurasthenia was once thought to be America’s “most precious pathological possession,” a disease so singularly indicative and productive of national character that at least one observer labeled it “Americanitis.” Over the course of the late-nineteenth and early-twentieth centuries, this unassuming nervous illness approached the improbable proportions of a vogue, and, as Tom Lutz has argued, it became one of that era’s richest nodes of intersecting discourses. The last several decades have seen researchers from a variety of disciplines working to more thoroughly illuminate those intersections, and Schuster’s Neurasthenic Nation is a welcome addition to this growing body of scholarship.

Between the covers of a compact and eminently readable volume, Schuster neatly distills much of his predecessors’ work while seeking to locate neurasthenia within the context of “America’s search for health, happiness and comfort”—a struggle which he sees as part of a broader effort to understand “how Americans developed a sense of what it means to be a ‘normal’ person” (xi). As Schuster’s quotation marks here would seem to suggest, notions of normality require careful qualification, and some readers may initially quibble with the author’s failure to more fully follow through on this mandate. This omission does, admittedly, make it harder to accept some of the book’s foundational premises, such as the claim that, before the advent of neurasthenia, things like “depression” and “pain” had been considered “unfortunate but entirely normal aspects of life” (1), or the suggestion that neurasthenia “establish[ed] happiness and comfort as the norm of good health” (2). While there is no doubt that the symptoms of depression and pain have long been regular features of human existence, it is not clear in what sense they were ever considered “normal” (humoral theory, for instance, which dominated medical thought for most of the last two millennia, considered such things to be entirely abnormal, the product of what was imagined to be a literal “imbalance” of elemental bodily substances). It similarly remains unclear how neurasthenia might be responsible for establishing happiness and comfort as the hygienic norm, especially for Americans, whose nation’s founding documents enshrine happiness—or at least the pursuit of it—as the healthy aim of all democratic individuals.
These reservations certainly complicate but may not ultimately compromise what seems, after all, to be this study’s signal virtue: its commitment to investigating the shadows of neurasthenic history and finding in the unlikeliest corners evidence of the disease’s astonishing reach and pervasiveness. For Schuster, neurasthenia was never an isolated or narrowly medical issue, but, almost from the moment it emerged, a phenomenon deeply imbricated in matters of national importance. In his opening chapter, Schuster rehearses the circumstances of neurasthenia’s advent with brief biographies of the medical figures most responsible for shepherding the disease into national consciousness: E.H. Van Deusen, George Beard, and S. Weir Mitchell. Following the work of scholars like Bonnie Ellen Blustein, Schuster wishes to understand neurasthenia as central to the disciplinary skirmishes between established alienists (like Van Deusen) and up-and-coming neurologists (like Beard and Mitchell). At stake in this contest was the very future of American psychiatry, and Schuster shows how neurasthenia effectively presided over the shift from asylum-based theories and therapies, to those which were more firmly rooted in scientific research (and which would ultimately usher in the reign of psyche over soma in the twentieth century).

At the center of the book lie three chapters which further illuminate neurasthenia’s complicity in phenomena which range from debates over Christian Science to the genesis of the Arts and Crafts Movement in America. Chapter 3, for example, suggests that neurasthenia played a pivotal role in helping Americans negotiate tensions between faith and science that, in the late nineteenth and early twentieth centuries, often saw physicians pitted against advocates of spiritual therapies, with neurasthenics “caught in the middle” (69). As Schuster observes, “moral” therapies of the sort championed by Mary Baker Eddy “must have represented an attractive alternative to undergoing six bedridden weeks of Mitchell’s rest cure” (71), and so neurasthenia became a crucial site of competition, confrontation—and, sometimes, collaboration—between the avatars of medicine and religion.

Collaboration is, in many ways, the keynote of the neurasthenic story as Schuster tells it, and in his fifth chapter—by far the strongest in the book—he more fully examines the ways neurasthenia cooperated with a staggering number of discourses in the late-nineteenth and early-twentieth centuries. Schuster reminds us here that neurasthenia was a physically debilitating disease, the enervating effects of which often left its sufferers incapable of sustained activity or meaningful productivity. Such a condition was anathema to a nation devoted to vigorous capitalist enterprise, and so a “physical culture movement” materialized to disarm the threat at seemingly every level. Neurasthenia became, for example, an “educational boogeyman,” prompting a curricular transformation which sought to balance “rigorous [but devitalizing] academics with exercise” (115); it served as the impetus behind America’s acceptance of “muscular Christianity,” which sought to allay fears that America had become a deeply “enervated nation where men had lost their manly spirit” (122); it facilitated the emergence of the American Arts and Crafts Movement, which, with its emphasis on artisanal activity, became a “therapeutic bastion against neurasthenia” (129); and it operated as an unlikely agent in the rise of the national parks system which, inspired by figures like John Muir, provided space for Americans to return to nature and its stores of “vital nervous energy” (135). Indeed, as Schuster puts it at one
point, with some degree of understatement: “neurasthenia was not just a medical diagnosis” (161).

To be sure, readers will encounter a few points in this study which strain credulity—moments where Schuster applies a cause and effect logic that assigns to neurasthenia an impossibly powerful role in shaping individuals and ideas. In Chapter 4, for example, Schuster addresses neurasthenia’s part in the politics of gender by examining the lives of Amelia Gere Mason, Sarah Butler Wister, and Charlotte Perkins Gilman. He concludes that, for each of them, their “personal struggle with the disease led them to realize that for women to live healthy, happy and comfortable lives, gender roles needed to be expanded to allow them greater opportunity to follow their interests and talents” (110). Certainly, neurasthenia may have amplified or even crystallized this realization, but it is not clear that the disease produced it (there is, for example, ample evidence in Gilman’s case that such an epiphany occurred long before her well-documented struggle with postpartum depression and the neurasthenia which ensued).

While in instances like this, Schuster may seem to go too far, there are other ways in which he doesn’t seem to go far enough. At times, one senses an unwillingness on the author’s part to engage with some of the more troubling—and more consequential—connections between neurasthenia and the discourses of its day. For example, as Beard originally theorized it, neurasthenia was a disease that characterized and was only available to a very particular kind of American: ones who had the “fine, soft hair [and] delicate skin” of the white upper classes whom he treated (Beard, *American Nervousness* 26). This coordination of America’s most sophisticated and “civilized” disease with a narrowly and deliberately circumscribed set of biological traits helped to underwrite, among other things, the eugenicist thinking that emerged in the late nineteenth century and reached its zenith in the twentieth. Though Schuster does briefly gesture toward the relationship between neurasthenia and racial politics in his second and fifth chapters, he avoids a sustained consideration of its implications, leaving a significant lacuna in an otherwise compelling narrative.

These complaints aside, it should be noted that throughout the study, Schuster’s command of the archive and his interdisciplinary facility are impressive. He moves seamlessly between the worlds of medicine, literature, advertising, and religion (among others) to produce a wide-ranging but nuanced study of neurasthenia that offers us new ways to appreciate it as a particularly rich site for scholarly study. *Neurasthenic Nation* takes its place in a venerable genealogy that reaches back to the pioneering efforts of F. G. Gosling and Barbara Sicherman, and it should provide modern scholars with a reliable platform upon which to further develop our understanding of a disease that rightly continues to claim our attention.

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