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While her work was published before this presidential season’s political arguments concerning women’s healthcare, Kaara L. Peterson’s work nevertheless nicely comments on the ongoing history of the problems of representing the female reproductive body. That is, then and now, to be a woman is a ‘preexisting condition,’ a pathological state.

Kaara L. Peterson’s monograph *Popular Medicine, Hysterical Disease, and Social Controversy in Shakespeare’s England* is a rigorous study of the history of gynecological medicine and the representation of uterine ailments on the Renaissance stage. While indebted to Jonathan Sawday, Thomas Laqueur, and especially Gail Kern Paster, in her discussions of female anatomy, the isomorphic sexual model, and the unstable humoral body respectively, Peterson discovers new and interesting ways of reading and discussing the poetics and rhetoric of early modern medical practice.

Peterson nicely offers a history of medical thought beginning with the Greek physicians, but more importantly she notes the contentions and disagreements between these early doctors on the nature of the womb. When she moves into early modern popular beliefs, her study focuses more on representations of the uterus and uterine pathology than on realistically documented cases of actual afflictions. This is an important move as it allows her to more objectively examine the (mis)information and hackneyed ideas found within well-known playtexts in relation to increasingly bizarre medical cases. At the same time, her work on the representations of gynecologic complaints in popular tragedies comes across as even more poignant and actualized due to her ability to weave together disparate sources.
Her first chapter adroitly analyzes three lines from *King Lear* concerning ‘hysterica passio’ and ‘the mother,’ lines that have been exhaustively studied by Janet Adelman and Coppelia Kahn in their psychoanalytic and feminist readings and Gail Kern Paster in her humoral treatment of the play. Peterson does not disagree with the suggestion of these major critiques that Lear is delusional and feminized, but argues for a closer examination of how and why scholars agree on Lear’s psychical illness. Peterson takes issue with the incorrect and circular logic in many editions of Shakespeare in which Lear’s lines are glossed as the even more problematic and imprecise term *hysteria*. This conflation and elision of terms and ailments artificially diagnoses a male monarch and patriarch with a decidedly feminine disease, when Shakespeare’s source - Samuel Harsnett’s *A Declaration of egregious Popish Impostures*, (1603) - ironically has a male character (both a dolt and charlatan) misdiagnose himself with the mother. Peterson argues that men cannot suffer *hysterica passio*, not even King Lear. Thus, Peterson makes a larger call for a return to close studies of Shakespearean sources and more accurate annotations for Shakespeare’s terms.

The second chapter moves into one specific and troubling affliction of hysterical passion: the ‘deceitful symptoms that mimic death’ (p. 72). She commences with the ending of *Lear*, when the king (again) misdiagnoses, this time believing that Cordelia may still be breathing, only appearing dead. While Lear cannot revive Cordelia, in medical treatises many hysterical syncopes could be revived and, if not, buried after a reasonable three days’ wait. Peterson submits several fascinating cases of this morbid symptom, which articulates her historicist reading of Thaisa’s death and revivification after childbirth in Shakespeare’s *Pericles*. This is followed by Capulet’s misdiagnosis and speedy burial of Juliet’s body. Linking female sexuality and pathology in popular works, Peterson then shifts toward the *Duchess of Malfi*’s literal strangulation of the Duchess at her brother Ferdinand’s request, after the more figurative uterine strangulation of the sexually desirous woman. Even more compelling, Peterson twins Ferdinand’s lycanthropy and incestuous desires with his twin’s seemingly innocuous sexual desire for her husband. Even Desdemona, chaste as she may be, has the physical symptoms of ‘the mother’ and an inordinate desire for Othello. Peterson offers nuanced close readings of how female desire leads to death, and that disease begins and ends in the female body.

The third chapter offers a gripping survey of themes of female authorship, female anatomy, and humoral theory within revenge tragedies. Peterson introduces anatomical drawings of female reproductive organs alongside medical representations of man as *microcosmos* and
as the uterus as a world unto itself, so that the female body ‘contains literally another world within a world’ (p. 112). The womb, with its sympathetic control over the other organs and passions, authors the woman’s role, and Peterson links this with the common trope of female characters composing correspondence written in their own blood. This chapter nicely surveys this recurring image of female authorship in which the body provides both the text and context of the composition from Thomas Kyd’s *The Spanish Tragedy* to George Chapman’s *Bussy D’Ambois*, Shakespeare’s *Titus Andronicus*, John Beaumont and Thomas Fletcher’s *The Maid’s Tragedy*, and John Ford’s ‘*Tis Pity She’s a Whore*. Peterson connects this diminution and instability of the female body with the ineffective deeds of tragic heroines, and astutely reads both dramatic and medical texts as partaking in the creation of ‘blood letters’ (p. 138).

In her final chapter, Peterson turns to the revivification scene of *The Winter’s Tale*, to discover individual responses to the medical controversies concerning hysterica passio. Hermione, the ‘hibernating hysteric’ (p. 145), is the most dwelled upon character here, and rightfully so, but Peterson again offers a respectable survey of gynecological concerns on the Renaissance stage in several other plays: Shakespeare’s *Macbeth* and *All’s Well That Ends Well*; Thomas Dekker and Thomas Middleton’s *The Honest Whore, Part I*; John Webster’s *The Duchess of Malfi*; and Middleton’s *The Revenger’s Tragedy*. Again, what is impressive about Peterson’s work is her knowledge of the wealth of medical texts concerning gynecology and uterine pathology, and how she reads these texts into and alongside popular plays, interweaving different strands of thought into a cohesive and comprehensive set of attitudes toward the female body.

Her epilogue hints at an issue she raised early on in her work, the conflation and confusion over time between hysterica passio and hysteria, as we chiefly use the word today, by proposing a close reading of George Eliot’s *Gwendolen Harleth* having a ‘nervous attack’ during her performance as Hermione. Peterson’s work, erudite and challenging, yet compellingly readable, demonstrates that such archaic and quaint attitudes toward female reproductive issues still feel quite uncanny.