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Consulting Editor's Introduction

Medicine and Public Health in Modern Iran: Historical and Sociological Perspectives

Iran's health indicators have trended upwards since the end of the Qajar era in 1925. Political, institutional, and social changes after this period helped transition the country's epidemiological burden of disease from infectious to non-communicable disorders. A century ago, Iran lost up to a fifth of its population to the ravages of the Spanish flu. Today, Iranians succumb to diseases with a more insidious course in lieu of the dramatic and deadly epidemics that plagued its population in past centuries. The rise of cardiovascular, pulmonary, and cancer-related deaths together with increasing morbidity associated with more chronic metabolic and behavioral disorders are a byproduct of the country's urbanization, unprecedented food security, and growing life expectancy over the last one hundred years.²

The shifting disease burden notwithstanding, Iran's overall health indicators are rapidly catching up with those of developed countries thanks in part to an expanding workforce and improvements in medical education that began almost two centuries ago.³ Iranians have pioneered medical techniques and tools that have greatly reduced the complications of heroic interventions, such as minimally invasive surgery.⁴ Self-sufficiency in generic pharmaceutical production, vaccination, and

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¹Afkhami, "Compromised Constitutions."

²Forouzanfar et al., "Evaluating Causes of Death."

³Regional Health System (WHO), Health System Profile, 5–9.

⁴Minimally invasive surgery, a term coined by Dr. Parviz Kambin, is commonplace in today's medical circles, yet in the past spinal surgery was often difficult, and even if successful required long recovery times.

innovations in medical therapeutics and public heath are but a few of the factors responsible for changing the morbidity and mortality patterns in Iran. The country has also played a crucial role in shaping the global medical and public health order since its participation in the third International Sanitary Conference in 1866.⁵ In 1909 the Iranian government joined twenty-two other countries as a full member of the International Office of Public Health—the first permanent health organization created to track global epidemiological data and oversee international disease prevention efforts.⁶ Iran continued to play an active role in disease control, vaccine, and drug standardization policies in the succeeding Health Organization of the League of Nations and the World Health Organization, established in 1948.

Scholarship on medicine and public health in modern Iran has lagged behind other countries in the Middle East and North Africa despite Iran's sizable impact on the global biomedical discourse, innovation, and changing burden of disease. This can be attributed to a number of pervasive methodological and analytical shortfalls that have traditionally hobbled Iranian research in the social sciences and humanities. Subjective myopia, the over-lionization of pioneering figures, and the seeming unrelenting tyranny of structuralism are but a few of the criticisms.8 Fereydun Adamiyat, writing for this journal over fifty years ago, argued that Iranian historians lacked a "scientific method" and an adequate grasp of the research methodology in more technical branches of social history. This lack of familiarity with discipline-specific sources, concepts, and analytic instruments likely explains why historians and social scientists have, until very recently, largely shied away from working on themes associated with medicine, disease, and health in Iran. And also explains why some of the earliest works on the history of contemporary medicine and public health were written by physician-turned-Orientalists, such as Edward Granville Browne and Cyril Elgood, who were probably more comfortable with biomedical concepts and technical jargon. 10 Their Iranian successors, such as Mahmud Nadjmabadi—one of the first Iranian members of the International Society for the History of Medicine—and Abbas Naficy, were practicing physicians

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Innovations by Iranian surgeons such as Dr. Kambin have resulted in the creation of new tools and techniques that have greatly reduced the dangers of invasive interventions. See Kambin, "Diagnostic and Therapeutic Spinal Arthroscopy."

Afkhami, A Modern Contagion, 30-33.

⁶Ibid., 147.

⁷Gallagher, "Medicine and Modernity."

⁸Abbas Amanat characterizes modern Iranian historiography as failing to "provide any meaningful interpretation of the past" due to the moral and ideological distortions of the historical realities. Amanat, "The Study of History," 5; Afkhami, *A Modern Contagion*, 2–3. A large sampling of this largely uncritical commemorative culture in Iran's medical historiography can be found in Azizi, *A Collection of Essays*.

⁹Adamiyat and Ricks, "Problems in Iranian Historiography," 142–7. Abbas Amanat has pointed out that Adamiyat "is not free from some of the biases and misinterpretations of which he accuses others." See Amanat, "The Study of History," 10.

¹⁰Browne, Arabian Medicine; Browne, A Year amongst the Persians; Elgood, Safavid Surgery; Elgood, Safavid Medical Practice; Elgood, A Medical History.

whose interests primarily lay in chronicling the milestones and accomplishments of the past through translations, biographies, and commemorative works; an approach that persists among scholars within Iran today. 11 It can be argued that this state of affairs began to change in the 1970s with Byron Good's rigorous fieldwork and pioneering multidisciplinary use of socio-cultural and historical foundations to develop explanatory models for illness in Iran. 12 The last fifteen years, in particular, have witnessed an upsurge of excellent multidisciplinary works on medicine and public health in modern Iran. Some of the scholars who have examined the social, economic, political, and historical determinants of health and disease in Iran have also contributed to this thematic issue.¹³

A theme as broad as "medicine and public health in modern Iran" is almost impossible to fully encapsulate in one or even two issues of a journal. After all, the theme has linkages with a wide variety of fields outside of the traditional biomedical sciences and history, including (but not limited to) psychology, anthropology, sociology, health policy and even literary criticism. The articles selected for this issue reflect some of the current transdisciplinary scholarship on the evolution and impact of medicine and public health in modern Iran.

Willem Floor's "Qal'eh-ye Mehrāb Khān" closely examines the impact of leprosy in Iran. Using records from the country's first leprosarium, Floor shows the evolving disease, treatment, and policy paradigms in the country during the Qajar and Pahlavi periods. Bryan Sitzes's "Sanitized Modernity" sheds light on the neglected history of public health in rural Iran. His piece argues that statism, vertical decision making, and indifference to local sentiment in rural northern Khuzestan in the 1950s and 1960s led to the prioritization of economic goals and modernization through sanitization and the misallocation of medical services. Alex Keivahn Smith's "Integration of Mental Health Care in Rural Iran" takes a closer look at the evolution of Iran's rural healthcare system through Tehran's efforts to integrate mental health into the existing national primary healthcare framework in the agrarian areas of the country over the last several decades. His analysis shows how the government's policy of favoring pharmaceutical treatments over non-biological interventions, while helping overall health indicators, largely overlooked less debilitating disorders with somatic symptoms that prevail in these regions. Soraya Tremayne's "The Journey of Infertility" looks at the politics of reproduction in modern Iran, particularly the influence of state building and nationalist ideologies on state-sanctioned fertility policy and reproductive behavior. Tremayne links the evolving political views on population growth and the increasing takeover of infertility

¹¹Nadjmabadi, "Duktur Khalil Khan"; Nadjmabadi, "Les relations médicale"; Naficy, *La médecine en* Perse. Most of the articles on Iran's history of medicine and public health published by the Archives of Iranian Medicine between 1998 and 2014 were biographical in nature. See Azizi, A Collection of Essays. ¹²Good, "The Heart of What's the Matter"; Bash and Bash-Liechti, *Developing Psychiatry*.

¹³Afkhami, A Modern Contagion; Behrouzan, Prozak Diaries; Christensen, Drugs, Deviancy and Democracy; Ebrahimnejad, Medicine, Public Health; Ebrahimnejad, Medicine in Iran; Floor, Public Health; Homayounpour, Doing Psychoanalysis; Kashani-Sabet, Conceiving Citizens; Matthee, The Pursuit of Pleasure; Schayegh, Who Is Knowledgeable.

treatment by the public sector to the legitimization of assisted reproductive technologies by Shi'ite religious jurists. Finally, Emily O'Dell's "Performing Trans in Post-Revolutionary Iran" uses a similar lens to look at how Islamic legal discourse has affected gender reassignment policy and the representation of the transsexual body in modern Iran, particularly in theater and film. Through the analysis of groundbreaking theatrical and cinematic works, O'Dell sheds light on the function of the arts as a vehicle for social change and recognition of transsexuality in Iran today.

The multidimensional approach to medicine and public health highlighted in this issue will give readers a unique perspective on the relationships between social thought, institutional development, and the evolution of social structures in Iran in the modern period. On a personal note, my consulting editorship feels like the completion of an academic revolution that began as assistant to the Editor of *Iranian Studies* in 1997 (30, no. 1/2). Since then, we have witnessed an incredible growth in the field of Iranian Studies, particularly in the social sciences and humanities. It is my hope that this thematic issue will increase the discipline's appreciation of the significance of the burgeoning field of medicine and public health in Iran and encourage scholars to engage in the significant work that remains to be done.

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