J. Biosoc. Sci., (2010) **42**, 573–576

Book reviews

Genetics, Health Care and Public Policy: An Introduction to Public Health Genetics. By Alison Stewart, Philippa Brice, Hilary Burton, Paul Pharoah, Simon Sanderson & Ron Zimmern. Pp. 335. (Cambridge University Press, New York, 2007.) £38.00, ISBN 0-521-529-077, paperback. doi:10.1017/S0021932010000131.

Approaching the emerging field of medical genetics with a broad, interdisciplinary lens, *Genetics, Health Care and Public Policy* explores the issues that arise when genetics is used as a tool to prevent disease and to improve population health. The central theme of the book is that we must be aware of the relationship between genes and the environment, and more importantly, of how this relationship complicates our understanding of the ways that genetic disorders are diagnosed and treated. As the book explores the social and public policy implications for genetic research and testing, it clearly cautions researchers to examine the environmental and social factors that give rise to the actual manifestation of particular genetic diseases.

The book is organized into seven chapters: the first four give an evaluation of the scientific and technological aspects of medical genetics, while the last three give an evaluation of the social and public policy-related aspects of medical genetics. The book begins with an introduction to the multi-sectorial 'enterprise' of medical genetics; it follows with an overview of genetic science and technology at the molecular and cellular levels, and then gives an overview of genetic epidemiology at the population level. After an introduction to genetic disorders and testing, the book discusses the organization and development of genetics in the health services, with a specific focus on the United Kingdom. Finally, the book addresses the ethical and social aspects of medical genetics, and also discusses the implications for public policy and the legal system. Each chapter is well organized and contains a concluding section outlining further reading.

Overall, *Genetics, Health Care and Public Policy* is useful for gaining a broad understanding of the scientific and social aspects of medical genetics, and the book excels at explaining the biological basis of genetic research. Even though its description of genetic epidemiology can be heavy-handed and technical at times, the book provides a substantial overview of the United Kingdom's existing genetics-related health programmes and policies, such as the organization of clinical genetic services, and the provision of population screening programmes for genetic conditions like Down Syndrome and Cystic Fibrosis.

While the book is broad in scope, it lacks specific details and in-depth discussions of the more nuanced questions surrounding medical genetics, such as debates on informed consent, the use of genetic information by insurance companies, and the regulation of genetic testing and therapy. Furthermore, the book would not be adequate to gain a complex understanding of the theoretical issues surrounding medical genetics, such as medicalization, genetic determinism, or the use of genetics

in reproductive choice. Despite these drawbacks, the book provides a good introductory text for students looking to gain a strong foundation in the complex field of research and public policy that surrounds medical genetics.

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Living and Working with the New Medical Technologies. Edited by Margaret Lock, Allan Young & Alberto Cambrosio. Pp. 295. (Cambridge University Press, Cambridge, 2000.) £15.95, ISBN 0-521-65568-4, paperback. doi:10.1017/S0021932010000143.

This volume is functionally contradictive in its methodological manifestations and its objects of inquiry. The editors acknowledge this immediately, and these disagreements are to the reader's benefit because in differently defining their objects each chapter attempts to tease out a new facet of interaction between people and technology. Divided into three different broadly conceived sections regarding epochs and transitions, laboratories and clinics, and finally technology and bodies, the different scales of inquiry allow their chapters to overlap, intersect and contradict one another.

The first section takes as its object the construction of nature and culture dichotomies, and engages with the deployment of time as a unit of analysis. Rheinberger begins by discussing the change in molecular biological practice since the introduction of recombinant DNA, which allows the reading, writing and replication of DNA. This technology ushers in a transition in practice and understanding and, he argues, collapses the traditional ontological distinction between nature and culture because what we consider the *natural* order of our genetic structure can be rewritten into a literal *social* construct. Juxtaposed, Rabinow takes issue with the entire notion of an epoch or transition and the similarly absolutizing categories of culture, events and civilization. His argument is for a more refined nominalism to understand emergent forms and generate new understandings.

Material culture is extremely important to any anthropological endeavour and the second section attends to this. Mol's discussion – the best in the section – in particular describes how one disease, atherosclerosis, is performed differently by clinicians and laboratories resulting in multiple linked understandings. For the clinician and patient articulate it together through description and location of symptoms, whereas the pathologist sees it – under a microscope – as the thickened intima, calcification and loss of lumen in the vascular wall. For Löwy, the technology is randomized control trials and the influence of AIDS activists in getting desperate patients into AZT trials, arguing that they exposed the social relations of power inherent in a specific biomedical technology. Keating and Cambrosio turn their combined attention to the constantly active creation of diagnostic technologies and the politics of pathologists and clinicians in trying to establish universal diagnostic criteria for lymphomas and leukaemia. Finally, a plethora of biomedically unauthorized conditions like Gulf War Syndrome, Chronic Fatigue Syndrome and Satanic Ritual Abuse have been described as psychogenic manifestations of hysteria and Young disagrees, positing that they merely resemble one another, especially in aetiological origins.