

impede the passage of legislation. This framework is used to structure the book and to develop a rough typology into which the 16 considered countries are placed.

In the process of their study, however, the editors expose some pitfalls of the veto framework. They note that initially they anticipated that the higher the number of veto players and veto points in a country, the greater the number of possible impediments to passing legislation, and the greater the difficulty in introducing far-reaching reform, but that this was not the case. Instead, they found that countries with a greater number of veto points and players had adopted more extensive legislative change, whereas countries with fewer veto points and players had experienced difficulty in introducing sweeping changes. These ‘deviations’ from the veto model can be explained by what the editors call ‘political competition’, that is, the impact of the system of voting, the proximity to election time, and the propensity of politicians to compete for the votes of particular groups of people, on the policy-making process. The editors supplement their veto framework, therefore, with an account of political competition. In sum, this book is likely to become a standard reference for all those interested in pension reform in Europe.

University of Sydney,
Sydney, Australia

MYRA HAMILTON

doi:10.1017/S0144686X07006733

Jesse F. Ballenger, *Self, Senility, and Alzheimer's Disease in Modern America: A History*, Johns Hopkins University Press, Baltimore, Maryland, 2006, 256 pp., hbk £28.50, ISBN 13: 978 0 8018 8276 0.

Alzheimer's Disease (AD), named after German researcher Alois Alzheimer in 1907, is a dreaded affliction of our time. Not only do its causes and cure elude us, but it encapsulates an intense cultural fear about ageing itself. Historian Jesse Ballenger focuses on the modern self to address AD as an emergent crisis and describes how scientific expertise, gerontological advocacy, and American individualism combined to push AD to the forefront of the health research agenda. During the late 18th century, American physician Benjamin Rush considered dementia a natural consequence of ageing in the face of which older people could preserve their moral stature even as their incapacities grew. During the 19th and early 20th centuries, traditional values of moral selfhood gave way to the progressive, liberal soul of modern industry and science, prompting influential figures such as neurologist George Miller Beard and proto-geriatrician Ignatz Nascher to characterise senility as a pathological condition. Here Ballenger elaborates the scholarship of other historians of ageing, such as Carole Haber and W. Andrew Achenbaum, to claim that the contemporary problems of ageing developed as a consequence of modernity.

Ballenger is more original when he examines the transformation of the vague notion of senility into AD and accents issues of gender. While initially considered a disease suffered by patients too young to experience senile dementia, AD grew as a category that eventually colonised all cognitive losses associated with ageing.

So defined, AD galvanised the efforts of neuropathology, psychiatry, microscopy and pharmacology to act upon national health policy. As what Ballenger refers to as ‘the gerontological persuasion’ optimistically recast ageing as healthy and positive, dementia became an ever-greater stigma in 20th century American retirement culture. Here the book challenges readers to question whether AD is brain pathology with an indeterminate relation to ageing, or rather an expression of the ageing process, the causes of which can be multiple. As brain pathology, AD has been intensely researched and the different fields point to different primary causes. Neurochemistry theorised the cholinergic hypothesis, genetic research proposed that the risks of AD are traceable to genetic variables, and advances in microscopic technology have allowed it to probe, scan and display the brain, revealing the destructive effects of AD’s plaques and tangles. Treatments such as cholinesterase inhibitors and memory-medicines have, however, produced only moderate results in early-stage AD.

These chapters provide rich historical detail, but need balancing with a more prominent theoretical framework. Ballenger’s charting of the ‘discursive framework’ that has shaped AD research and treatment is valuable, but could have substantially benefited from the work of Bourdieu, Foucault, Hacking and Latour, amongst others who have engaged in social studies of science. Their critical literature on the practices of scientific fields examines the interplay of discourse, power and authority; all highly relevant to Ballenger’s positioning of AD as an exemplary case of the bio-politics of ageing. A wider perspective of the theoretical debates about the making of scientific truth in late capitalist society would both strengthen Ballenger’s core argument and provide a fuller structural background from which to discuss American neo-liberal health policy and the governance of risk, both crucial aspects of the current management of AD.

The book’s final two chapters consider some of the social and personal consequences of AD. During the 1980s, it became the focus of a well-publicised national advocacy campaign that promoted the disorder as a ‘killer’ that rivals cancer. Even President Reagan was not immune. Despite the apparent democracy of the disease, the campaign emphasised selective middle-class anxieties about productivity, ageing, health status and functionality. Here Ballenger is very sensitive to the ways in which dominant representations and metaphors of AD affect people – both those afflicted with it and those who care for them. Since large funding is pegged to research, care becomes secondary and AD communities are left adrift from the grand ideals of ‘medical triumphalism’. For those whose resistant voices are emerging from the AD communities, however, they are often overwhelmed by new literary and media representations of dementia that celebrate individual expression, creativity and entitlement. Here Ballenger suggests an important issue, which is that such genres tend to conflate all cognitive losses because of the impossible standards of our hyper-cognitive society, against which all manner of enabling narratives and technologies are brought to bear.

Self, Senility, and Alzheimer’s Disease in Modern America is a lucid and thoughtful history and a timely contribution to understanding how AD has altered the meaning of ageing. Ballenger digs beneath the story of a disease category to question the foundations of the modern self, where coherence, rationality,

performance, and memory have become the hallmarks of successful personhood. Such reflection will appeal to readers from all professional backgrounds as providing a way forward away from the medical pathologising, cultural stereotyping, and gerontological idealism that have dominated the AD experience.

Department of Sociology, Trent University,
Peterborough, Ontario, Canada

STEPHEN KATZ

doi:10.1017/S0144686X07006745

Robin Blackburn, *Age Shock: How Finance is Failing Us*, Verso, London and New York, 2006, 336 pp., hbk £19.99, ISBN 13: 978 1 84467 013 0.

This book in my view says nothing new. The author has already rehearsed many of the arguments in *Banking on Death* (Blackburn 2002). I do not understand where he is trying to take us, apart from the revision and repetition of a Meidner plan (Swedish socialist and an architect of the Swedish Wage-earner Funds) which he has repeated many times. The book is an unoriginal summary of issues in pensions, relying on quotes from and references to others.

The author summarises the never-ending litany of financial scandals, corruption, self-serving Chief Executive Officers and disgusting self-interest, all of which are intrinsic to the private system of pensions that prevail particularly in the United States and United Kingdom. For those who follow this trail of rip-offs and unapologetic merchants of self-aggrandisement, there is nothing original here. In fact the flaw of the book is that there is no theoretical framework to offer a deeper understanding of the system; just one thing after another in a sometimes tiresome, descriptive and revelatory manner. Tut-tutting is all very well, as page after page reveal yet more outrageous episodes. The author's 'analysis' could not hold a candle to something like Charles Kindleburger's book, *Manias, Panics and Crashes: A History of Financial Crises* (Kindleburger 1996), in which there is a riveting attempt to explain rather than just describe. There is no reference to this in the book.

The numerous typos are annoying, and the reference in the index to Chile does not exist. I also wish that pension experts, of whom I guess Blackburn is now one, would ensure that their references to the seminal and destructive World Bank (1994) report, emphasised the word 'and' in its subtitle: *Averting the Old Age Crisis: Policies to Protect the Old AND Promote Growth*. The fact that the author has missed this suggests to me that he does not understand the real arguments for private pension provision. Financial scandals are neither here nor there given the economic growth arguments proposed for the extension of private pensions, and the subsequent collapse of the thesis on its own terms.

After the first 264 pages in this vein, the author repeats his obsession with Meidner. I have heard Blackburn suggest that Meidner should have received the Nobel Prize for Economics. And he's right: the author's attempt to update the Swedish proposals for share levies, localised investment agencies and radical investment agendas deserves discussion. But he has already discussed them, and I don't see what they have to do with pensions *per se*. That is the mistake of the book. Blackburn is laying out a transformation of relationships between