

come to exist (albeit for a limited time) at the National Cancer Institute of “New Deal” America.

Buhm Soon Park offers a most useful, although strongly internalist, account of the history of the NIH, addressing a series of tensions that shaped its activities and organization including that between the interests of researchers and the wider programme of the NIH and the need to structure the Institutes along categorical and disciplinary lines. These familiar themes clearly invite comparison with other institutions within and outside the USA. Much the same can be said of Gerald N Grob’s fascinating survey of the NIH’s activities with regard to mental health in the important period 1949–65. Arguing for the importance of a historical focus upon instruments, Darwin H Stapleton explores the interdisciplinary interactions of biomedicine and engineering in the development of new material technologies at the Rockefeller Institute for Medical Research (Rockefeller University, New York). In contrast, Stuart Blume places the work of the NIH in a wider social context within his analysis of vaccine innovation in the latter half of the twentieth century. Susan Lederer, too, adopts a broader perspective in her essay exploring the National Heart Institute’s reaction to the first successful heart transplant (undertaken in South Africa by Christiaan Barnard in 1968). Lederer convincingly demonstrates that heart transplantation, as well as the development of the NIH more generally, occurred against, and was mediated by, wider socio-cultural discourses predominant at the time (not least those of race). Lederer reminds the reader that only in this way can historical analysis address the “spectre of medical inequality” that haunts the development of biomedical science in the twentieth century (p. 166). This spectre, if such it is, is also addressed by Daniel J Kevles in a pertinent account of the contemporary debate around commerce, private interest and the patenting of genomic information which acknowledges the past, present and hoped for future role of the NIH in assuring that biomedical

knowledge of nature “is to be publically shared” (p. 203).

Taken as a whole, this volume is eclectic and lacks an obvious common agenda, a fact reflected in the disappointingly short introduction. There is no explicit manifesto here to shape the pursuit of late-twentieth-century biomedical history, but there is plenty to inspire such a pursuit. Each of the essays offers a useful, often pertinent, and always interesting contribution to the historiography of twentieth-century biomedicine and invites more to follow.

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**Majia Holmer Nadesan,** *Governmentality, biopower, and everyday life*, Routledge Studies in Social and Political Thought, No. 57, New York and London, Routledge, 2008, pp. ix, 248, £60.00 (hardback 978-0-415-95854-7).

Overhearing one of my colleagues say that Foucault’s concept of biopower was “so last century”, I was tempted to slide this book across the table. Powerfully, it underlines how social and political theorists have come to appreciate biopower’s place at the heart of contemporary political battles and economic strategies. Indeed, the great strength of this book is its revealing how today’s “biopolitical problematics are simultaneously economic ones” (p. 182). Biopower, then—Foucault’s historicized notion of the administration of biological life so as to optimize and multiply it—has never been more “now”. Yet, in at least one respect the concept *is* last century, and it is on that account that Majia Nadesan in fact justifies her monograph: it is not that Foucault’s concept has been smitten, she points out (and makes abundantly clear in the course of her text); rather, it is that Foucault himself unfortunately died too soon to comment on the nature of biopower’s operation in late-twentieth-century neoliberal

societies. For him, the exemplification of biopower was within older liberal frameworks of knowledge, such as psychoanalysis and social anomie, which he saw as having gained credence among the public, insurers, and the state. Thus biopower's operation was understood by Foucault as an extension of what he perceived as beginning in the eighteenth century when liberal mentalities on the conduct of governing peoples' conduct—i.e., “governmentalities”—began to target individual and collective biological life through social and scientific engineering, expert administration, and everyday technologies of the self. Ever seductive, biopower's operation continues to shape personal, interpersonal and institutional conduct. What is different today, though, is the nature and apprehension of the social space in which it operates. Especially since the 1990s with the molecularization of all life (simultaneous with globalization, the eclipse of nation-state social welfare, and the exerting of biopower by corporations), complex phenomena such as human disease have been transformed into biological assets and costs that can be represented and manipulated wholly in market terms. Hence conditions such as depression, anxiety, substance abuse, and obesity get coded as social and economic risks with calculative costs for industry and the state—risks and costs that must be administered. It is this transformation of biopower's operation by market-oriented neoliberal governmentalities that preoccupies Nadesan. Genetics, psychopharmacology, brain imaging technologies and other new modes of biosocial subjectification and commercial gain are among her illustrative means.

Unlike Nikolas Rose's works on biopower and governmentality, which Nadesan heavily relies upon, her script is more politically exacting, and altogether more morally trenchant in an old-fashioned socialist sort of way. Perceiving biopower less as a technology of optimization (merely for “the productive, cybernetic administration of life,” [p. 3]) than a force that “both privileges and marginalizes,

empowers, and disciplines” (p. 5), she holds it to “serve the interests of capitalist accumulation and market forces by eliciting and optimising the life forces of a state's population, maximizing their capacity as human resources and their utility for market capitalization” (p. 3). Biopower, in short, is seen to supplement and extend the mighty power of capital in its expropriation of value from the relations of production. But, that said, *Governmentality, biopower, and everyday life* is hardly vulgar Marxism writ fancy. On the contrary; what further distinguishes it from cognate studies is its emphasis on the “web of entanglements and sites of contradiction and conflict evident in the state itself” (p. 4), including constraints on the discussion of these contradictions in neoconservative regimes. Complicating matters still further is the fact that neoliberalism's characteristic reliance on “government from a distance” as well as on biopolitical technologies of the autonomous self, does not preclude the continued operation of older forms of discipline and “sovereignty”. Nadesan is in fact much exercised with differentiating newer from older configurations of “sovereign power”, “disciplinary power”, “pastoral power”, and “biopower”.

Not a book for the theoretical faint of heart, *Governmentality, biopower, and everyday life* is written for Nadesan's peers and makes few concessions to those who might happen to be listening in. Even the analytic of governmentality at the heart of the study—for Foucault, the means “to explore the regularities of everyday existence that structure the ‘conduct of conduct’” (p. 1)—remains fairly elusive. Only slightly less so is the actual purpose of “governmentality studies”, the esoteric pursuit of perspectives on liberalism and neoliberalism, it seems. Governmentality, the reader can only infer, is a difficult-to-specify and changing assemblage of rationalities, institutions and technologies that might or might not be distinguished from “government”, and can probably never be disassociated from biopower. Comprehension is not much helped by a clunky social science

prose style that at times breaks unexpectedly into bullet points.

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**Andrew T Price-Smith,** *Contagion and chaos: disease, ecology, and national security in the era of globalization*, Cambridge, MA, MIT Press, 2009, pp. x, 281, £30.95, \$48.00 (hardback 978-0-262-16248-7), £15.95, \$24.00 (paperback 978-0-262-66203-1).

“Health is the fulcrum of material power, and therefore it is central to the interests of the modern sovereign state” (p. 1). With this statement, Andrew Price-Smith begins his recent extension of republican security theory, *Contagion and chaos*: analysing the effects of infectious diseases on a nation’s economy, security, and international influence. The author hopes to encourage interdisciplinary discourse, “bridging the epistemic schisms that have deepened over the decades as a result of disciplinary specialization” (p. 4).

Price-Smith, an assistant professor in the Department of Political Science and Director of the Project on Energy, Environment, and Global Security at The Colorado College, has written about these concepts previously in *The health of nations: infectious disease, environmental change, and their effects on national security and development* (Cambridge, MA, MIT Press, 2002) and is the editor of *Plagues and politics: infectious disease and international policy* (2001). The book being reviewed is based on work done while the author was with the Program on Health and Global Affairs, Centre for International Studies, University of Toronto, where he completed his PhD.

The author proposes five hypotheses to be explored in this volume where he applies republican security theory. First, epidemic disease may exacerbate prosperity, cohesion, and security of countries. Second, emergence

of novel pathogens may promote conflict between countries. Third, criteria of pathogens that threaten national security include: lethality, transmissibility, fear, and potential for economic damage. Fourth, warfare contributes to the burden of infectious diseases; and fifth, health security is grounded in republican theory and therefore integrally connected to national security. Price-Smith devotes chapter 1 to the theory of republicanism, reaching back to ancient Greece and Hellenic sources. While this development may be compelling to an academic consideration of the topic, public health practitioners will become impatient with the relatively dry historical development.

To support the second hypothesis, in chapter 2 the author uses the plague (1348), smallpox, yellow fever, and the 1918–1919 influenza pandemic to illustrate the theory of the impact of epidemic disease on sovereign states. This theoretical development is followed by chapters that consider influenza, HIV/AIDS, mad cow disease, and SARS. The volume concludes with chapters on the effect of war on disease, and the interrelationship among health, power, and security. In 1995, Dr David Satcher introduced a new journal *Emerging Infectious Diseases* with an articulation of major aetiological agents and the burden of emerging and re-emerging infectious diseases; Price-Smith’s third hypothesis extends these criteria to include fear and potential for economic damage.

As with any interdisciplinary study, “disciplinary specialists” must be educated to another’s language, vocabulary, and thinking, then deciding to accept the purported linkage. The writing style is that of a social scientist, conversational, with several footnotes and references. As a consequence, many statements lack the precision and level of evidence usually required for medicine and public health. An example is the author’s lack of distinction between incidence and prevalence. In a discussion of UNAIDS 2006 *Report on the global AIDS epidemic*, the author states, “. . . UNAIDS prefers to emphasize the point that the epidemic appears