

the contested nature of therapeutic research amidst new systems of knowledge production (the clinical trial), and the development of biomedical ethics as a form of governance and a set of practices. By examining how Saenger's work was supported, justified, experienced, rationalised, scrutinised, and judged, Kutcher also helps us reconsider how we make sense of historical medical scandals, both in their initial contexts, and as they have been understood and used by later actors.

The book begins with three short chapters establishing the context for Saenger's TBI work and the themes of Kutcher's analysis. The first outlines how the clinical trial came to dominate post-war medical investigation, while the second reviews medical discussions among mid-century medical authorities about what constituted ethical research conduct and how it could be sustained. Kutcher then reviews the melding of military and medical questions in the 1950s discussions of radiotherapy for sick patients, and of radiation injury to healthy soldiers. The bulk of the book's analysis, though, comes in its middle section, which considers what the TBI studies meant to multiple constituencies, including the doctors and researchers who conducted the studies, and the peer review committees that recast the studies to pass new governmental research regulations. Chapter 5 is especially insightful and original, using one patient's experience to show what TBI meant to and for those who served unknowingly as 'proxy soldiers'. Here, Kutcher's medical expertise enhances his analysis, as he reconstructs patient experience through fine detail and thoughtful speculation. Finally, the book concludes by tracking how Saenger's work was recast yet again by those criticising it, first in the exposés of the 1970s and then again in the 1990s by a new set of authorities – the bioethicists of the Advisory Commission on Human Radiation Experiments (ACHRE). Kutcher parses the ACHRE's deliberations to show that bioethicists also found it nearly impossible to determine whether Saenger's work was medical or military, whether it was motivated primarily by therapeutic concerns or

by research questions, and what ethical criteria could be used to judge past conduct. The fluid identity and ever-changing nature of the TBI studies meant they defied historical and ethical attempts to classify them, and ultimately, to deliver a definitive verdict on their moral status. That fluidity is far from unique in biomedicine – which, as Kutcher concludes, means that the prescriptive rules usually offered by bioethics 'are limited in what they can accomplish' (p. 211).

In *Contested Medicine*, Kutcher has produced a book that successfully demonstrates how researchers, institutions, and ethical authorities managed (or failed to manage) the 'tensions between research imperatives and therapeutic necessities' (p. 6) characteristic of biomedicine. At times, Kutcher summarises what his sources say when the reader might want to hear more from the source materials themselves, but on the whole, the book is very well written.

Contested Medicine will thus be a valuable resource for scholars interested in post-war medicine and science and, though its focus is on an American story, the book's analytical framework is strong enough to make it of interest to those who work on other national contexts.

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James S. Olson, *Making Cancer History: Disease and Discovery at the University of Texas MD Anderson Cancer Center* (Baltimore: Johns Hopkins University Press, 2009), pp. xiv + 369, £19.00/\$35.00, hardback, ISBN: 978-0-8018-9056-7.

This is a book unsure of its audience. Olson is a history professor in Texas, and has written a fine history of cancer for historians and students – *Bathsheba's Breast: Women, Cancer and History* (Baltimore: The Johns Hopkins University Press, 2002), and thus one expects good things of an in-depth study of

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one of the largest and most significant cancer research institutions in the world, the M D Anderson Center in Houston. Yet this book is chiefly a series of personal stories, and these small pieces of its long and diverse history are given little by way of analysis or contextualisation in any wider story of medical research or cancer care. The style of writing is often as one finds in popular histories of science, of *The Man Who Changed Everything* type, slightly sentimental and over-dramatised.

Making Cancer History does contain some valuable and detailed vignettes of key pieces of research and innovations in care structures ranging from trial design to patient in-hospital shopping facilities. The section discussing developments in on-site and after-care services in the 1970s and 1980s, as patients were increasingly encouraged to approach medical services as consumers, is especially engaging, as Olson traces out the happy marriage between volunteer services and the desires of patients and survivors to have places to shop or receive a beauty treatment within the hospital complex; and the epilogue, the story of Olson's own long history with cancer, is a fine piece of autobiography that would make excellent study material for any junior doctor. Yet in many places the writing abruptly changes style, and the inserted stories of personal horror are not connected with the more scholarly case studies – there is no overarching pattern in which to place these patches so as to make sense of vividly described amputations and haemorrhages.

Further, Olson offers one-page histories of a century of surgery, two millennia of theories of cancer, and fifty years of industrial chemical research, juxtaposing these with tales

of dying patients who were ill twenty years too early to be saved or who bore excruciating pain to no good effect because they were born in the wrong century – at these points it is not clear whom Olson is addressing or of what he is trying to persuade them. Where analysis is offered of the significance of an innovation in research or approach to treatment, it is often borrowed from other writers who have covered the same ground with as much rigour and more historiographical care, such as John Laszlo, *The Cure of Childhood Leukemia: Into the Age of Miracles* (New Brunswick: Rutgers University Press, 1996) who is heavily yet incorrectly cited in Olson's chapter on the rise of medical oncology in the late 1960s – and Peter Keating and Alberto Cambrosio – see, for example, 'From Screening to Research: The Cure of Leukaemia and the Early Development of the Co-operative Oncology Groups, 1955–1966', *Bulletin of the History of Medicine*, 76 (2002), 299–334.

There are pockets of useful information in *Making Cancer History*, mostly drawn from Olson's interviews, such as the impact of desegregation on the hospital, and policy makers' arguments with researchers over the implementation of new legislation in 1971 designed to protect the rights of humans used as experimental subjects, but this is not a book to be read cover to cover, and the reader is offered no satisfactory exploration or explanation of the role of the MD Anderson Cancer Center in international efforts to make cancer history.

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