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In the Journals, October 2012 - Part 2

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By Aaron Seaman

This is the second part to what Lara Braff posted last Thursday ([linked here](#)). So without further ado...

[Biosocieties](#) has a range of articles this month, revolving around issues of citizenship, biologized or no; medical imaging and technological futures; and discursive positionality in both mass messaging and intimate interactions. In addition, there are a range of reviews of publications discussing various aspects of autism.

[US biobanking strategies and biomedical immaterial labor](#)

Robert Mitchell

Many commentators seem in agreement that the 'promise' of the genomics revolution is to be realized through the creation of large-scale biobanks: that is, collections of human tissue and associated data from populations ranging from tens to hundreds of thousands of subjects. Yet obtaining access to such large volumes of biospecimens and data is often difficult, and especially so in the United States. Drawing on published material and interviews with biobank managers conducted between 2006 and 2011, this article provides a tripartite typology of strategies currently employed by US biobanking advocates, distinguishing between de novo, networking and repurposing biobanking strategies. This typology emphasizes the economic aspects of biobanking, and emphasizes as well a conflict between two different understandings of biological citizenship: on the one hand, a mode of biological citizenship that links donation to a form of clinical labor in order to enable access to tissues and health biographies of individuals; on the other, an approach to biovalue that seeks to avoid both clinical labor and biological citizenship in favor of protocols designed to extract biovalue unobtrusively from already existing patterns of health-care and life by means of what I call 'biomedical immaterial labor'.

[Resisting the revelatory scanner? Critical engagements with](#)

[fMRI in popular media](#)

Louise Whiteley

Functional neuroimaging is charged with revealing thoughts and intentions, the source of mental dysfunction, and the basis of fundamental human traits. Critics have argued that situating the mind in a brain scan risks essentializing contested social and psychiatric categories, encourages deterministic perspectives, and diverts attention from non-biological ways of understanding the mind. Here, I review these critical discourses and ask whether they are reflected in popular media, through a discourse analysis of print and online reports of functional neuroimaging research deriving primarily from the United Kingdom. In contrast to earlier studies, I found diverse challenges to the expertise of the scanner, ranging from explicit polemic to assertions of lay expertise. Brain images themselves were often manipulated, mislabelled or omitted in favour of photographic representations of mental function, posing new questions about the rhetorical power of the scan. These findings caution against premature conclusions concerning the reductive impact of popularized neuroimages, but I also argue for caution regarding the reach and novelty of the critical engagements I observed. Finally, I argue that qualitative analysis of media texts is essential to understanding the developing discourse surrounding functional neuroimaging, and discuss possible implications for science communication and public engagement practice.

[Holding blame at bay? 'Gene talk' in family members' accounts of schizophrenia aetiology](#)

Felicity Callarda, Diana Roseb, Emma-Louise Hanifb, Jody Quigleyc, Kathryn Greenwoodd and Til Wykes

We provide the first detailed analysis of how, for what purposes and with what consequences people related to someone with a diagnosis of schizophrenia use 'gene talk'. The article analyses findings from a qualitative interview study conducted in London and involving 19 participants (mostly women). We transcribed the interviews verbatim and analysed them using grounded theory methods. We analyse how and for what purposes participants mobilized 'gene talk' in their affectively freighted encounter with an unknown interviewer. Gene talk served to (re)position blame and guilt, and was simultaneously used imaginatively to forge family history narratives. Family members used 'gene talk' to recruit forebears with no psychiatric diagnosis into a family history

of mental illness, and presented the origins of the diagnosed family member's schizophrenia as lying temporally before, and hence beyond the agency of the immediate family. Gene talk was also used in attempts to dislodge the distressing figure of the schizophrenia-inducing mother. 'Gene talk', however, ultimately displaced, rather than resolved, the (self-)blame of many family members, particularly mothers. Our article challenges the commonly expressed view that genetic accounts will absolve family members' sense of (self-)blame in relation to their relative's/relatives' diagnosis.

[Pills, pluralism, risk and citizenship: Theorising e-pharmacies](#)

Bianca Brijnath

This article uses the theoretical concepts of risk, imagination and pharmaceutical citizenship to understand the growing popularity of e-pharmacies and online health-seeking. I start with discussing how rapid social and economic forces such as globalisation, the rise of diasporic communities, increased use of technologies, changing notions of citizenship and risk, and the commodification of health have seen the rise of e-pharmacies both licit and illegal. Then I explicate the links between the social imagination and pluralism; the relationship between e-pharmacies, risk and the state; and finally how the aim of achieving pharmaceutical citizenship prevails over national citizenship and the risks associated with using e-pharmacies. I conclude there are three ironies in this paradigm: (i) the common reasons for drug-purchasing among e-pharmacy consumers (associated as being technologised, high income earners) and drug consumers in low-income, poorly regulated societies; (ii) the irony of pluralism and hybridism – wherein drugs are marketed as 'exotic' and 'unknown' but embedded in scientific knowledge and credibility; and (iii) the irony of risk and the role of the state – wherein people prefer the unknown, that is, the risk of drugs bought online rather than the risks of the known, that is, the capacity of the state to actually and sufficiently care for its populace.

[Human development, nature and nurture: Working beyond the divide](#)

Iliina Singh

In this essay, I explore what social science might contribute to building a better understanding of relations between 'nature' and 'nurture' in human development. I first outline changing scientific

perspectives on the role of the environment in the developmental and behavioural sciences, beginning with a general historical view of the developmental science of human potentials in the twentieth century, and then reflecting on a call to arms against 'toxic stress' issued in 2012 by the American Academy of Pediatrics. I suggest that such post-genomic programmes of early intervention, which draw on emerging scientific theories of organismic plasticity and developmental malleability, raise significant social and ethical concerns. At the same time, such programmes challenge social scientists to move beyond critique and to contribute to new developmental models that deconstruct the old divide between nature and nurture. I conclude by describing efforts that posit new terms of reference and, simultaneously, new kinds of research interests and questions that are not founded upon, and are not efforts to resolve, the nature–nurture debate.

The current issue of the [Journal of the History of Medicine and Allied Sciences](#) is out with several articles, including an historical exploration of early X-ray technology that reads interestingly up against Whiteley's piece on fMRI technology above.

[The Decrease in Socioeconomic Differences in Mortality from 1920 to 2000 in the United States and England](#)

William G. Rothstein

This study found that the effect of socioeconomic status (SES) on mortality decreased steadily during the twentieth century. It examined trends in age-specific adult mortality rates for employed men and infants in a number of social classes based on occupation in England and Wales and for black, white, and immigrant nationality groups of men, women, and infants in the United States. Both countries experienced continuing decreases in mortality rates and narrowing of SES differences in mortality rates from 1920 to the end of the century. Most of the decrease and narrowing in England and Wales occurred before the establishment of the National Health Service and the unprecedented improvements in clinical and preventive medicine after midcentury. Current cancer mortality rates in both countries show no consistent relationship with SES. The very low mortality rates of some low SES immigrant nationality groups in the United States throughout the century demonstrate that other social factors can have a greater effect on health than SES.

[Dietary Advice and Fruit-Eating in Late Tudor and Early Stuart](#)

[England](#)

Paul S. Lloyd

This article investigates an apparent contradiction between the growth in the popularity of fruit-eating in late Tudor and early Stuart England, and the generally held contemporary medical view that many types of unprocessed fruits were inappropriate to a healthful diet. The first section analyzes a broad range of household accounts and other sources of evidence to determine the extent to which fruit formed part of the daily fare of the English population. The second section looks at the advice offered in a broad cross-section of dietaries and botanical works with regard to the eating of fruit. Finally, as the manners in which fruits were eaten are discussed, it will become clear that they could often be accommodated within the humoral body, and that there was less of a discrepancy between dietary advice and fruit-eating than may seem to be the case.

[The Early Clinical X-Ray in the United States: Patient Experiences and Public Perceptions](#)

Matthew Lavine

The first x-ray machines were large, loud, sparking, smelly, and ostentatious devices, prone to mishap and injury even when fully under the control of the physicians who, in droves, invested money and prestige in them. Their bizarre and sometimes overwhelming presentation in the clinic reinforced the contemporary public understanding of x-rays as fantastically potent yet ambiguously helpful. As one of the icons of the new scientific medicine, x-rays bore much of the public's expectations for a technological panacea, a belief that was reinforced by the spectacle of their generation and their undeniable effect on the body. A quarter century later, refinement of the technology had made irradiation safer and more effective, but also made the operation of the machines themselves almost undetectable. This "domestication" of x-ray machines underscored their failure as a modern-day heroic medicine, while reinforcing an emergent understanding of radiation as a subtle, cumulative, and insidious threat.

[The Time and Place of Nostalgia: Re-situating a French Disease](#)

Lisa O'Sullivan

The history of nostalgia as a clinical category has many highly

specific national stories. This paper traces an aspect of this history, examining aspects of nostalgia's changing meanings in nineteenth-century France. Nostalgia was a disease triggered by displacement, which became medically and politically important after the French Revolution, when military surgeons encountered epidemics of nostalgia in the armed forces. Understood as a form of pathological homesickness, the category straddled environmental medicine and emerging ideas about insanity. The diagnosis became particularly important to Idéologue writers as a case study in regulating and redirecting the emotions, demonstrating the efficacy of their new "moral" treatments and an ability to generate patriotic attachment to the new nation state. Over the course of the century, nostalgia disintegrated as a medical condition reflecting a decline in environmental explanations for disease within medicine, and increasingly plastic meanings attached to nostalgic desire.

[Medical Anthropology](#)'s most recent issue offers us four new articles:

[Tackling Indifference—Clowning, Dementia, and the Articulation of a Sensitive Body](#)

Ruud Hendriks

In this auto-ethnographic study, I focus on a special form of clowning for people at an advanced stage of dementia. The miMakkus clown is presented as a specialist in contact with people with whom communication is no longer possible by the usual (linguistic, cognitive) means. I illustrate how the miMakkus clown tries to reach people with dementia, focusing specifically on the role of the sensitive body as an instrument for attunement. As I demonstrate, in their contact, the clown and the person with dementia are involved in a process of mutual articulation.

[Cyanobacteria Blooms: Maya Peoples between the Politics of Risk and the Threat of Disaster](#)

T. S. Harvey

In October of 2009 an outbreak of cyanobacteria in Lake Atitlán, Guatemala gained international attention and global news coverage with interests coming from environmentalists, microbiologists, and local health agencies. A significantly less well-known aspect of the crisis was the perceptions and predicaments of Maya (indigenous) peoples for whom the lake is

the primary source of life and livelihood. This research examines the communication of the public health risk of cyanobacteria to Maya peoples. Using an “ethnography of risk communication” approach, this work traces the circulation of the science of cyanobacteria and the construction of risk from government and public health translations through media transmissions to local Maya interpretations. The findings demonstrate how government and institutional translations (and media transmissions) of the science of cyanobacteria not only unwittingly produced misunderstandings about the health dangers but indirectly associated blame for the outbreak with indigenous peoples, calling into question their way of life.

[A Goat's Head on a Sheep's Body? Manufacturing Good Practices for Tibetan Medicine](#)

Martin Saxer

The production of Tibetan pharmaceuticals underwent a far-reaching transformation over the past decade. The introduction of good manufacturing practices (GMP) marked the beginning of rapid industrialization: new factories were built, and the companies re-oriented themselves to the requirements of the market. While officially regarded a great success, many doctors and pharmacists see GMP as fundamentally incompatible with traditional production methods and notions of quality. In this article, I address this incompatibility and examine where and how it affects the actual practice of producing medicines. While the problem exists, I argue that it does not stem from conflicting epistemologies but rather from the side effects of a quick and forced implementation, which often contradicts the spirit and letter of the regulations themselves. The case sheds new light on the way in which ideas about quality and safety, forged in the global arena, are locally recontextualized.

[Patterns of Persistence amidst Medical Pluralism: Pathways toward Cure in the Southern Peruvian Andes](#)

David M. R. Orr

When mental illness and related conditions strike among the Quechua-speaking peasant population of southern Peru, they open wide the question of who is best placed to offer the healing that families seek for their afflicted relative. Biomedical doctors and the traditional healers known as yachaqs are the two most commonly consulted sources of help. Yet most families show different patterns of persistence with each; they frequently give up

on biomedical assistance after the initial intervention but continue to consult a succession of yachaqs over considerable periods of time, even if the former has had some limited success and the latter virtually none. I draw on ethnographic fieldwork to show that explanations based on inaccessibility, cultural incongruence between patient and clinician, or stigma are ultimately inadequate; rather, it is necessary to delve into fundamental differences in how the two fields of healing are conceptualized by those negotiating them.

The current issue of the journal [East Asian Science, Technology and Society](#) includes two items of possible interest to Somatosphere readers.

One, a paper authored by Kimberly Kelly and Mark Nichter, entitled "[The Politics of Local Biology in Transnational Drug Testing: Creating \(Bio\)Identities and Reproducing \(Bio\)Nationalism through Japanese 'Ethnobridging' Studies.](#)" The abstract follows:

Next to the United States, Japan is the second-largest pharmaceutical market in the world in terms of expenditures. However, the regulatory issues and long clinical testing and approval time for drugs to be marketed in Japan continue to be stumbling blocks for foreign drugs in the Japanese market. In 1998, adoption of the International Conference on Harmonization (ICH) E5 guidelines by the United States, European Union, and Japan cleared the way for the use of data generated in one member region to be used in another for drug regulatory approval purposes—a practice termed “bridging.” In particular, the ICH E5 focused on a type of study termed “ethnobridging,” studies conducted on a drug-by-drug basis to look at the sensitivities of a drug to “ethnic factors.” Ethnobridging studies are drug trials specific to ethnic populations to assure safety, effectiveness, and dose specificity. In the last twenty years, such studies have almost always been required as part of the clinical data package needed for approval of Western drugs in the Japanese market. We examine the ways in which ethnobridging studies, based on an anthropologically questionable concept of ethnic factors as defined in ICH E5, have become a proxy for long-held cultural perceptions of “local biology” based on a notion of ethnic uniqueness and bioidentity in Japan. Ethnobridging studies, we argue, are more than venues for the production of scientific and clinical data. They produce data in concert with what Latour has termed “matters of concern,” are techniques of governmentality that advance the nationalist agenda of the state in citizens’ everyday lives, use pharmaceuticals as boundary objects and focal points of

communication between researchers and policy makers in receptive environments, and justify state regulation of transnational flows of pharmaceuticals in a lucrative market. This is achieved through a renewed sense of bioidentity and what it means to be Japanese among both in-country and overseas Japanese. We also call attention to emergent patients' rights groups in Japan exerting pressure on the government to reduce the drug lag and provide wider access to lifesaving treatments available elsewhere but not in Japan because of its onerous clinical trials system and ethnobridging requirements.

And, as I looked up the citation for Kelly and Nichter's article, I saw that the journal also was having a sub-issue, entitled "Subject Issue on Neuroethics," guest edited by Osamu Sakura. The four articles included in the subject issue are as follows:

[A View from the Far East: Neuroethics in Japan, Taiwan, and South Korea](#)

Osamu Sakura

Cross-cultural studies of neuroethics that focus on Taiwan, South Korea, and Japan tend to dwell on three areas of "cultural" concern: local variations, the gap between the scientific community and the public, and the different approaches to ethical issues taken by different disciplines. According to a survey, Western and Taiwanese views on the relationship between the "soul" and the "mind" may have little in common. In South Korea, scientific research on bilingualism, covered by reports in the mass media, contributed to popular misconceptions about the early acquisition of foreign languages. Meanwhile, Japanese engineers and medical doctors involved in interdisciplinary research projects have run into trouble in the course of framing ethical guidelines for the treatment of human subjects. Every nation in East Asia has begun developing neuroethics projects, and the discipline has grown rather satisfactorily. However, the experiences of the different areas may differ much more than expected.

[Do Koreans Have an "English Brain"? A Case Study in the Commercialization of Neuroscience](#)

Hawon Chang and Sungook Hong

Korean people believe that English proficiency is one of the most important factors in achieving professional success, and because

of this they spend a great deal of time and money to master English. Along with this frenzy over English, a discourse on the “English brain” has recently emerged. Many Koreans believe that to achieve linguistic excellence, one has to train a particular brain region—the so-called English brain. This discourse was formulated and became popularly authoritative as certain information on relevant brain research was transferred across scientific, popular, and commercial sectors. Neuroscientific research, particularly studies of bilingualism, provided interesting information for the media and companies. This information was used to promote novel commercial devices and educational programs specifically designed for learning English. The media transformed the results of such research into a more popular discourse about the English brain. Interactions among neuroscientific research, commercial strategies, and the media made the English brain a reality.

[Neuroethics in Taiwan: Could There Be a Confucian Solution?](#)

Kevin Chien-Chang Wu and Tamami Fukushi

Latecomers to neuroscience, Taiwanese scientists and humanities scholars have yet to develop a distinctive discourse of neuroethics. It is important to involve the public in the discussion of science policy early on, so the results of a survey of attitudes toward the establishment of a brain bank in Taiwan are used here to explore Taiwanese thinking about the brain. Finally, the possibility of developing a Confucian neuroethic is discussed as an alternative to Western approaches.

[A Practical Approach to Identifying Ethical and Social Problems during Research and Development: A Model for a National Research Project of Brain-Machine Interface](#)

Nozomi Mizushima and Osamu Sakura

In spite of growing interest in neuroethics, the process of research and development (R&D) is not focused enough on the context of ethical, legal, and social issues. These processes present a unique and largely overlooked opportunity to integrate ethical and societal considerations into interactions with these technologies. We implemented a research ethics consultation during the R&D phase of Japan’s national project for brain-machine interfaces; our goal was to capture the ethical and social concerns of researchers in the early stages of R&D. Furthermore, we analyzed the project’s structure and found two specific features related to the researchers’ ethical and social concerns: (1) the segmented

structure of the project and (2) the nested structure of the project. We argue that this insight has the potential to provide neuroethics with a better understanding of R&D as well as more effective intervention strategies.

...All of which brings me to one final note: You may have noticed that East Asian Science, Technology and Society is not among the list of journals normally in our sights. I thank Mark Nichter for pointing us in this direction! Clearly there's more out there than any one of us (or group of us) can fully attend to. So, I'd like to say that if you have something that you think would be good to profile in "In the Journals...", always please feel free to pass it along to us as [ats2 \(at\) uchicago \(dot\) edu](mailto:ats2@uchicago.edu). Thanks!

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