

<http://somatosphere.net/2013/01/in-the-journals-new-years-edition.html>

## In the Journals... New Year's edition

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By Melanie Boeckmann

**Happy New Year!** As you know, traditional academic publishing lags months (I've even heard of years!) behind current events. Therefore, although I'd love to present you this month's themes as "fresh starts", "new beginnings" and similar tropes, I can instead only tell you: there's lots to be read this January!

The [Health](#) January 2013 issue contains six articles, this month focusing on women, men and children. **Caroline McIntosh** and her colleagues study the context of [illness in the family](#) in young children's sense-making processes. This narrative interview-based study of how four-year old children conceptualize the causes of an illness is driven by the theory of a socio-constructivist framework. Another aspect of generating knowledge is **Antje Kampf's** engagement with the epistemic development of a [biomedical definition of healthy reproductive male bodies](#). The author exemplarily discusses a shift from an ideal of a healthy male body in Germany from the beginning of the 20<sup>th</sup> century to today's vulnerable male bodies by illustrating biomedical infertility research's focus on sperm. **Anneke Sools** explores theoretical connections between two commonly used qualitative research concepts: [narrative and health](#). Narrative health research relies on stories as analytical tools and on methodological reflection of the conceptualization of health.

The first [Medical Anthropology](#) issue of 2013 is a special issue on *Alternative and Complementary Therapies: The Politics and Logics of Care*. The themes covered in this special issue center on 'care,' 'effectiveness,' and 'integration.' **Nissen and Manderson** write in their [introduction](#) that contributions to this special issue portray the "dynamic nature of medical practice and care, the relationship between care and effectiveness, and the processes of integrating multiple medical realities into everyday life and plural medical systems." Of interest is the dichotomy between traditional and alternative medicinal use in lower income and industrialized countries: both are represented by articles. **Hannah Flesch** investigates [schools of complementary and alternative medicines in the United States](#) and their impacts on a transformation of Chinese Medicine through integration into biomedical sciences. In France, the [relationship between rural fire charmers and physicians](#) is strained: **Clementine Raineau** uses this relationship to illustrate a "distinction between

clinical/empirical practice and scientific knowledge.” Two articles discuss Complementary and Alternative Medicine (CAM) in the UK: **Stuart McClean** argues that standard [methods for measuring effectiveness](#) do not work in alternative healing contexts; whereas **Nina Nissen** suggests “that [Western herbal medicine] constitutes a form of [holistic and politicized health care](#) that contributes to confronting and fulfilling women’s traditional gender roles and discourses of caring femininity.” On the other hand, in Kerala, India, efforts to [integrate biomedical and biopsychiatric concepts into traditional Ayurvedic psychiatry](#), state **Claudia Land & Eva Jansen**, challenge the concept of culture-specific versus universal disorders.

Among the “online first” articles in the [International Journal of Social Psychiatry](#), the January publications deal with [violent deaths among older male adults](#) in the European Union and in Russia, with [Chinese medical students’ positive attitudes](#) and openness towards psychiatry, and with [quality of life, coping and the burden of caregivers](#) for patients with schizophrenia.

Latest articles in the [Journal of Ethnobiology and Ethnomedicine](#) give insights into relationships between humans and medicinal birds and plants. **Dandara Monalisa Bezerra** et al. describe [zootherapeutics in North-Eastern Brazil](#), and find that a number of birds in that area have both medicinal and symbolic meaning to local human populations. **Jahangeer A. Bhat** and colleagues document [medicinal plants in the Garwhal Himalaya in India](#), also determining plant ecological status, importance and traditional use.

Filled to the brim with book reviews, the January 2013 issue of the journal [History of Medicine and Allied Sciences](#) also contains three research articles. The first by **David S. Jones** traces the [history of pharmacogenetics to the 1950s and 1960s](#) and the pharmacologist Werner Kalow’s work on race and genetics as an explanation for patient variability in treatment response. **Hyung Wook Park**, on the other hand, researches the history of [Gerontology in the National Institutes of Health and City Hospital of Baltimore](#) in the 1940s. The author focusses on the role of bias in research, especially selection bias. And **Michael Bresalier** describes how British military medicine and military pathology shaped [context and approach to the 1918 influenza pandemic](#) in the UK.

The editors of [Psychosomatic Medicine](#) have written a summary for all articles in their January 2013 issue [here](#). I am especially interested in **Meaghan L. O’Donnell** et al.’s research project on [delayed-onset Posttraumatic Stress Disorder after severe injury](#), **Kate Faase** et al.’s trial on how university students [react to their medication visibly being changed to a generic product](#) rather than the brand-name version, and in **Julia K.**

**Boehm** and colleague's study on [associations between optimism and serum antioxidants](#).

As always, [Social Science and Medicine](#) came out *twice* in [January](#) and contains a large number of varied articles. Of particular interest to me are the following:

- **Patrick Vinck and Phuong N. Pham** conducted a survey on the relationships between [intimate-partner physical violence, war experiences, and mental health](#) (depression or PTSD) in the context of Liberia's war history and war-related gender-based violence.
- **Lindsey Reynolds** et al. look into the social dynamics and [contexts that influence HIV surveillance participation](#) rates in KwaZulu Natal, South Africa.
- Do [gender disparities in cardiac treatment in Taiwan](#) extend to health professionals themselves and member of their families? **Nicole Huang** and her colleagues state that yes, women receive fewer catheterization and revascularization treatments than men, regardless of their profession or their affiliation to a health professional. However, survival outcomes for women in the health professional group were better than for non-health professional female patients.
- A secondary data analysis on [exposure to small and moderate natural disasters in rural India](#) finds that said exposure is correlated with incidence of acute diarrhea, fever as well as respiratory illness in under 5-year-olds. Past year disaster exposure also influences growth outcomes. **Ashlesha Datar** et al. state that adverse growth outcomes especially are less likely among boys, infants, and families with more socioeconomic resources.
- **Anita J. Gagnon** and colleagues research the [post-natal health status](#) of mothers and infants who migrated to Canada.
- And **Hannah Grol-Prokopczyk** discusses international collaboration between Thai and American medical doctors and their shared [vocabulary on medical ethics and moral reasoning](#).

And finally, for the moment, **Nanibaa A. Garrison's** article in [Science, Technology and Human Values](#) on the aftermath of a lawsuit by the Havasupai tribe against the Arizona Board of Regents and Arizona State University (ASU) researchers shows that interviewed US human genetics researchers and institutional review board (IRB) chairs have gained an [increased awareness of first nations' views on genetic research](#). The Havasupai tribe sued in 2004 after the DNA samples they had agreed to be used in genetic studies on type 2 diabetes had also been used in other genetic studies. The lawsuit drew attention to the question of consent. Garrison's interviewees stated that the issue didn't affect their work,

although they felt they had to request broader consent for their research, or refrain from including indigenous groups in their studies altogether. Garrison raises the question whether this wouldn't be problematic as it restricts access to benefits from genetic research for minority participants.

**AMA citation**

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