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In the Journals, February 2014

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By Aaron Seaman

The shortest month, February often seems to be shorter on new journal content, as well, falling as it does between months where biannually-, triannually-, or quarterly-publishing journal's issues are released. However, this month saw the publication of, in addition to the work below, three (!) special issues, written up in other Somatosphere posts:

The journal **Health, Risk & Society** has a special issue, entitled "Risk, Pregnancy and Childbirth." You can find more about it here.

Social Science & Medicine published a special issue, entitled "Structural Stigma and Population Health," the write-up of which can be found here.

And, **Sociology of Health & Illness** (the ampersand journals represent this month) also has a special issue: "From Health Behaviours to Health Practices: Critical Perspectives." The specifics on it can be found here.

In American Ethnologist has an article by Kristin Peterson on pharmaceutical markets and access to medications in Nigeria that might be of interest to readers.

On the monopoly: Speculation, pharmaceutical markets, and intellectual property law in Nigeria
Kristin Peterson

> The drug patent monopoly has been described as a key deterrent to Africans' access to brand-name, life-saving drugs. Research in Nigeria, however, shows that another factor restricts access in that country: Brand-name pharmaceutical companies' pricing and marketing strategies keep patented drugs off the market. In this article, I retheorize the question of monopoly in the pharmaceuticals industry. I first track the historical precedents of this particular iteration of the drug monopoly. I then situate the monopoly in the context of ethnographic research I conducted on pharmaceutical markets and drug marketing (2005–10) as well as on Nigeria's compliance struggles with the WTO's Trade Related Aspects of Intellectual Property (TRIPs) Agreement (1999–2003). TRIPs enforces patent holders' rights and mandates intellectual

property harmonization across nation-states. In analyzing these two ethnographic sites together, I argue that rather than its purported short-term legal existence, the current drug monopoly operates as though it has an indefinite life.

Philosophy, Ethics, and Humanities in Medicine has two new articles online for the month of February:

Performance enhancement, elite athletes and anti doping governance: comparing human guinea pigs in pharmaceutical research and professional sports
Silvia Camporesi and Michael J. McNamee

In light of the World Anti Doping Agency's 2013 Code Revision process, we critically explore the applicability of two of three criteria used to determine whether a method or substance should be considered for their Prohibited List, namely its (potential) performance enhancing effects and its (potential) risk to the health of the athlete. To do so, we compare two communities of human guinea pigs: (i) individuals who make a living out of serial participation in Phase 1 pharmacology trials; and (ii) elite athletes who engage in what is effectively 'unregulated clinical research' by using untested prohibited or non-prohibited performance enhancing substances and methods, alone or in combination. Our comparison sheds light on norms of research ethics that these practices exacerbate with respect to the concepts of multiplicity, visibility, and consistency. We argue for the need to establish a proper governance framework to increase the accountability of these unregulated research practices in order to protect the human guinea pigs in elite sports contexts, and to establish reasonable grounds for the performance enhancing effects, and the risks to the health of the athlete, of the methods and substances that might justify their inclusion on the Prohibited List.

Has the sanctity of life law 'gone too far'?: analysis of the sanctity of life doctrine and English case law shows that the sanctity of life law has not 'gone too far'
Abdul-Rasheed Rabiu and Kapil Sugand

The medical profession consistently strives to uphold patient empowerment, equality and safety. It is ironic that now, at a time where advances in technology and knowledge have given us an increased capacity to preserve and prolong life, we find ourselves increasingly asking questions about the value of the lives we are

saving. A recent editorial by Professor Raanan Gillon questions the emphasis that English law places on the sanctity of life doctrine. In what was described by Reverend Nick Donnelly as a “manifesto for killing patients”, Professor Gillon argues that the sanctity of life law has gone too far because of its disregard for distributive justice and an incompetent person’s previously declared autonomy. This review begins by outlining the stance of the sanctity of life doctrine on decisions about administering, withholding and withdrawing life-prolonging treatment. Using this as a foundation for a rebuttal, a proposal is made that Professor Gillon’s assertions do not take the following into account:

1) A sanctity of life law does not exist since English Common Law infringes the sanctity doctrine by tolerating quality of life judgements and a doctor’s intention to hasten death when withdrawing life-prolonging treatment.

2) Even if a true sanctity of life law did exist:

a) The sanctity of life doctrine allows for resource considerations in the wider analysis of benefits and burdens.

b) The sanctity of life doctrine yields to a competent person’s autonomous decision.

This review attempts to demonstrate that at present, and with the legal precedent that restricts it, a sanctity of life law cannot go too far.

In the journal Social Studies of Science, Adam Hedgecoe has an article about the ethics of clinical research:

A deviation from standard design? Clinical trials, research ethics committees, and the regulatory co-construction of organizational deviance
Adam Hedgecoe

Focusing on the high-profile drug disaster at London’s Northwick Park Hospital in 2006, this article explores how such an event can be seen as an example of organizational deviance co-constructed between the company running the research and the research ethics committee which approved the trial. This deviance was the result of the normalization of a specific dosing practice in the broader regulatory field, allowing the researchers and regulators to take a risky dosing strategy for granted as best practice. Drawing on the work of Diane Vaughan, this article uses interview data with

> researchers and members of the research ethics committee concerned as well as documentary material, to show how work group cultures between regulators and those they are intended to oversee are maintained, and how the culturally embedded assumptions of such work groups can result in organizational and regulatory deviance.

In addition to these, while Cultural Anthropology did not have articles directly related to Somatosphere's primary areas of interest, it did release its first Open Access issue in February, a noteworthy accomplishment! You should definitely go see Brad Weiss's comments on the work it took to move to Open Access — and the work to come — as well as a bevy of interesting articles, if you haven't already.

And, as always, happy reading!