

Book Reviews/Comptes rendus

SUSAN REYNOLDS WHYTE, SJAAK VAN DER GEEST and ANITA HARDON, *Social Lives of Medicines*. United Kingdom, Cambridge University Press. 2002, 193p., Index.

Social Lives of Medicines describes the lives that medicines have with and among people, solving problems within the most diverse contexts: in caring between mothers and their children; hope and dependence for fragile women; and commerce and various political economies. Efficacy, control, skepticism and commodification are only some of the key concepts in medicine and medical anthropology that the authors discuss as elements of dynamic relations within a social network and not as inherent to persons or medicines. The book examines these social relations by grounding its analytical considerations within the concrete, everyday concerns of consumers, providers and international strategists in the field of medicine. The descriptions are mostly from villages within the developing world, with a few from larger cities worldwide. The volume begins with the lives of medicines in households, discusses different providers (pharmacists, physicians etc.), and finishes with those “strategists” involved in multinational political economies of health.

Obviously inspired by Arjun Appadurai’s work *The Social Life of Things* (1986) that claims that things have biographies, *Social Lives of Medicines* nevertheless is not structured around biographies of specific medicines. Rather, the book focuses on the plurality of social relations that medicines facilitate and entice. The most interesting of these relations, in our view, is the one attributed to pharmacists. Drawing on the ethnographic data of Corminsky (1994: 112), who sums up the role of the pharmacist in Guatemala as a ‘cultural broker’ mediating among three levels of biomedicine (the multinational/international, the national and the community level), Whyte and al. suggest that, “[i]n a global perspective, the role of pharmacist is an elastic one” (p.91). Medicines here live their lives as links, mediators, bridges, connectors, and articulators, not only among people variously exchanging medicines through mediums such as business, family, and caring, but also among varying forms of medicines from apparently different traditions.

The book takes on a similar role to the one attributed to the pharmacist. As a mediator with an ‘elastic’ role, the book has numerous beautiful proposals for re-viewing the old and the new by suggesting reconciliations of what is generally referred to as *traditional* and *modern* medicine. The book recognizes the multifaceted nature of efficacy by, for example, considering traditional maternal caretaking together with modern pharmaceutical findings. These proposals for the “merging” of formerly opposed categories are convincingly articulated throughout the book, with each chapter systematically delivering rich

ethnographic data serving to illustrate the various relations that humans entertain with medicines.

The strength of the book stems from its fantastic review of a particular form of classical ethnography; its weakness stems from this very restriction. The “collage” of classical ethnographic data assembled by the authors sometimes loses its links and its depth because of the numerous heteroclitic ethnographies selected. These ethnographical studies (some from the authors’ own fieldwork experiences, most from the fieldwork of other anthropologists) lack, in our opinion, a comparative level: each chapter is based on “long-term” fieldwork and restrained to one place. The time span required to make fieldwork “long term” and therefore valid, remains unclear.

Although the objective of the book is to bring various qualitative investigations together (p. 12), only one ethnography set in three pharmaceutical companies is mentioned, and mentioned shyly (p.135). It might be suggested that other forms of ethnography, such as ones following medicines or medical practices in multiple sites (Scheper-Hughes 2004, for example), could have helped to weave together some loose ends in trying to obtain a global perspective. Another option for presenting the multiple profiles of biographies of medicines in all their flexible networking might be to take a better look at the crucial role of the international humanitarian health industry, particularly present on the African continent and frequently referred to in the book. Nonetheless, this book is a must for anyone interested in the anthropology of health because of its excellent review of the anthropological literature pertaining to medicines, the brief historical overviews of various concepts, the accessible language and the subtle proposals to better medical practices.

References:

Appadurai, Arjun (ed.), 1986, *The Social Life of Things: Commodities in Cultural Perspective*. Cambridge: Cambridge University Press.

Cosminsky, Sheila, 1994, All Roads Lead to the Pharmacy: Use of Pharmaceuticals on a Guatemalan Plantation. In: *Medicines: Meanings and Contexts*. NL Etkin and ML Tan (eds.). Quezon City: Health Action International Network.

Nancy Scheper-Hughes, 2004, “Parts Unknown: Undercover Ethnography of the Organs- Trafficking Underworld. *Ethnography*. 5(1) 29-73.

Julie Laplante and Annette Leibling *McGill University and Federal University of Rio de Janeiro*