

stigmas were regarded as indicative of cognitive incapacity, and that eugenics represents “a concerted movement to rid disabilities from a country’s national spaces” (p. 120).

This central argument is then developed, through analysis of documentary films, to apply to contemporary disability practice. Unsurprisingly, a debt is acknowledged to Foucault’s work, particularly *Abnormal* (2003). Despite euphemistic names suggestive of kindness—nursing homes, sheltered workshops, 24-hour care facilities—Snyder and Mitchell portray these as punitive regimes infused with eugenic thinking and methodologies. Disabled people are fair game for research, “perpetually available for all kinds of intrusions, both public and private” (p.187).

The book ends with a provocative reflection on the place of disability studies in the academy, “the unruly child” which, by affording voice to disabled people’s desires, threatens the medical and public health disciplines that seek to control and to cure disability. It asks the important question of whether disability studies can itself escape a role which subjugates the very people it seeks to represent, and presents some tentative answers.

I am glad I read this book. It ranges widely, and makes some sweeping generalizations. Although it is hard to agree with it in every detail, as a contribution to understanding of disability, past and present, it is a book not to be missed.

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Richard DeGrandpre, *The cult of pharmacology: how America became the world’s most troubled drug culture*, Durham, NC, Duke University Press, 2006, pp. x, 294, £14.99, \$24.95 (hardback, 978-0-8223-3881-9).

For Richard DeGrandpre, a “cult of pharmacology” has come to reign supreme in

America, governing its relationship towards an alphabet of drugs from amphetamines to Zoloft. He argues that drugs have long been seen as “powerful spirits”, but during the twentieth century “pharmacological essences replaced magical ones”. Yet, this was not so much a revolution as a reformulation: “a drug’s powers were still viewed as capable of bypassing all the social conditioning of the mind, directly transforming the drug user’s thoughts and actions” (p. viii). Drugs came to be regarded as “all-powerful” substances, their effects on the user and society determined simply by their pharmacology. DeGrandpre exposes the fallacy of such a belief through an analysis of the characterization of drugs as either “demons” or “angels”. Cocaine, he maintains, is seen as a “demon” drug, a dangerous and addictive substance that corrupts all those who come into contact with it. Ritalin, on the other hand, is regarded as an “angel”, widely used in the treatment of children with Attention Deficit Hyperactivity Disorder (ADHD). Yet, according to DeGrandpre, chemically the two drugs are very similar: it is social context which has shaped their meaning, not pharmacology.

Considering legal, pharmaceutical drugs like Ritalin alongside illegal drugs like cocaine allows DeGrandpre to expose the double-standard which has often influenced attempts to regulate psychoactive substances. Within a system of what he calls “differential prohibition” the dangers of some drugs have been ignored, just as the negative consequences of using others are exaggerated. The science of drugs has had little or nothing to do with how they are dealt with, other concerns are far more important. Who is using a drug and why, for example, has been repeatedly shown to be crucial in determining the way different substances are responded to. Indeed, much of the ground covered by DeGrandpre will be familiar to historians of illegal drugs, alcohol, tobacco and the pharmaceutical industry; the value of this book lies in an attempt to bring together what have often been separate literatures.

However, what detracts from *The cult of pharmacology*'s overall importance is not just the familiarity of some of the points made, but also the way that these are presented. Too often, DeGrandpre relies on a very limited selection of sources and uses these uncritically. At the same time, he also has a tendency to stray into unnecessary detail, citing numerous, lengthy case-studies when one or two would suffice. He also makes a few unfortunate mistakes—a casual reference to George Orwell's "dream of *soma*" (p. 163) when surely he means Aldous Huxley—hardly inspires confidence. Furthermore, the book is frequently repetitive, and uses phrases, labels and metaphors that obscure rather than reveal. Comparing what he describes as "pharmacologism"—the belief that certain drugs are inherently good and others inherently bad—to Nazism seems shallow and inappropriate. Moreover, by stressing the importance of drug pharmacology when it suits him, the author undermines his own argument about the social construction of drugs. A lengthy exploration of the evidence that links Prozac to suicide, self-mutilation and murder seems to leave DeGrandpre convinced that drugs do have a pharmacological effect on the user, even if it is not the one intended. Perhaps this merely serves to illustrate the power of the "cult of pharmacology": even the book's author would appear to have become a victim.

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Hippocrates, *On ancient medicine*, translated with an introduction and commentary by **Mark J Schiefsky**, *Studies in Ancient Medicine*, vol. 28, Leiden and Boston, Brill, 2005, pp. xiii, 415, €134.00, \$181.00 (hard-back 90-04-13758-0).

The medical writing *On ancient medicine* is one of the some fifty works transmitted since Antiquity as a part of the *Corpus*

Hippocraticum. The treatise did not attract much attention in Antiquity, the Middle Ages or the Renaissance; probably as a result of Galen's thinking that it was not the work of Hippocrates himself. Nevertheless, this attitude changed soon after Emile Littré placed it in the first volume of his edition of Hippocrates' complete works. Littré considered the treatise to be a genuine work of Hippocrates, and, ever since, *On ancient medicine* has been one of the most commented, studied, edited and translated Hippocratic writings. Traditional scholarship has been concerned mainly with three topics. The first is the so-called "Hippocratic Question", namely the identification of the author with the historical Hippocrates; the second deals with the search for medical and philosophical influences and dependencies between this writing and that of other authors; the third discusses the controversies over attempts to establish the identity of the theorists attacked in this treatise.

Mark Schiefsky's book is based on the reworking of his 1999 doctoral thesis. He uses the Greek text established by Jacques Jouanna in his 1990 *Les Belles Lettres* edition, but provides a general introduction, a translation facing the Greek text, an extensive commentary, two appendices, and three indexes (general index, Greek words, and texts and authors cited). The Greek text offers references to both Littré's and Jouanna's pages, which makes it very user-friendly, and the translation is clear and accurate (where I have checked it). The introduction presents a survey of many of the issues raised by this work, such as the opposition between *téchnè* (art, science) and *túchè* (chance, luck) and the role of accuracy (*akribèia*) in medicine. It also presents a summary of its content, an overview of the intellectual context in which it was composed and addresses general topics, including audience, date and authorship. Many of these issues are revisited in greater detail in the commentary, as they are meant to be the main supporting evidence upon which to base the claims of the introduction.