

territory. It is a great pleasure to read, evocative, and splendidly detailed.

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Jeanne Daly, *Evidence-based medicine and the search for a science of clinical care*, Berkeley and London, University of California Press, 2005, pp. xv, 275, £41.95, \$65.00 (hardback 0-520-24316-1).

One of the main transformations of medical practice in the last quarter of a century is the meteoric growth of evidence-based medicine (EBM). The name of this new movement, may sound like a provocation, since it implies that before the advent of EBM in the 1980s medical decisions, especially those related to therapy, were not based on sound evidence. However, from the mid-nineteenth century, doctors repeatedly claimed that medicine had become a scientific discipline, a claim reiterated and reinforced in the twentieth century. Moreover, the main tool employed by EBM, the randomized controlled trial (RCT), is not a recent invention: it was developed in the 1940s, and became increasingly popular in the post-Second World War era, partly because regulatory agencies increasingly required that the efficacy of a new drug should be proved in an RCT, before issuing a marketing permit. On the other hand, the growing accumulation of results of controlled clinical trials did not seem to affect standards of routine clinical care. Left to their own devices, few doctors relied on the critical evaluation of RCT's in their clinical decisions. Physicians continued to gather information in a haphazard way, to draw general conclusions from personal experience, and to listen to representatives of the pharmaceutical industry.

The founders of the EBM movement—a group of clinical epidemiologists from McMaster University in Canada under the charismatic leadership of David Sackett—decided to make reliable information on therapies available to all clinicians, a task facilitated by the development of computers and of the Web. The McMaster

initiative was exceptionally successful. Today we have numerous EBM publications, internet sites, and decision tools. EBM courses are included in the curriculum of the majority of medical schools, and the new generation of physicians will probably “talk EBM” as naturally as Molière's Mr Jourdain spoke prose. In parallel, EBM generated strong opposition and provoked heated debates. The latter are, however, confined to a specialized press: the growing importance of EBM has low visibility beyond the esoteric circles of experts. Daly's book, the first comprehensive history of EBM, therefore, fills an important gap.

Daly started by writing the history of clinical epidemiology (one of the domains that led to the development of EBM), then enlarged her project to include the history of evidence-based medicine, and of a similar initiative, the Cochrane Collaboration, developed in Great Britain by Iain Chalmers. She produced a detailed and thorough study, grounded in numerous interviews and observations. One of her key findings is the great heterogeneity of uses of EBM. The sociologists Stephan Timmermans and Mark Berg investigated the variety of these in a single clinical setting. Daly focuses on the role of local and national variables in modulating the uses of clinical evidence in different sites. She illustrates her point through a detailed study of Cochrane Collaboration in South Africa. Daly's book also provides a critical perspective on EBM and shows the limitations of approaches that focus on RCT's and fail to incorporate contributions of disciplines such as classical epidemiology or public health.

Evidence-based medicine and the search for a science of clinical care does not cover all aspects of the history and present development of EBM. Some areas—such as the role of state policies—are mentioned only briefly, while others—such as the impact of the pharmaceutical industry—are, regrettably, absent. Daly's pioneering work is, nevertheless, an important contribution to the understanding of EBM and thus of recent changes in clinical practice. It is highly recommended to all those who want

to understand what is truly new in today's medicine.

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Jonathan M Metzl and Suzanne Poirier (eds), *Difference and identity*, a special issue of *Literature and Medicine*, Baltimore, Johns Hopkins University Press, 2005, pp. xiii, 207, £13.50 (paperback 0-8018-8205-2).

This special edition of the journal *Literature and Medicine* focuses on a wide-ranging cross-section of subjects focusing on difference and identity through the context of disability and disease. The volume highlights the role of medical humanities as a way to understand the cross-cultural aspects of medicine both in the historical and the contemporary construct.

In the first section on 'Dis-ability', the question of identity, cultural constructions of the body and the self are raised. Tobin Siebers examines disability as a masquerade, using queer theory to illustrate the ways in which the "passing" of disabled people as non-disabled is both similar and different to "passing" in homosexuality. Susan Squier discusses the role of meditation in the lives of disabled people. The paper focuses on the identity of the depressed person, and questions whether or not they should have distinction as disabled, or remain behind a façade, or "pass" as a non-disabled person. Sander L Gilman explores whether or not obesity is a disability, and considers the cultural construction of different bodies, including what is healthy and what is sick over time, using the association of Jewishness and fat as an example. The trenchant response by Thomas W Laqueur highlights some of the difficulties for researchers in disability studies.

In the second section entitled 'Dis-sexuality', the subjects range from venereal disease to AIDS and traumatic remembering. Sue Sun Yom's discussion of the management of venereal disease by the US Forces in Vietnam, points out that despite its educative agenda, the film *Where the girls are—VD in Southeast Asia*, stigmatizes

different cultural sites as those of contagion and disease. In his article on "bare backing" and "bug chasing", Gregory Tomso discusses the ways that science and popular discourse represent this "dangerous" sexual behaviour, and the ways in which the gay community view this medicalized version. In the third paper, Lisa Diedrich focuses on witnessing narratives to discuss the works of Paul Monette, his observation of the death of both his partner and himself from AIDS. In the response paper that follows, Sidonie Smith provides a very good précis and discussion of the papers and then goes on to present the difficulty that "trauma stories" can present in differing cultural constructs.

In the third section on 'Dis-embodiment', the historical time span ranges from the early nineteenth to the latter stages of the twentieth century. The primary focus of this section is the image of the body, whether it is the diseased Chinese body portrayed in oil paintings, the disabled veteran's body captured in time and space by the new technology of photography, or the genetically modified body as depicted in film. Stephen Rachman provides an account of the artistic work of Lam Qua and the medical work of Dr Peter Parker. The paintings of the diseased bodies that Lam Qua produced for Parker, provided an important example of a "cross-cultural collaboration". In a thoughtful essay, drawing on and identifying sources rarely used, and using many interpretations, Robert I Goler presents the fictional case of Civil War quadruple amputee George Dedlow. Created by physician S Weir Mitchell, Dedlow represents the exposed, measured and categorized disabled war veteran. Finally, David Kirby's interesting exploration of the film *Gattaca* juxtaposes the notions of a society where the genetically modified are the dominant power, with current ideas of other types of inequality, including race. Kirby goes on to discuss the acceptability of the "new" eugenics in contemporary discourse and in reproductive technologies. In his response, Joel Howell suggests that despite the medicalized display of the body in a multitude of forms, it can hide as much it reveals.

In this ambitious work, the editors provide a forum where the authors can explore their subject