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Monika Dommann. *Durchsicht, Einsicht, Vorsicht: Eine Geschichte der Röntgenstrahlen, 1896–1963*. Interferenzen, no. 5. Zurich: Chronos, 2003. 447 pp. Ill. €29.80 (paperbound, 3-0340-0587-3).

Monika Dommann's book is ultimately about people's fascination with technological developments and their concern about the potentially adverse consequences of such developments. In the first decades of the twentieth century, X rays became an important tool in medical diagnostics and therapy. Although the dangers—including X-ray-induced carcinomas on the hands of radiographers—soon became evident, it was not until after World War II that the authorities introduced regulations. Dommann describes the history of radiology in Switzerland up to the time when new regulations came into force in 1963, a history that had not previously been recorded in detail. But she aims to do more than just fill a gap in historiography: she describes and analyzes the "genesis" of radiology from a social and constructivist perspective, discussing technology in its social context, including both its material (buildings, instruments, and artifacts) and its functional aspects (professions, professionalization, and the distribution of tasks over the sexes).

The book is somewhat reminiscent of a Ph.D. thesis, for it starts with a theoretical introduction in which the author announces her adherence to the principles proposed by authors like Ludwik Fleck and Bruno Latour. To her, this means that the significance of X-ray images is determined not only by the way the X-ray machine is used to produce an image, but also by such aspects as the person who produces it, the place where it is produced, the methods used, and the authority under whose supervision it is produced. After this introduction, the book is divided into three sections, each with a chronological structure.

In section I Dommann discusses laboratories and instruments, as well as the rise of experts. She recounts in detail how radiology developed in Germany, Austria, and Switzerland, alternating between the physics laboratory and the medical clinic. The establishment of medical radiology was made possible by alliances allowing investments in new clinics and high-power electrical installations, as well as office and file-storage space. The "networking" that was required to achieve these took place in a context of inspiring euphoria as well as skepticism about these new breakthroughs in medical technology.

The ninety-page chapter called "Expertenkultur" is the most fascinating part of the book. She shows that the rise of the expert radiologist was closely tied to the rise of female X-ray workers: delegating specific tasks to female assistants allowed radiologists to concentrate on establishing their autonomy and their reputation within the medical community. Here Dommann applies the concept of boundary work to analyze both the hindrance and furtherance of the professionalization of nurse and specialist.

The second section of the book deals with X-ray images, and examines physical aspects of both patients and radiologists. Dommann discusses the sensitive touch that X-ray nurses needed in order to work with the fragile equipment and achieve the highest image quality, depending on the goal of the examination and other circumstances. Governments started to take an interest in X rays in the context of

tuberculosis prophylaxis; this meant, on the one hand, that radiologists lost some of their jurisdiction over medical applications, while on the other hand, X-ray applications became “industrialized.” The third part of the book, however, which discusses the hazards, shows that the medical profession held on to its monopoly over X rays for a long time, claiming that they were safe as long as they were used by medical professionals. It was not until the 1960s that governments started to draw up regulations.

Durchsicht, Einsicht, Vorsicht reflects the emotional ties between humans (or patients) and new and promising technological developments. The author herself also gives evidence of such emotional ties, which may be one of the reasons why reading the book from cover to cover requires a certain amount of stamina.

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Virginia Berridge, ed. *Making Health Policy: Networks in Research and Policy after 1945*. Vol. 75 of *Clio Medica*. Wellcome Series in the History of Medicine. Amsterdam: Editions Rodopi, 2005. 336 pp. \$94.00, €75.00 (90-420-1824-0).

The history of health policymaking in the United Kingdom since World War II and the role of scientists in this history, as well as the evidence they produced and employed, have been a focus of much interest in recent years, thanks not least to work by Virginia Berridge and the members of a group of historians and sociologists working under her direction at the London School of Hygiene and Tropical Medicine in a program entitled “Science Speaks to Politics.” This book is a product of that collaboration, a coherent collection of essays that in places reads more like a coauthored volume. Its chapters deal with the networks of doctors, public health experts, politicians, activists, and publicists that shaped health policy in Britain in the second half of the twentieth century, and with the interactions among these groups, some formal and others informal, which turned them into networks.

Berridge’s introduction provides us with a welcome overview of the groups and institutions involved, the changing interactions between social scientists and medical experts, and the nature of the evidence employed in policymaking. The construction of this evidence is the subject of Luc Berlivet’s chapter on the history of risk-factor epidemiology and the epistemology behind it, which turned statistical association into cause and was central to new, postwar approaches in public health. Betsy Thom’s chapter on alcohol policy deals with the use of such evidence and the different models employed in making sense of alcohol problems, from a “moral” via a “disease” and a “public health” model to one that merged aspects of health and criminal justice. Berridge’s chapter on the antismoking campaign group ASH (Action on Smoking and Health) and the industry-funded Tobacco