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Kirstin Borgerson

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# BOOK REVIEWS

## ■ General

**Robert B. Baker; Laurence B. McCullough** (Editors). *The Cambridge World History of Medical Ethics*. xxviii + 876 pp., app., bibl., index. New York: Cambridge University Press, 2009. \$263.95 (cloth).

The first and most crucial point to stress in this review of *The Cambridge World History of Medical Ethics* is that the volume does not provide the standard geocultural, chronological account of medical ethics one might expect given its title. The editors, Robert Baker and Laurence McCullough, have purposely and fastidiously pursued a different task: collecting together a variety of intellectual, social, political, cultural, and religious perspectives on the intersection of medicine and morality throughout history. In doing so, they aim to highlight perspectives held by less dominant groups in a wide-ranging global history of medical ethics. This goal led to some fairly predictable editorial challenges and ultimately contributes to both the strengths and the weaknesses of the collection.

From the outset, the editors acknowledge that one of the challenges of putting together a volume of this sort is in figuring out how to weigh the abundance of literature from, for instance, twentieth-century North America against the sparser literature from other regions of the world and other time periods. The editors' decision as to how to handle this challenge is most clearly reflected in the fact that the volume contains a single nine-page chapter on American bioethics; the same number of pages are devoted to chapters on early Christian medical ethics (Ch. 12) and the views of medical practitioners in medieval and Renaissance Europe (Ch. 26), and significantly more pages are devoted to chapters on the views of medical practitioners in the modern and contemporary Islamic Middle East (Ch. 37) and medical ethics and Communism in the Soviet Union (Ch. 55). It is not difficult to see the ways in which this weighting is nonstandard. The table of contents supports the editors' contention that they made their selections to favor the inclusion of often-excluded perspectives. I'm sure this decision will be criticized by some readers, but I believe Baker and McCullough have correctly recognized that there are many other sources to which scholars can turn for detailed histories of, for instance, American medical ethics. This volume successfully pre-

sents diverse historical perspectives and will, I hope, increase scholarly appreciation for both the similarities and the differences in historical approaches to medical ethics around the world.

Another of the challenges faced by the editors of this sort of volume involves finding novel ways of grouping and organizing enormous amounts of material—here more than seven hundred pages' worth. I can only imagine the number and duration of the organizational meetings required ultimately to place the following chapters into different sections (and, yes, they did all end up in different sections): "Medical Ethics through the Life Cycle in Hindu India" (Ch. 3), "The Discourses of Hindu Medical Ethics" (Ch. 9), "The Discourses of Practitioners in India" (Ch. 20), and "The Discourses of Bioethics in South Asia" (Ch. 44). While care has clearly been taken to minimize content overlap between chapters, as a resource for someone new to the literature the collection comes across as somewhat scattered and unfocused. A comprehensive index and excellent cross-referencing between chapters help somewhat, but the organization is still counterintuitive. This is a shortcoming rather than a devastating flaw, since with some persistence users are likely to find the information they need.

The intended audience for this volume is anyone seeking historical perspective on an issue arising within medical ethics. I believe it will be of most use to upper-level undergraduate students seeking to explore religious or cultural perspectives on particular topics within medical ethics. I can easily imagine encouraging a student in my bioethics class to use one of the chapters in the volume as a starting point for research into, for instance, the limits of state intervention in medicine through the case study of South Africa during apartheid (Ch. 58) or of colonial Latin America (Ch. 52). This work fills a gap left open by other volumes and reference materials.

A few relatively minor critical comments are in order. The editors' decision to work "discourses" into chapter titles and throughout the various essays is a bit tiresome (especially to those of us disinclined to use the term), and I worry that it makes the material less accessible to the sort of student I imagine using this volume as a reference. Additionally, while considerable attention is devoted to the perspectives of medical practitioners, patient voices are nearly absent here. I'm sure there are good practical reasons for this absence;

but in a volume dedicated to presenting the perspectives of those less dominant in the history of medical ethics, it is particularly unfortunate that patients do not have a stronger voice. Finally, the absence of feminist perspectives, in a history ending at the year 2000, is mystifying at best, particularly—again—in a volume dedicated to ensuring space for marginalized voices.

Let me conclude with some comments about the many virtues of *The Cambridge World History of Medical Ethics*. The introduction by the editors sets out the reasoning behind the structure of the different sections, so a motivated reader can figure out (more or less) what is in each section and why. The chapters have clearly been edited for consistency of tone and language where possible. Moreover, the ultimate inclusive aim of the volume is laudable and, more often than not, achieved. I agree with the editors that wide-ranging historical perspectives have the potential to provide a welcome antidote to superficial work by some contemporary bioethicists, who may be all too quick to assume that the history of medical ethics starts in 1970 or that bioethical concepts have been around for millennia in roughly their current form. I'm pleased to have this volume on my bookshelf; and when a student comes in wondering about what health practitioners in the ninth- to fourteenth-century Middle East thought about psychosomatic aspects of disease, I will know just where to look.

KIRSTIN BORGERSON

**John Bender; Michael Marrinan.** *The Culture of Diagram*. xvii + 265 pp., illus., bibl., index. Stanford, Calif.: Stanford University Press, 2010. \$21.95 (paper).

This book opens with a riveting description of a virtual, computer-aided eye surgery as an exemplar of diagrammatic knowledge. The operation proceeds visually, but the surgeon's scalpel is guided not by ocular space but by electronically produced images constructed out of data streams rendered in varying formats and notations. The description signals the authors' presentist concerns with the virtual world that we all now partially inhabit. This is a world constructed not out of Albertian space and its corresponding unified epistemological subject, but out of "discrete packets of dissimilar data" that result in "disunified fields of presentation" (p. 8), apprehended serially or from several vantage points at once. *The Culture of Diagram* presents a "genealogy" of the types of visual configuration that demand correla-

tions of dissimilar data, usually called diagrams, considered as a form of knowledge. These include a range of devices involving drawings or reductive renderings, typically with parts correlated by geometrical notational systems. But this is not a long history of diagrams, and John Bender and Michael Marrinan avoid any overarching, transhistorical definition. Instead, they argue that much of the power of diagrammatic knowledge derived from competition among systems of diagram for explanatory power.

Diagrammatic practices proliferated between 1650 and 1850 across many disciplines and domains, driven especially by the expansion of the natural sciences. The authors situate their study in the middle of this period. Their argument turns on an original interpretation of the intellectual project of the *Encyclopaedia* (1751–1772) edited by Denis Diderot and Jean Le Rond d'Alembert. The *Encyclopaedia* is typically read as a rationalistic enterprise of analytic subdivisions in which complex subjects and procedures are broken down into smaller units of study. Following Diderot's vision, the authors present a very different view, treating the project of the *Encyclopaedia* as "a proliferation of independent elements that, when interconnected, produce knowledge of the whole" (p. 10). The innovative explorations of modes of visual correlation in the *Encyclopaedia* drew power from savvy probing of the material constraints of print culture, experiments in how knowledge could be generated in a medium confined to ink and paper and a sequential presentation defined by the folio book.

Neither Diderot and D'Alembert nor their contributing authors entirely agreed about the principles of visual correlation, which resulted in competing systems of diagram in the pages of the *Encyclopaedia*. The authors contend that this heterogeneity in fact made for the power of the project, for the attempt to allow verbal, graphic, and mathematical commentaries to coexist activated the synthetic faculties of the users, allowing new and unpredictable re-formations of the elements to be made. It also spurred formal innovations, above all the use of the white space of diagram as a constituent element and principle of connection on the material surface of diagram. "Whiteness" is related to the authors' critical contention that diagrams function not as abstractions or stripped-down versions of experience but, rather, as "working objects" in the sense proposed by Lorraine Daston and Peter Galison. Whiteness also made diagrams coextensive with the expanding world of scientific instruments in this period, insofar as they recorded "sensibilia" without invoking the presence of an observer. Like the eighteenth-century

Laurence B. McCullough is Professor of Medicine and Medical Ethics and Associate Director for Education in the Center for Medical Ethics and Health Policy at Baylor College of Medicine in Houston, Texas. He has published ten books and more than 375 scholarly articles and book chapters on the history of medical ethics, the ethics of the major medical specialties, research ethics, and the philosophy of Leibniz. His research has been supported by grants and fellowships from the National Endowment for the Humanities, the National Institutes of Health, and the American Council of Learned Societies. The Cambridge World History of Medical Ethics. The Cambridge World History of Medical Ethics [Baker, Robert B., McCullough, Laurence B.] on Amazon.com. \*FREE\* shipping on qualifying offers. The Cambridge World History of Medical Ethics. Jerome Lee. Books. Resurrection Of The Dead Stem Cell Research Law Books College Library Stem Cells Books To Read Psychology This Book Author. Cambridge Bioethics and Law: Human Cloning : Four Fallacies and Their Legal Consequences (Series #21) (Paperback). Buy Bioethics Beyond Altruism: Donating and Transforming Human Biological Materials 1st ed. 2017 by Shaw, Rhonda M (ISBN: 9783319555317) from Amazon's Book Store. Everyday low prices and free delivery on eligible orders. The Cambridge World Hi by Robert Baker. Other editions. Want to Read savingâ€¦ Robert Baker is William D. Williams Professor of Philosophy at Union College in Schenectady, New York, and Professor of Bioethics and Founding Director (Emeritus) of the Bioethics Program at Clarkson Universityâ€”Icahn School of Medicine at Mount Sinai in New York City. He is the author of Before Bioethics: A History of American Medical Ethics. Books by Robert Baker. Moreâ€¦ Although the subject of medical ethics has been around for well over two millennia, since before the Hippocratic Oath in the fifth century BCE, only in the past half century or so has it become central to human society. The author, Laurence B. McCullough, is a philosopher and medical educator, one of the leading authorities on medical ethics and its history, and adjunct professor of ethics in obstetrics and gynecology at the Weill Medical College of Cornell University, New York City, as well as distinguished emeritus professor at the Center for Medical Ethics and Health Policy of the Baylor College of Medicine. In my reading of it, the history of medical ethics pivots on these two extraordinary figures. The Cambridge World History of Medical Ethics is the first comprehensive scholarly account of the global history of medical ethics. Offering original interpretations of the field by leading bioethicists and historians ... The Cambridge World History of Medical Ethics. Robert B. Baker & Laurence B. McCullough (eds.) Cambridge University Press (2008). Authors. Laurence McCullough. Baylor College of Medicine. Abstract. The Cambridge World History of Medical Ethics is the first comprehensive scholarly account of the global history of medical ethics. Offering original interpretations of the field by leading bioethicists and historians of medicine, it will serve as the essential point of departure for future scholarship in the field.