Simon Hofmann asks in his book ‘Contested’ or ‘Controversial Parts of the Body: A History of Organ Donation in Switzerland’ how organ donation had been perceived, legitimised, criticised, judicially regulated and institutionalised in Switzerland. Hence, what does the history of organ transplantation tell us about the meaning and importance of biomedicine in late modernity? Hofmann presents the reader with a cultural history of organ donation, whereby culture is understood as the totality of all systems, forms and practices by which actors construct their reality as meaningful. The book is written from a social constructivist perspective using discourse analysis as the main tool of interpretation. The book’s main focus is on the proliferation of the transplant operations of hearts, livers, lungs and pancreases from humans to humans. One of the puzzles Hofmann tries to solve is the observation that the number of donors began to decline at the same moment that the propagators of organ transplantation started a campaign to enlighten the public in 1987. Hofmann’s main hypothesis regarding this decline is that it was last but not least (fictional) stories about organ theft and organ dealing that formed the reality of organ donation in Switzerland.

The book is mainly written against three important hypotheses in the historiography of organ transplantation. The first hypothesis sees organ transplantation in the context of an ongoing submission and normalisation. The second hypothesis modulates the history of organ transplantation as one of an increasing commodification and commercialisation, whereas the third one sees organ transplantation as an element of the reification of the human body, taking the differentiation of ‘Leib und Körper’ as starting point. This differentiation in the German language is difficult to translate; it might be translated as the difference between the experienced or living body and the physiological or biological body.

Besides published sources Hofmann also integrates unpublished material in his study. The most important corpus stems from the Swiss Academy for the Medical Sciences (SAMW), including protocols and correspondence between 1968–73 and 1994–5 looking at ethical and medical aspects of transplantations. Furthermore, Hofmann used the archive of the foundation ‘Swisstransplant’, sources from two hospitals, two public archives and published material from ‘journalistic’ and popular media. Hofmann sees the inclusion of popular sources like science fiction novels and TV series as one of the key distinctions from other histories of organ transplantation (p. 31).

The book tells the history of organ transplantation three times from a different angle. Firstly, from a inner-medical perspective that focuses on the medical disposition of the organ donation. He thus follows up the question of how organ donation has been interpreted, organised, and practised by the medical actors. Secondly, the focal point is moved to the public. In the realm of the ‘public’, the role of two ‘actor groups’ is analysed: patient organisations and pharmaceutical companies. Thirdly, Hofmann looks at the public discourse on organ donation, but chooses a different point of entry. He analyses the negative views on organ donation associated with coercion, violence, exploitation and the frightening power of medicine. In this chapter Hofmann tells us about histories and pictures of organ trafficking and organ theft. The central question here is: why did a cultural crisis in organ donation occur in the middle of the 1990s? When describing how the 1990s crisis had emerged, Hofmann comes to a very interesting and productive observation: the
donor of the organ more and more substituted in several contexts the recipient as the figure of reference. And a fundamental uneasiness facing modern medicine manifested itself behind the interests of self-determination. However, the history of organ transplantation is not a history of increasing biopower in Hofmann’s view. Since the 1980s it has been formed by a liberal form of power that saw the constitutive prerequisite and boundary in the liberty of the subject (p. 293).

What I liked most is the beginning of the book with a ‘prologue’ about the scandal surrounding the first heart transplant in Switzerland in 1969. Also very interesting are Hofmann’s observations with regard to the ‘ideal donor’ and his reasoning about the moral economies of organ donation. The ideal donor condensed in the public discourse in the virtual figure of the young, healthy and male motorcyclist – ready to take risks. Unfortunately, readers cannot find a hint about the significance of its being a ‘male’ body. Although the book is worth reading by everyone interested in the cultural history of organ transplantation and the place of biomedicine at the end of the twentieth century, it is written in quite a schematic way with a lot of previews and flashbacks. It would have been worth thinking about integrating the three chapters into a more concise research question, which might also have helped to avoid the sometimes annoying switches in time. Readers hardly ever know – except in the prologue – where on the timeline they are. And while the Swiss case is very illustrative for the study of the subtle distinctions of organ donation discourses, the reasoning for just following the ‘Swiss Extra Train’ (‘Schweizer Extrazügli’, p. 47) is not that convincing. To finish with a detail (addressing the publisher): the quality of the pictures could have been better. Nevertheless, the book is enlivened by vivid quotations and to everyone interested in governmentality studies Hofmann’s book presents many precious insights that might change one’s views on submission, reification and commercialisation of physiological and political bodies.

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Stuart Justman, The Nocebo Effect: Overdiagnosis and Its Costs (New York: Palgrave Macmillan, 2015), pp. xi, 272, hardback, $79.99, ISBN: 987-1-137-52328-0.

There is little doubt that the medicalisation of society, the framing of normality as a medical issue, has resulted in harmful violations of medicine’s first principle: ‘to do no harm.’ In his analysis of this, Justman draws from both medical and non-medical professionals to critique inappropriate labelling of problems, concerns, complaints, symptoms and assorted conditions into categories of discrete disorders. ‘Medicine has extended its writ not only over the less sick but many not sick at all, such as patients suffering from normal distress,’ explains the author (p. 12). To build his arguments, Justman uses a myriad of sources, from Dostoevsky and Tolstoy, to Montaigne, Shakespeare, Thomas Kuhn, Christopher Lasch and a wealth of medical clinicians.

The book addresses the world of the nocebo – the opposite side of the placebo coin and the side least studied – arguing that it is troubling because of the ethical and long-term implications to both the individual patient and public health in general. The author has taken the subject of medicalisation to a whole new level by demonstrating how a distorted judgment and overzealous diagnosis, such as found in the American Psychological Association’s Diagnostic and Statistical Manual of Mental Disorders (DSM) – the recognised coin of the realm – not only distorts the calculation of harms and benefits but negatively affects a patient’s health and well-being through the power of suggestion.