Albert R Jonsen, *The birth of bioethics*, Oxford University Press, 1998, pp. xiv, 431, $45.00 (hardback 0-19-510325-4).

As late as 1946, the ethics of both bedside medicine and bio-medical research were something physicians and scientists sorted out for themselves, or, at least, amongst themselves. Fifty years later, biomedical ethics was neither private, nor restricted to clinicians and scientists. It was a well-publicized field dominated by scholars trained in the humanities, law, and social science (including history). The American Society of Bioethics and Humanities now has a membership of over 1,500 individuals, holding positions in almost 200 centres, departments and programmes, and publishing the 3,620 books, essays, and articles listed annually in the *Bibliography of Bioethics*.

In *The birth of bioethics*, Albert Jonsen, the first person to be denominated a “Professor of Bioethics”, offers a comprehensive chronicle of the rise of bioethics, from its tentative beginnings in a few casual conversations to its formal institutionalization in centres and institutes. Part One focuses on individuals, offering representative biographies of key theologians and philosophers who became “bioethicists”, and offering detailed accounts of the activities of the government commissions on which these individuals served—a service that transformed them into bioethicists. Part Two focuses on the issues before these commissions, which eventually became the subject matter of the new field—death and dying, ethical issues in genetic research, human subjects research, new reproductive technologies, and organ transplantation.

In Part Three, Jonsen moves beyond chronicle—the record of who did what, when and where—to the questions of why bioethics was conceived, why the movement took the form of ethics, and why it was born in America. Jonsen helpfully distinguishes between bioethics as a discipline—a specialized field supported and recognized as such by academic institutions—and bioethics as a discourse, a widely-accepted way of discussing ethical issues in bio-medicine. Canonization as a discipline began when the Library of Congress recognized it as such on the basis of a 1973 article written by Daniel Callahan, co-founder of the Hastings Center. Unfortunately, having once made this observation, Jonsen’s concerns as a practising bioethicist distract him from his duties as a historian. He becomes entangled in the issue of whether a field that lacks settled and distinctive methodology can properly be called a “discipline”, and concludes that bioethics is a “demi-discipline”. After reaching this conclusion, however, Jonsen loses sight of the issues he set out to address: why did a select group of scholars denounce themselves “bioethicists”, and, perhaps more importantly, how did they convince the rest of the world to accept their self-characterization, with its implicit claims to expertise.

Jonsen is more insightful about the development of bioethics as a discourse. In conference after conference bioethicists challenged the “techno-speak” of medical and scientific savants, deriding the tradition of “doctor knows best” as paternalism, and reparsing abstruse technical issues in the populist language of patients’ rights. Bioethical discourse attained clinical legitimacy by penetrating the medical school curriculum; it invaded the corridors of the clinic via the ethics committee; and the public became acclimatized to bioethical discourse as the media turned to bioethicists for comments on the issues and scandals of the moment. Ultimately bioethical discourse dominated both public and professional discussions of moral issues in biological science and medical practice.

In explaining the triumph of bioethics as a discourse, Jonsen turns to the work of three historians: Daniel Fox, Stanley Reiser (*Medicine and the reign of technology*, Cambridge University Press, 1978), and David Rothman (*Strangers at the bedside: how law*
and bioethics transformed medical decision making, Basic Books, 1991). All three trace the birth of bioethics to the problems of an exponentially expanded, publicly funded, technologically driven biomedicine being run as the private fiefdom by a professional elite who deemed themselves accountable only to themselves. As a matter of reciprocity and self-defence, patients and the public supported the creation of a new discipline whose mission was to hold the biomedical elite accountable to their values and interests.

Jonsen argues that this analysis is incomplete, however, because it does not explain why patients and the public turned to ethics, rather than to law. He argues that the ethical turn is explained by the fact that recruits for the new discipline were drawn from an American liberal intelligentsia energized by the civil rights and anti-war movements of the 1960s and 1970s. These intellectuals naturally transported the language of protest into the clinic. As one bioethicist remarked, “I moved easily from civil rights to patients’ rights”. The American public, in turn, was responsive to a discourse of ethical critique because of an entrenched moralizing tradition inherited from the Puritan past, because American liberalism is melioristic and reformist, and because individualism lies at the core of the American moral tradition.

As a preliminary to writing this book, Jonsen organized a conference to which he invited “many of the pioneers of bioethics”. As he observes in the Acknowledgements, “their stories about the origins of the field . . . [serve] as the building blocks of this book”. There is a sense in which his book, which emphasizes biography and which opens with an account of his own transformation from Jesuit priest to bioethicist, reads like an autobiography of a field, written by its founders, with Jonsen acting as amanuensis. It transcends journalism and, as good autobiographies should, offers perceptive detail and analysis that would otherwise be lost. As autobiography, it is unlikely to be the last word on the subject; none the less, Jonsen’s accurate, comprehensive and insightful book is clearly the indispensable first word for anyone seeking to understand the birth of bioethics.

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Steven B Karch, A brief history of cocaine, Boca Raton and Boston, CRC Press, 1998, pp. xxii, 202, illus., $22.00 (0-849304019-5).

Twelve years ago, Steven B Karch, a doctor, was led into the study of cocaine toxicity when looking at problems associated with cardiac arrest. One thing led to another; science led to the history of science and then on to the history of the drug more generally. This book is the result.

Karch’s history of cocaine starts with the Spanish occupation of Peru and the gradual increase in knowledge of the powers of the coca leaf through the work of the early botanists. Among the first commercial uses were the coca wines: the mass advertising of Mariani’s coca wines was a model for later advertising hype. Chewing coca leaf was a vogue in the 1870s with pedestrians and elderly medical professors all vouching for its sustaining powers. The isolation of the alkaloid, cocaine, brought further medical interest. Freud’s enthusiastic advocacy in Über Coca was followed by his assistant Koller’s discovery of its local anaesthetic powers. Cocaine was the “miracle drug” of the 1880s, with proposed uses for everything from seasickness to neurasthenia.

In the US context, regulation came initially via the 1906 Food and Drugs Act, which controlled the coca wines and patent medicines containing narcotic drugs. Karch also considers the international production and trading aspects of the cocaine story. He describes the founding of the coca industry in Java and its connection with the rising Dutch pharmaceutical industry. The history of the pharmaceutical industry in general was intimately bound up with drugs.