D'Alembert affirmed that parents who face the danger that their decision will lead to an immediate death of their child do not reason in terms of the probability of remote events, and that only persons who face the consequences of a given action—and not experts or politicians—have the right to decide what kind of risk they are willing to take. At the same time, the smallpox vaccination debate interrogated the limits of state intervention in private decisions and the reliability of data used to define public health policies. All these questions, Halpern shows, prefigured later dilemmas.

At the centre of *Lesser harms* is an analysis of early attempts to develop a vaccine against polio. In spite of its relatively low impact in terms of overall mortality and morbidity, polio was seen as an especially threatening disease: it mainly killed or crippled children, was not related to poverty or poor sanitation, and nobody knew how it could be prevented. Halpern has uncovered rich archive material dealing with attempts to develop an anti-polio vaccine in the 1930s and early 1950s. In the mid-1930s, two US scientists, Maurice Brodie from the public health laboratory of the city of New York, and John Kolmer, who collaborated with a private company, the Institute for Cutaneous Medicine in Philadelphia, conducted clinical essays with candidate polio vaccine. Both Brodie’s and Kolmer’s vaccines were problematic. Brodie’s vaccine, made with a killed virus did not induce a sufficient level of protective antibodies and it occasionally produced severe allergic reactions. Kolmer’s vaccine, made with live virus, was probably insufficiently attenuated, and could therefore produce polio. Neither Brodie nor Kolmer made extensive tests on animals before turning to human experimentation, probably because of the high cost of testing the vaccine in monkeys. In the 1930s, human experimentation was not regulated by the law, and the accidents of anti-polio vaccination were not discussed in the media. Nevertheless, Halpern shows that thanks to the moral pressure of the scientific community, the discovery of the existence of such accidents led to a rapid interruption of the vaccination campaign. The memory of the 1930s’ failed attempts to develop anti-polio vaccine led to better public supervision of clinical trials of that vaccine in the 1950s. On the other hand, some of the 1950s’ trials of anti-polio vaccine were still hidden from the public’s gaze. Moral pressure of colleagues, Halpern argues, is efficient only when exercised against individuals whose reputation and status may be seriously affected by criticism of their peers (say, academic scientists), not against those (say, industrial scientists) who can afford to ignore such criticism.

Halpern tells an interesting story well, and she provides a stimulating analysis of moral dilemmas related to the choice of “lesser harm”. Such dilemmas are, however, only a part of the story of medical experimentation. One would like to learn more about the structure of relevant professional communities, the criteria of acceptance or rejection of evidence, hierarchy and stratification among virologists and epidemiologists, the role of statisticians or the economic issues at stake. Halpern does not provide all the answers, but she asks many important questions—not a small achievement.

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**Volker Roelcke and Giovanni Maiò** (eds), *Twentieth century ethics of human subjects research: historical perspectives on values, practices and regulations*, Stuttgart, Franz Steiner, 2004, pp. 361, Euro 64.00 (paperback 3-515-08455-X).

Most of the twenty-two papers contained in this collection were first presented at a conference on the ‘History of Human Experimentation during the Twentieth Century’, held at the University of Lubeck in 2001. As Volker Roelcke explains in his introduction, the object of the resulting volume was to examine debates on the ethics of human trials, and efforts in regulation, in the context of different traditions of experimental practice. Readers will find some new discussions of key events and landmarks in the modern history of human experimentation: the scandal around Albert Neisser’s experiments with syphilis serum and...
its impact on regulation (in 1900) in Prussia; research on a chemotherapy for sleeping sickness in the German colonies; the German Reich guidelines on human trials of 1930/31; the Lübeck BCG vaccination tragedy; and the concentration camp experiments in Nazi Germany, the Nuremberg Medical Trial and the Nuremberg Code.

For the post-war period, there are discussions of the whistle-blowing of Maurice Pappworth and Henry K Beecher about ethically questionable human trials in Britain and the United States. In a contribution on the genesis of the Declaration of Helsinki (1964), Susan Lederer argues that this (still) important document owed much to American influence, in particular the interests of US pharmaceutical companies in the development of new drugs and vaccines. The volume presents an international, though not strictly comparative, perspective by including case studies on the history of research on human subjects in Russia and the Soviet Union, the Czech Republic, France, Japan, USA, and Israel.

There are some generic issues raised in this collection. Paul Weindling’s and Boris Yudin’s essays, for example, draw attention to the differing interpretations of unethical human experimentation as being due to a general, morally corrupting influence of a totalitarian state or the activities of unscrupulous and opportunistic individual scientists. Paul J Edelson as well as Giovanni Maio suggest that an adequate understanding of twentieth-century doctors’ attitudes towards the ethics of human trials requires consideration of the “culture of honour” that was crucial for the identity formation of the Anglo-American and French (and I would add: German) medical profession. Generally, in the issue of informed consent to experimentation, the traditional culture of medical paternalism increasingly conflicted with legal notions of a right to self-determination of the individual.

Another theme of this volume is religious perspectives on human experimentation. Etienne Lepicard, in a case study on French priests’ comments before the endorsement of the Nuremberg Code’s principles by Pope Pius XII in 1952, records a “multiplicity of Catholic voices”, in which the issues of social usefulness and patient consent featured besides the principle of the sanctity of human life. Similarly, Gerhard Baader, in an essay on Jewish halachic views, shows how progress in medicine due to human trials was integrated under the harmonizing principle of saving or prolonging life.

The collection closes with contributions on the history of human population genetics since the 1950s, examining examples from Israel (indicating the influence of Zionist ideas), from the United States (pointing to racial prejudices in studies on the assumed link between XYY karyotype men and criminal behaviour), and Iceland. The paper by Pei P Koay, on the Icelandic deCODE genetic database, raises the important question whether this kind of research requires a new ethics. Significantly, with the parliamentary approval of the Icelandic Health Sector Database Act in 1998, the state of Iceland gave consent for all its citizens to be included in this nationwide genetic and health database project. Citizens unwilling to take part in the project were required explicitly to opt out.

Ranging in its coverage from the first public debates on potentially dangerous trials on uninformed hospital patients in Imperial Germany to this latest challenge of genetic and public health research ethics, this volume recommends itself through its comprehensiveness. It will be useful reading to anyone concerned with, or about, the history and ethics of human experimentation.

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Esteban Rodríguez-Ocana (ed.), The politics of the healthy life: an international perspective, History of Medicine, Health and Disease series, Sheffield, European Association for the History of Medicine and Health Publications, 2002, pp. ix, 288, UK £34.95, Europe £37.92, elsewhere £41.86 (hardback 0-9536522-5-4).

This edited collection brings together some ten of the papers given originally to a conference—‘The Healthy Life: People,