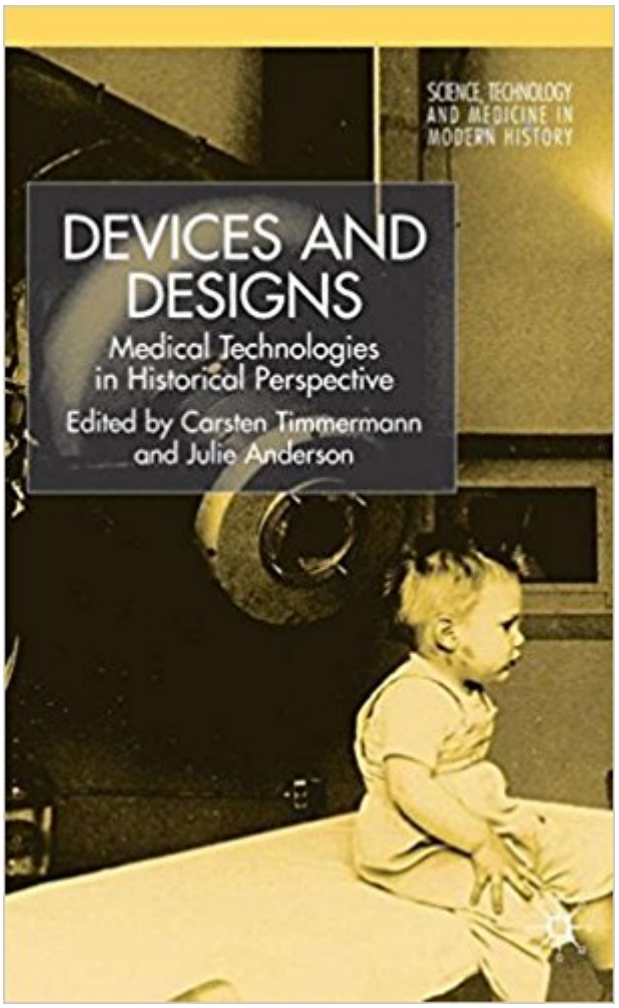
Devices And Designs: Medical Technologies In Historical Perspective (Science, Technology And Medicine In Modern History)



Synopsis

In this volume, leading scholars in the history and sociology of medicine focus their attention on the material cultures of health care. They analyze how technology has become so central to medicine over the last two centuries and how we are coping with the consequences.

Book Information

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Customer Reviews

'An excellent introduction to current historical approaches and subjects in the continuing interaction of medicine and technology.' - Susan E. Lederer, The British Journal for the History of Science 'This is a rich collection with many satisfying and thought-provoking articles that should engage not just historians interested in technology but anyone concerned with modern medicine, its origins and implications.' - Jane Seymour, Wellcome History

STUART BLUME Professor of Science Dynamics in the Department of Sociology and Anthropology, University of Amsterdam, The Netherlands ROBERT BUD Principal Curator of Medicine at the London Science Museum, UK CHRISTOPHER CRENNER Associate Professor and Chair of the Department of the History and Philosophy of Medicine and Internal Medicine at the University of Kansas School of Medicine, USA NEIL HANDLEY Curator of the British Optical Association Museum at the College of Optometrists in London, UK FLIS HENSWOOD Reader in Social Informatics at the University of Brighton, UK PATRIK HIDEFJÃƒâ LL Marketing Director, Gothia Medical THOMAS P. HUGHES Mellon Professor Emeritus of the History of Science at the

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I am conducting research for a history of medicine graduate course. My research essay will focus on the history of Biomedical Engineering with a micro history on cardiology devices such as the defibrillator. Since this book is about the history of medical technology I thought it would be interesting. I found chapter 3 interesting when it contrasted technological determinism and social constructionist. The book moves beyond the "great man" theory of medicine but it could have provided a more holistic analysis of the history of medical technology. The authors constantly refer to science, technology, and medicine. But what about the profession behind technological innovation, the integrator of science and technology -- Engineering? And in the context of medical technology, Professional Engineers are the people integrating science, technology, life sciences, and medical practice to provide the artifacts physicians and surgeons need for medical practice and human health. There is an absence of this dimension and this undermines what is an excellent book. There is little mention of professional engineers and the Biomedical Engineering discipline. There is one tiny mention on a diagram on page 123 Figure 7.1 were BME gets a mention. The book reminds me of a study of the icing but not the cake. There is an invisible world behind medical technologies that is missing. I wonder are the authors suffering from the British malady by associating the word "Engineer" with trades people people who fix cars, washing machines, telephone lines. In fact most Engineers spent 4-8 years at university and another 4-6 years post graduate training just to gain professional licensing or registration as Chartered Engineers as it is called in the UK. Most Biomedical Engineers start with a first degree in Chemical, Mechanical, or Electrical engineering and then gain a PhD and many also hold additional degrees in medicine or a life science. It is a sad omission in what is an excellent book. This said - a great survey on a fascinating subject

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