Die Publikation basiert auf einer umfangreichen Untersuchung nicht publizierter Primärquellen, einer umfassenden Literaturanalyse und zwölf Experteninterviews. Leider fehlen bei recht vielen Zitaten die genauen Seitenzahlen, so dass die Literatur für weiterführende Arbeiten nur mit zusätzlichem Aufwand verwendet werden kann.

Der Schweizerische Nationalpark ist von Kupper in einem sehr breiten Rahmen und integrativ dargestellt. Besonders eindrücklich sind die Vielfalt der Sichtweisen und deren Wandel im Zusammenhang mit den gesellschaftlichen und wissenschaftlichen Veränderungen der vergangenen hundert Jahre. Eine besondere Rolle spielten bei der Gründung und der Weiterentwicklung städtische Sichtweisen, die sich oft nicht mit den regionalen des Bündnerlandes deckten. Deutlich herausgearbeitet ist das Problem des absoluten Naturschutzes, der sich auch im Alpenraum als Illusion erwies. Der Titel *Wildnis schaffen* weist auf diesen Widerspruch hin! Die ursprüngliche Suche nach Ur-Typen, hier der Ur-Natur, spielte am Ende des 19. Jahrhunderts auch in andern Fachbereichen eine wichtige Rolle, so etwa bei der Erforschung von Haustypen, Siedlungsformen oder Agrarsystemen. Für die Wissenschaftsgeschichte ist die grundlegende Frage nach dem Verhältnis von Empirie und Theorie und damit nach der Bedeutung von Fallbeispiel und Modell besonders wichtig. Speziell für die Biologie sind die Erkenntnisse zum sich ändernden Verhältnis von Feld- und Laborforschung ausgezeichnet dargestellt. In einigen Bereichen ist die integrative Betrachtung etwas weit gefasst. So wird das Problem von Umsiedlungen erwähnt, die für den Nationalpark jedoch nicht nötig waren und in der Schweiz nur im Zusammenhang mit der Anlage von Stauseen vorgenommen wurden. Auch die Bedeutung des Nationalparks für die romanische Sprache ist wohl geringer als dargestellt. Und die heute breit diskutierte Genderfrage ist an einem einzigen Beispiel aus dem Jahr 1912 erwähnt, daraus aber die allgemeine Schlussfolgerung formuliert: «Wildnis war eine Männersache, in der die Anwesenheit von Frauen nur stören konnte.» (S. 160)

Insgesamt ist der Band eine sehr wertvolle Darstellung zur Geschichte des Naturschutzes im Allgemeinen und der vielschichtigen Entwicklung des Schweizerischen Nationalparks im Speziellen. Die vielfältigen, im Verlaufe des rund hundertjährigen Betriebes des Parks und des institutionalisierten Naturschutzes wechselnden Sichtweisen sowie die ganz unterschiedlichen regionalen, nationalen und internationalen Interessen sind inhaltlich und formal ausgezeichnet dargestellt. Der Nationalpark ist in seiner heutigen Form nur aus dieser breit angelegten historischen Perspektive zu verstehen.

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Päuser, Sabine; Mörgeli, Christoph; Schaad, Urs B.: **Lifesavers for Millions**. Basel, Editiones Roches, 2012. 186 p. Ill. ISBN 978-3-907770-94-8 (also available in German; accessible online on http://www.roche.com/static/app/annual_report_2012/_data/pages/patent/pdf/roche-livesavers-for-millions.pdf)

In the 1950s, Félix Martí-Ibañez – psychiatrist, public relations specialist for the pharmaceutical industry, historian of medicine, and publisher (simultaneously) – produced a series of articles and volumes concerning the history of antibiotic development. With titles like *Men, Molds, and History* (1958) and *The Antibiotic Saga* (1960), his works took the form of cheerleading for the pharmaceutical industry, with

little attention paid to the tensions between medicine and marketing, economy and ecology. Nearly half a century later, clinician-historian Jeremy Greene wrote *Prescribing by Numbers* (2007), exploring the intra-company dynamics between medical and marketing departments in the evolving construction of disease categories and pharmaceutical markets. *Lifesavers for Millions*, a handsomely produced volume concerning three very important drugs, makes extensive use of Roche's archives, and kudos to Roche for opening up its archives to historical inquiry. Yet one wishes (perhaps naively, given company sponsorship of the volume) the authors had taken an approach closer to that of Greene than to that of Ibañez.

The volume's three authors – Sabine Päuser, Christoph Mörgeli, and Urs B. Schaad – respectively relate the biographies of three Roche anti-infectives: Isoniazid, Bactrim (trimethoprim-sulfamethoxazole), and Rocephin (ceftriaxone). The three drugs had unique trajectories, though doggedness and imagination were central to the development of each. Isoniazid – obtained via nicotinamide research, and whose antituberculosis properties were nearly simultaneously discovered by Roche, Bayer, and Squibb – revolutionized the treatment of tuberculosis upon its release in 1952. Its own derivative, Iproniazid, would be the first monoamine oxidase inhibitor used to treat depression. Bactrim – obtained via collaboration with Burroughs Wellcome, and existing as a fixed-dose combination of Wellcome's trimethoprim and Roche's sulfamethoxazole (itself purchased from the Japanese pharmaceutical company, Shinogi & Co., Ltd.) – served, upon its release in 1969, as a broad-spectrum antibiotic that served as a model of “synergistic” biological activity (its components worked on consecutive components in bacterial folate metabolism). It would later play a key role in bacterial prophylaxis throughout the AIDS epidemic. Rocephin – derived from synthetic cephalosporin research, navigated amidst existing patent hurdles – was launched in 1982. It became Roche's leading overall product by the late 1990s, on the basis of its broad spectrum of utility, pharmacokinetics that enabled daily dosing, and its consequent utility on the basis of both aspects for serving as “empiric” antibiotic therapy.

Several key themes emerge from the volume. The Isoniazid story draws attention to the complexities of “simultaneous” discovery, especially in a competitive world of constrained biological possibilities, shared public knowledge, and perhaps shared private knowledge. The Bactrim story best exemplifies the dynamic between medicine and marketing, to the point of relating Roche's use of “seeding” trials (giving Bactrim to investigators so as to increase its visibility), the co-introduction of antibiotic and antibiotic sensitivity kits (to determine whether given organisms were susceptible to the drug), and the remuneration of a key opinion leader for his public support of the new medication. The Roche-Burroughs Wellcome negotiations and relationship further highlights the tension between rational therapy and the acquisition (or even carving up) of medical marketplaces. Finally, the Rocephin story most vividly illustrates the relationship among patents, cost, and usage, with worldwide ceftriaxone usage greatly increased in the years after patent expiration and consequent dramatic price reduction.

There are some obvious, if superficial, missteps in the volume. It's unclear why a chapter on tuberculosis, at the same time focusing on the need for inexpensive point-of-care diagnostic tests, would incorporate a two-page spread on the use of positron emission tomography to aid in diagnosis. The claim that Bactrim alone – prescribed

for nearly two billion people, yet presumably often for upper respiratory tract and urinary tract infections – has single-handedly “saved more lives over the past forty years or so than all the lives claimed by war in human history” (estimated at 455 million people in the volume’s forward) seems remarkably far-fetched. Finally, the Rocephin chapter would have benefitted from footnotes and often reads like a company strategic analysis for expanding markets (indeed, part of the chapter depicts such an analysis).

More fundamentally, there were lost opportunities to further explore several deeper themes. With respect to medicine and the marketplace, the U.S. story regarding Bactrim would have been illustrative. Fixed-dose combination antibiotics had been promulgated in the U.S. throughout the 1950s, drawing the ire of therapeutic reformers who saw them as no better than their component drugs and embodying marketing over substance. Debate over such medicines led to the very construction of the Kefauver-Harris amendments of 1962, mandating proof of therapeutic efficacy prior to new drug approval, and to the subsequent withdrawal in 1969 of nearly all existing fixed-dose combination antibiotics (most famously, Upjohn’s Panalba) from the marketplace. Bactrim would represent the first fixed-dose combination antibiotic approved in the U.S. after such a dramatic withdrawal had taken place. It would be fascinating to see how Roche navigated this entry into the U.S. market. With respect to antibiotic *underuse*, tuberculosis drugs exemplify the tensions between patent protection and pharmaceutical incentivization on the one hand, and access on the other. This tension pervades the volume and merits further historical exploration. After all, the book’s introduction, written by Roche’s chief patent officer, notes of the volume’s three celebrated drugs: “All three products are today available as low-cost generics and they all feature on the WHO Model List of Essential Medicines. These innovative products are still benefitting patients today. Once put onto the market by Roche as medical innovations, they continue even now to save lives daily thanks to their wide availability.” With respect to antibiotic *overuse*, finally, a cited Rocephin strategic analysis, noting “the increasing development of resistance and the resultingly more restrictive recommendations for use” as a “threat” to Rocephin use, likewise begs for more extended analysis regarding the roles and responsibilities of the pharmaceutical industry (and drug regulators) in forestalling antibiotic resistance.

These are all topics for future studies. We should be grateful to Roche and to these authors for evincing these issues and tensions, though one hopes that further and deeper analyses are still to come.

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Schappach, Beate: **Aids in Literatur, Theater und Film.** Zur kulturellen Dramaturgie eines Störfalls. Zürich, Chronos Verlag, 2012. (Materialien des ITW Bern, Bd. 12). 184 S., 58 Ill. € 36.–. ISBN 978-3-0340-1122-8

1982 etablierte sich in der Weltöffentlichkeit das Akronym *A.I.D.S.* als Bezeichnung für eine neue tödliche Erkrankung. Pünktlich zu seinem 30. Jahrestag wird der Buchmarkt um eine lesenswerte Dissertation über die gesellschaftliche Auseinandersetzung mit der HIV-Bedrohung bereichert. Autorin dieses von der Philosophisch-