Martin Saxer begins his compelling, thoughtfully written ethnography of the creation of a Tibetan medical industry in China by reminding us that this story ‘reveals characteristic conjectures of our time’ (p. ix), namely assemblages of modernity, global forms of knowledge and circulation of things, and dynamics of culture therein. This work asks that readers grapple not only with the place of Tibet and Tibetanness in geopolitical machinations, but also with China’s position as a locus of global economic prowess and a place invested in the making and marketing of what the Comaroffs (2009) have famously dubbed ‘Ethnicity Inc’—albeit with Chinese characteristics. Added to these concerns is Saxer’s astute understanding of the role that morality and what he calls the ‘moral economy of Tibetanness’ plays in these ‘serious games’ (Ortner 1999) of cultural and socioeconomic transformation in the name of cultural preservation.

Saxer’s overarching goal is to show how the industrial turn in the production of Tibetan medicine has triggered a series of profound and ongoing changes from the ground up: how, by whom, and why materia medica is sourced; under what knowledge regimes and designations of quality, safety, and presumed efficacy formulas are prepared; how medicines are produced, packaged, and sold. Saxer’s study is also concerned with how Tibetan medicines themselves as well as the epistemology that underlies their creation are being reworked in the current moment, through state-mandated standards and other demonstrations of governmentality as well as through the heterogeneous voices and actions of Tibetan physicians, pharmacists, researchers, entrepreneurs, and consumers. Saxer states at the outset of his book that this is not a study of medical practice or consumption of Tibetan medicines. I would argue that he is being too modest. His work does indeed touch on the profound changes to medical practice and what the creation of this industry means to many different kinds of Tibetans; these are powerful if somewhat ghostly presences in his text. In other words, one cannot read this book without thinking about the on-the-ground changes to health care and the work of healing in Tibetan social worlds while reading this book, even if it is not the narrative’s main focus.

After an atmospheric Introduction—in which Saxer establishes his ethnographic voice and positionality as well as a sense of the social and discursive paradoxes at the heart of this study—the book proceeds through six principal chapters. Chapter 2 examines the history of the ‘science of healing’ or
Sowa Rigpa, a useful if imperfect gloss for all that is also evoked by the term ‘Tibetan medicine’. Specifically, Saxer locates this history of Sowa Rigpa resurgence and state-supported Tibetan medicine enterprises in China, against the backdrop of the development of Traditional Chinese Medicine (TCM) and its place within a socialist market economy, efforts at the privatisation of industry, and the standardisation of drug production and registration. Most useful here is Saxer’s neat assessment of what might otherwise feel like a labyrinth of modern Chinese regulation, including the Drug Administration Law and the implementation of Good Manufacturing Practices (GMP). Each is emblematic of regimes of science and state power and illustrations of ‘global forms’ (Ong and Collier 2005) of knowledge production.

In Chapter 3, Saxer homes in on medical production as it is being ideologically and practically challenged under new regimes such as GMP. This chapter might read as the most esoteric to the non-Tibetanist scholar. However, it lays the foundation for very compelling arguments later in the book, particularly about the extent to which the creation of this industry is a problem for reasons of rationalised bureaucracy and the nature of state-mandated legibility when it comes to the making of drugs, and/or the extent to which the problem is really more about points of cultural, historical, and political experiences of incommensurability.

Chapter 4 takes the reader through a literal and figurative tour of the ‘border regimes’ that govern what sorts of medicines get made, with what ingredients, and through which channels of regulation and distribution. In tracing networks of plant sources and resources, Saxer shows how Tibetan medical production dovetails with larger concerns over environmental degradation and industrial production methods. The vignette that opens the Introduction notwithstanding, this chapter provided the reader with the most enjoyable narrative experience. As readers, we get to travel through worlds from Xining to Lhasa to Kathmandu and back again, sensing the nuances of cultural difference along these routes and also getting to appreciate the complex socio-politics and moral economies of Tibetan medicines through the lives of herb traders, factory owners, and regulators on the ground.

Although less ethnographically grounded in some senses, Chapters 5 and 6 provide the richest conceptual discussions in the book. Chapter 5 explores the tricky and deeply interesting questions: ‘Who owns Tibetan medicine? To whom does it belong?’ This exploration into the politics of producing both material things and cultural knowledge tells us a lot about how intellectual property regimes are shaping and reshaping what counts as ‘traditional’ knowledge. This part of the book illustrates in some deeply ironic ways the dynamic by which traditional knowledge must be validated by modern science