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This book makes an important contribution to the burgeoning field of the anthropology of Tibetan medicine. The author has carried out fieldwork in a range of Tibetan medical contexts from 1995 up to the present day, and the book draws on the full range of this research. It is a multi-sited ethnography based primarily on fieldwork amongst Tibetan medical practitioners in a rural context in the remote location of Mustang in Nepal, and in the urban settings of modern Tibetan medical institutions in Lhasa in Central Tibet and in Xining in China's Qinghai Province, and partly on short field trips to Yunnan and Bhutan.

In Nepal, we are presented with Tibetan medicine in the context of rural medical practice, which lacks state support and is hampered by its associations with a marginalised cultural group. By contrast, the fieldwork in Tibet took place in the large, modern, state-supported Tibetan medical institutions of the Lhasa Mentsikhang, and the Arura Tibetan Medicine Institute. In comparing these locations, the book brings into question the dichotomies of tradition versus modernity and local versus global.

A diverse range of themes are considered in these various contexts. In Nepal, the book discusses the practice of local medical practitioners in Mustang, the obstacles to their practice and the ways that they have united under the Himalayan Amchi Association to represent their collective interests. The discussion of the medical institutions in Tibet considers the radical changes that have occurred since the 1990s with the introduction of market-based approaches to health care which culminated in China's entrance to the World Trade Organisation in 2001. This has led to the increasing commodification of Tibetan medicine and to the transformation of manufacturing procedures according to modern notions of Good Manufacturing Practices.

An additional strength of the book is its balance of description and analysis. Drawing on a methodology that bridges anthropology and the literary arts, each chapter of the book is made up of a series of ethnographic vignettes, which serve to illustrate the book's main theoretical premises. The book begins with one such ethnographic vignette where the author is confronted with the views of an American nurse practitioner working with an NGO in Lhasa, who has just returned from a field trip in East Tibet. In her reflections on the poor health conditions in the area, she questions the efficacy of Tibetan medicine and why the NGO she is working for is supporting it.
The book constitutes the author’s response to these questions. On one level, this response involves analysing the structures that give rise to health care inequalities, and to inequalities within health care systems. On another level, the response focuses on the notion of efficacy; two central questions are addressed here: how is efficacy determined? And what is at stake in these determinations?

The book presents the view that medical efficacy is not an isolated factor, but is contingent on variables within a given environment. The discussion thus draws on and contributes to the growing body of literature, which considers the values associated with a medical object as originating within a network of influences, an approach that has been variously termed ‘the social life of medicines’ or the ‘pharmaceutical nexus’. In the book, medical efficacy is strung over various realms of meaning; it is simultaneously a biopsychosocial and political-economic idea.

The innovation that the book takes in understanding this social field and its relationship to health and efficacy is its use of social ecology. The central argument of the book is that the idea of efficacy arises within a given social ecology. This social ecology is made up of a range of environmental, socio economic, biological, political, and cosmological factors, where value operates through global regimes of governance, conservation, development, science, and pharma business. The aim of the book is that through taking a social ecological approach we can expand our idea of efficacy.

Within a given social ecology, power plays a crucial role in determining how forms of knowledge and the objects produced through this knowledge are valued. Value thus takes a central place in the discussion. Drawing on political-economy, the book analyses the ways in which the recent modernisation and commodification of Tibetan medicine can be framed in changes in use-values and exchange-values. In addition, the book explores the different regimes of value that arise as science and medicine are transferred to other cultures. Thus, a major theme in the book is the tension that has arisen with the introduction of modern science as a measure of value in Tibetan medical contexts. This tension is clearly represented in the final chapter that discusses a clinical trial at the Lhasa Mentsikhang, which was supported by the US National Institutes of Health and the Gates Foundation. The trial compared the efficacy of the drug misoprostol with the Tibetan formulary zhije 11 for the prevention of postpartum haemorrhage.

A further theoretical strength of the book is that it contributes to the literature in medical anthropology, which highlights the heterogeneity of medical traditions. Various authors have shown how biomedical knowledge and practice vary within one society and also at an international level. In a like