

The Breast Cancer Wars Hope Fear And The Pursuit Of A Cure In Twentieth Century America

Since publication in 1958, George Rosen's classic book has been regarded as the essential international history of public health. Describing the development of public health in classical Greece, imperial Rome, England, Europe, the United States, and elsewhere, Rosen illuminates the lives and contributions of the field's great figures. He considers such community health problems as infectious disease, water supply and sewage disposal, maternal and child health, nutrition, and occupational disease and injury. And he assesses the public health landscape of health education, public health administration, epidemiological theory, communicable disease control, medical care, statistics, public policy, and medical geography. Rosen, writing in the 1950s, may have had good reason to believe that infectious diseases would soon be conquered. But as Dr. Pascal James Imperato writes in the new foreword to this edition, infectious disease remains a grave threat. Globalization, antibiotic resistance, and the emergence of new pathogens and the reemergence of old ones, have returned public health efforts to the basics: preventing and controlling chronic and communicable diseases and shoring up public health infrastructures that provide potable water, sewage disposal, sanitary environments, and safe food and drug supplies to populations around the globe. A revised introduction by Elizabeth Fee frames the book within the context of the historiography of public health past, present, and future, and an updated bibliography by Edward T. Morman includes significant books on public health history published between 1958 and 2014. For seasoned professionals as well as students, *A History of Public Health* is visionary and essential reading.

For nearly forty years, feminists and patient activists have argued that medicine is a deeply individualizing and depoliticizing institution. According to this view, medical practices are incidental to people's transformation from patients to patient activists. *The Biopolitics of Breast Cancer* turns this understanding upside down. Maren Klawiter analyzes the evolution of the breast cancer movement to show the broad social impact of how diseases come to be medically managed and publicly administered. Examining surgical procedures, adjuvant therapies, early detection campaigns, and the rise in discourses of risk, Klawiter demonstrates that these practices created a change in the social relations-if not the mortality rate-of breast cancer that initially inhibited, but later enabled, collective action. Her research focuses on the emergence and development of new forms of activism that range from grassroots patient empowerment to environmental activism and corporate-funded breast cancer awareness. *The Biopolitics of Breast Cancer* opens a window onto a larger set of changes currently transforming medically advanced societies and ultimately challenges our understanding of the origins, politics, and future of the breast cancer movement. Maren Klawiter holds a PhD in sociology from the University of California, Berkeley. She is currently pursuing a law degree at Yale University.

This handbook covers the technical, social and cultural history of surgery. It reflects the state of the art and suggests directions for future research. It discusses what is different and specific about the history of surgery - a manual activity with a direct impact on the patient's body. The individual entries in the handbook function as starting points for anyone who wants to obtain up-to-date information about an area in the history of

Access PDF The Breast Cancer Wars Hope Fear And The Pursuit Of A Cure In Twentieth Century America

surgery for purposes of research or for general orientation. Written by 26 experts from 6 countries, the chapters discuss the essential topics of the field (such as anaesthesia, wound infection, instruments, specialization), specific domains areas (for example, cancer surgery, transplants, animals, war), but also innovative themes (women, popular culture, nursing, clinical trials) and make connections to other areas of historical research (such as the history of emotions, art, architecture, colonial history). Chapters 16 and 18 of this book are available open access under a CC BY 4.0 license at link.springer.com

Hospices have played a critical role in transforming ideas about death and dying. Viewing death as a natural event, hospices seek to enable people approaching mortality to live as fully and painlessly as possible. Award-winning medical historian Emily K. Abel provides insight into several important issues surrounding the growth of hospice care. Using a unique set of records, *Prelude to Hospice* expands our understanding of the history of U.S. hospices. Compiled largely by Florence Wald, the founder of the first U.S. hospice, the records provide a detailed account of her experiences studying and caring for dying people and their families in the late 1960s and early 1970s. Although Wald never published a report of her findings, she often presented her material informally. Like many others seeking to found new institutions, she believed she could garner support only by demonstrating that her facility would be superior in every respect to what currently existed. As a result, she generated inflated expectations about what a hospice could accomplish. Wald's records enable us to glimpse the complexities of the work of tending to dying people.

Documents the celebrated 1967 article by an Italian surgeon who concluded that Rembrandt's model and mistress, Hendrickje Stoffels, died of breast cancer, and continues with a narrative history of the disease, its treatments, and several of its noteworthy patients.

In this "powerful and unflinching page-turner" (*New York Times*), a healthcare journalist examines the science, history, and culture of breast cancer. As a health-care journalist, Kate Pickert knew the emotional highs and lows of medical treatment well -- but always from a distance, through the stories of her subjects. That is, until she was unexpectedly diagnosed with an aggressive type of breast cancer at the age of 35. As she underwent more than a year of treatment, Pickert realized that the popular understanding of breast care in America bears little resemblance to the experiences of today's patients and the rapidly changing science designed to save their lives. After using her journalistic skills to navigate her own care, Pickert embarked on a quest to understand the cultural, scientific and historical forces shaping the lives of breast-cancer patients in the modern age. Breast cancer is one of history's most prolific killers. Despite billions spent on research and treatments, it remains one of the deadliest diseases facing women today. From the forests of the Pacific Northwest to an operating suite in Los Angeles to the epicenter of pink-ribbon advocacy in Dallas, Pickert reports on the turning points and people responsible for the progress that has been made against breast cancer and documents the challenges of defeating a disease that strikes one in eight American women and has helped shape the country's medical culture. Drawing on interviews with doctors, economists, researchers, advocates and patients, as well as on journal entries and recordings collected over the author's treatment, *Radical* puts the story of breast cancer into context, and shows how modern treatments represent a long overdue shift

Acces PDF The Breast Cancer Wars Hope Fear And The Pursuit Of A Cure In Twentieth Century America

in the way doctors approach cancer -- and disease -- itself.

A feminist and Foucauldian analysis of a variety of emerging gendered discourses. An investigative journalist offers a report on the current research, politics, and economics behind breast cancer, from the heights of the nation's capital to the labs of genetic researchers to the private dramas of individual patients

Breast Cancer Screening: Making Sense of Complex and Evolving Evidence covers broad aspects of breast cancer screening specifically focusing on current evidence, emerging evidence, and issues that will be critical for future breast screening practice such as tailored screening and shared decision-making in breast screening. The scope of the book is relevant to a global audience. This book provides balanced perspectives on this increasingly controversial topic, using scientific evidence to explain the evolution of knowledge relating to breast cancer screening. Breast Cancer Screening covers the key points related to this debate including the context of increasingly complex and conflicting evidence, divergent opinions on the benefits and harms of breast screening, and variability in screening practice and outcomes across settings around the world. Explains complex and evolving evidence on breast screening with a balanced approach Provides balanced information and up-to-date evidence in an increasingly complex area Addresses emerging topical issues such as screening trials of digital breast tomosynthesis, tailored breast screening, and shared decision-making in breast screening Assists academics and researchers in identifying areas needing further research Chronicles the various campaigns waged against breast cancer and its effects on women during the last century.

Medical Sociology is the among the largest and first subdisciplines in Sociology. This series presents issues and concerns in Medical Sociology.

Did Martin Luther King's spiritual understanding of political struggle truly help the Civil Rights movement? Can breast cancer victims incorporate both spiritual wisdom and political action in their fight for life? Confronting questions that challenge the foundations of both politics and spirituality, Roger S. Gottlieb presents a brave new account

Original essays by leading media scholars and historians of medicine that explore the rich history of health-related films.

Eleven essays by historians and sociologists examine cancer research and treatment as everyday practice in post-war Europe and North America. These are not stories of inevitable medical progress and obstacles overcome, but of historical contingencies, cultural differences, hope, and often disappointed expectations.

Marrying great storytelling to an exploration of the intersection of science, journalism, fame, and legend, this book is a groundbreaking contribution to our understanding of health and illness.

A vital collection of essays on women's health and women's health studies, edited by leaders in the field.

The book examines the social and cultural context of new genetic knowledge associated with breast cancer. It looks at how this knowledge and technologies are used and received in two contrasting social arenas - cancer genetic clinics and a breast cancer research charity.

Between the years 1918 and 1920, influenza raged around the globe in the worst pandemic in recorded history, killing at least fifty million people, more than half a million of them Americans. Yet despite the devastation, this catastrophic event seems but a forgotten moment in our nation's past. American Pandemic offers a much-needed corrective to the silence surrounding the influenza outbreak. It sheds light on the social and cultural history of Americans during the pandemic,

uncovering both the causes of the nation's public amnesia and the depth of the quiet remembering that endured. Focused on the primary players in this drama--patients and their families, friends, and community, public health experts, and health care professionals--historian Nancy K. Bristow draws on multiple perspectives to highlight the complex interplay between social identity, cultural norms, memory, and the epidemic. Bristow has combed a wealth of primary sources, including letters, diaries, oral histories, memoirs, novels, newspapers, magazines, photographs, government documents, and health care literature. She shows that though the pandemic caused massive disruption in the most basic patterns of American life, influenza did not create long-term social or cultural change, serving instead to reinforce the status quo and the differences and disparities that defined American life. As the crisis waned, the pandemic slipped from the nation's public memory. The helplessness and despair Americans had suffered during the pandemic, Bristow notes, was a story poorly suited to a nation focused on optimism and progress. For countless survivors, though, the trauma never ended, shadowing the remainder of their lives with memories of loss. This book lets us hear these long-silent voices, reclaiming an important chapter in the American past.

Through the first half of the twentieth century, emotions were a legitimate object of scientific study across a variety of disciplines. After 1945, however, in the wake of Nazi irrationalism, emotions became increasingly marginalized and postwar rationalism took central stage. Emotion remained on the scene of scientific and popular study but largely at the fringes as a behavioral reflex, or as a concern of the private sphere. So why, by the 1960s, had the study of emotions returned to the forefront of academic investigation? In *Science and Emotions after 1945*, Frank Biess and Daniel M. Gross chronicle the curious resurgence of emotion studies and show that it was fueled by two very different sources: social movements of the 1960s and brain science. A central claim of the book is that the relatively recent neuroscientific study of emotion did not initiate – but instead consolidated – the emotional turn by clearing the ground for multidisciplinary work on the emotions. *Science and Emotions after 1945* tells the story of this shift by looking closely at scientific disciplines in which the study of emotions has featured prominently, including medicine, psychiatry, neuroscience, and the social sciences, viewed in each case from a humanities perspective.

We often hear stories of people in terrible and seemingly intractable situations who are preyed upon by someone offering promises of help. Frequently these cases are condemned in terms of "exploiting hope." These accusations are made in a range of contexts: human smuggling, employment relationships, unproven medical 'cures.' We hear this concept so often and in so many contexts that, with all its heavy lifting in public discourse, its actual meaning tends to lose focus. Despite its common use, it can be hard to understand precisely what is wrong about exploiting hope what can accurately be captured under this concept, and what should be done. In this book, philosopher Jeremy Snyder offers an in-depth

study of hope's exploitation. First, he examines the concept in the abstract, including a close look at how this term is used in the popular press and analysis of the concepts of exploitation and hope. This theory-based section culminates in a definitive account of what it is to exploit hope, and when and why doing so is morally problematic. The second section of the book examines the particularly dangerous cases in which unproven medical interventions target the most vulnerable: for example, participants in clinical trials, purchasing unproven stem cell interventions, "right to try" legislation, and crowdfunding for unproven medical interventions. This book is essential reading for ethical theorists, policymakers, and health researchers, on a topic of growing visibility and importance.

Vividly showcasing diverse voices and experiences, this book illuminates an all-too-common experience by exploring how women respond to a diagnosis of breast cancer. Drawing from interviews in which women describe their journeys from diagnosis through treatment and recovery, Julia A. Ericksen explores topics ranging from women's trust in their doctors to their feelings about appearance and sexuality. She includes the experiences of women who do not put their faith in traditional medicine as well as those who do, and she takes a look at the long-term consequences of this disease. What emerges from her powerful and often moving account is a compelling picture of how cultural messages about breast cancer shape women's ideas about their illness, how breast cancer affects their relationships with friends and family, why some of them become activists, and more. Ericksen, herself a breast cancer survivor, has written an accessible book that reveals much about the ways in which we narrate our illnesses and about how these narratives shape the paths we travel once diagnosed.

Nursing History Review, an annual peer-reviewed publication of the American Association for the History of Nursing, is a showcase for the most significant current research on nursing history. Regular sections include scholarly articles, over a dozen book reviews of the best publications on nursing and health care history that have appeared in the past year, and a section abstracting new doctoral dissertations on nursing history. Historians, researchers, and individuals fascinated with the rich field of nursing will find this an important resource.

Highlights from Volume 12: Nursing in Nationalist China, John Watt Coronary Care Nursing Circa 1960s, Arlene Keeling A Memorial to Barbara Bates (1928-2002) Regulation of African-American Midwifery, Zeina Omisola Jones Provides the latest information on breast cancer, discussions include building a support team, follow-up-care, and treatment options.

Modern scientific tools can identify a genetic predisposition to cancer before any disease is detectable. Some women will never develop breast or ovarian cancer, but they nevertheless must decide, as a result of genetic testing, whether to have their breasts and ovaries removed to avoid the possibility of disease. The striking contrast between the sophistication of diagnosis and the crudeness of preventive surgery forms the basis of historian Ilana Löwy's important study. Löwy traces the

Access PDF The Breast Cancer Wars Hope Fear And The Pursuit Of A Cure In Twentieth Century America

history of prophylactic amputations through a century of preventive treatment and back to a long tradition of surgical management of gynecological problems. In the early twentieth century, surgeons came to believe that removing precancerous lesions -- a term difficult to define even today -- averted the danger of malignancy. This practice, Löwy finds, later led to surgical interventions for women with a hereditary predisposition to cancer but no detectable disease. Richly detailed stories of patients and surgeons in the United States, France, and the United Kingdom allow Löwy to compare the evolution of medical thought and practice -- and personal choice -- in these different cultures. *Preventive Strikes* aims to improve our understanding of professional, social, and cultural responses to cancer in the twenty-first century and to inform our reflections about how values are incorporated into routine medical practices. -- Iona Heath
First Published in 2004. Routledge is an imprint of Taylor & Francis, an informa company.

The first comparison of the breast cancer and the prostate cancer movements *Cancer Activism* explores the interplay between advocacy, the media, and public perception through an analysis of breast cancer and prostate cancer activist groups over a nearly twenty-year period. Despite both diseases having nearly identical mortality and morbidity rates, Karen M. Kedrowski and Marilyn Stine Sarow present evidence from more than 4,200 news articles to show that the different groups have had markedly different impacts. They trace the rise of each movement from its beginning and explore how discussions about the diseases appeared on media, public, and government agendas. In an important exception to the feminist tenet that women as a group hold less power than men, Kedrowski and Sarow demonstrate that the breast cancer movement is not only larger and better organized than the prostate cancer movement, it is also far more successful at shaping media coverage, public opinion, and government policy. "Samantha King explains how, beyond being an all-too-frequent and still-too-lethal disease for many women, breast cancer is a corporate dream come true." —Herizons "Fascinating. King's deft and thoughtful interpretation of the pink ribbon phenomenon is an important wake-up call. Going against the grain, she takes a clear-eyed look at a trend that often seems to outshine the disease that put it on the map." —Women's Review of Books "King's criticisms of breast-cancer philanthropy provide a new means of looking at one of our culture's most celebrated causes. For anyone who has ever squirreled away yogurt lids for the cause, Pink Ribbons, Inc. is food for thought." —Bitch "A fascinating read for anyone whose life has been touched by breast cancer." —Curve "Breast cancer advocacy is being transformed from meaningful civic participation into purchasing products. To understand the personal, social, and political costs, read this book." —Barbara Brenner, Executive Director of Breast Cancer Action In *Pink Ribbons, Inc.*, Samantha King traces how breast cancer has been transformed from a stigmatized disease and individual tragedy to a market-driven industry of survivorship. Here, for the first time, King questions the effectiveness and

legitimacy of privately funded efforts to stop the epidemic among American women. Highly revelatory-at times shocking-Pink Ribbons, Inc. challenges the commercialization of the breast cancer movement. Samantha King is associate professor of physical and health education and women's studies at Queen's University, in Kingston, Ontario

An inspiring and profoundly enlightening exploration of one doctor's discovery of how hope can change the course of illness Since the time of the ancient Greeks, human beings have believed that hope is essential to life. Now, in this groundbreaking book, Harvard Medical School professor and New Yorker staff writer Jerome Groopman shows us why. The search for hope is most urgent at the patient's bedside. *The Anatomy of Hope* takes us there, bringing us into the lives of people at pivotal moments when they reach for and find hope--or when it eludes their grasp. Through these intimate portraits, we learn how to distinguish true hope from false, why some people feel they are undeserving of it, and whether we should ever abandon our search. Can hope contribute to recovery by changing physical well-being? To answer this hotly debated question, Groopman embarked on an investigative journey to cutting-edge laboratories where researchers are unraveling an authentic biology of hope. There he finds a scientific basis for understanding the role of this vital emotion in the outcome of illness. Here is a book that offers a new way of thinking about hope, with a message for all readers, not only patients and their families. "We are just beginning to appreciate hope's reach," Groopman writes, "and have not defined its limits. I see hope as the very heart of healing."

In this energetic new study, Wendy Mitchinson traces medical perspectives on the treatment of women in Canada in the first half of the twentieth century. It is based on in-depth research in a variety of archival sources, including Canadian medical journals, textbooks used in many of Canada's medical faculties, popular health literature, patient case records, and hospital annual reports, as well as interviews with women who lived during the period. Each chapter examines events throughout a woman's life cycle – puberty, menstruation, sexuality, marriage and motherhood – and the health problems connected to them – infertility, birth control and abortion, gynaecology, cancer, nervous disorders, and menopause. Mitchinson provides a sensitive understanding of the physician/patient relationship, the unease of many doctors about the bodies of their female patients, as well as overriding concerns about the relationship between female and male bodies. Throughout the book, Mitchinson takes care to examine the roles and agency of both patients and practitioners as diverse individuals.

In *Meeting Psychosocial Needs of Women with Breast Cancer*, the National Cancer Policy Board of the Institute of Medicine examines the psychosocial consequences of the cancer experience. The book focuses specifically on breast cancer in women because this group has the largest survivor population (over 2 million) and this disease is the most extensively studied cancer from the

standpoint of psychosocial effects. The book characterizes the psychosocial consequences of a diagnosis of breast cancer, describes psychosocial services and how they are delivered, and evaluates their effectiveness. It assesses the status of professional education and training and applied clinical and health services research and proposes policies to improve the quality of care and quality of life for women with breast cancer and their families. Because cancer of the breast is likely a good model for cancer at other sites, recommendations for this cancer should be applicable to the psychosocial care provided generally to individuals with cancer. For breast cancer, and indeed probably for any cancer, the report finds that psychosocial services can provide significant benefits in quality of life and success in coping with serious and life-threatening disease for patients and their families.

Introduction : what's the harm? -- The discovery of drunk driving -- Science and government enter the fray -- The MADD mothers take charge -- The movement matures and splinters -- Lamb, lightner, and libertarians : a backlash -- Conclusion: more (and more) stories.

Unlike any other volume focusing on women's health issues, this collection brings together a wealth of cross-disciplinary perspectives to bear on the intersection of breasts and medicine. Among other works on similar subject matters, the academic versatility of this volume is unparalleled. This collection can serve as a textbook in a wide range of courses including those in philosophy, women's studies, biology, psychology, literature, history, and medicine.

Anyone who has been diagnosed with breast cancer or knows someone who has been diagnosed with breast cancer recognizes that cancer raises a host of questions concerning its nature and how we treat it. Such questions frame the difficult decisions that patients must make about their treatment and care.

Thinking Through Breast Cancer is a philosophical investigation of how breast cancer is described, explained, evaluated, and socialized in medicine. Written by a breast cancer survivor, the book interweaves personal experience with a systematic breakdown of key and highly pertinent philosophical concepts, and brings to light insights that emerge in metaphysics, epistemology, ethics, social and political philosophy, and bioethics. Further, it is an investigation of the ethical implications of understanding breast cancer. Cutter seamlessly combines clinical information with philosophical analysis and makes recommendations as to how we can navigate the complex and, at times, uncertain terrain of breast cancer knowledge and care. In this way, the book is not simply a survey of what we know about breast cancer, but a personal search for guidance about navigating the complex, confusing, and frightening terrain of breast cancer diagnosis, treatment, and survival.

Self-breast examination and annual mammography is important in detecting breast cancer in its early stage. Reporting any abnormalities of the breast early and getting treatment early is the key to survival.

This volume focuses on gynaecological cancer to explore the ways in which

gender has shaped medical and public health responses to cancer in England. Rooted in gendered perceptions of cancer risk, medical and public health efforts to reduce cancer mortality since 1900 have prominently targeted women's cancers. Women have also been key participants in the 'war' on cancer through their various roles as medical practitioners, midwives, nurses, health visitors, radiotherapists and cytotechnicians. Moscucci's study traces this complex history from the establishment of 'early detection and treatment' policies aimed at cervical cancer, to the controversial development of prophylactic oophorectomy as a strategy for the prevention of ovarian cancer. Women's cancers are highly visible in modern English society as symbols of progress in cancer therapy and prevention. The account offered in this volume reveals a different story, marked by hopes and fears, expectations and disappointments.

, ,Scientific Characters chronicles the contests over character, knowledge, trust, and truth in a politically charged scientific controversy that erupted after a 1994Chicago Tribune headline: "Fraud in Breast Cancer Research: Doctor Lied on Data for Decade." Moving back and forth between news coverage, medical journals, letters to the editor, and oncology pamphlets, Lisa Keränen draws insights from rhetoric, literary studies, sociology, and science studies to analyze the roles of character in shaping the outcomes of the "Datagate" controversy.,

In the late 1980s, a promising new treatment for breast cancer emerged: high-dose chemotherapy with autologous bone marrow transplantation or HDC/ABMT. By the 1990s, it had burst upon the oncology scene and disseminated rapidly before having been carefully evaluated. By the time published studies showed that the procedure was ineffective, more than 30,000 women had received the treatment, shortening their lives and adding to their suffering. This book tells of the rise and demise of HDC/ABMT for metastatic and early stage breast cancer, and fully explores the story's implications, which go well beyond the immediate procedure, and beyond breast cancer, to how we in the United States evaluate other medical procedures, especially life-saving ones. It details how the factors that drove clinical use--patient demand, physician enthusiasm, media reporting, litigation, economic exploitation, and legislative and administrative mandates--converged to propel the procedure forward despite a lack of proven clinical effectiveness. It also analyzes the limited effect of technology assessments before randomized clinical trials evaluated decisively the procedure and the ramifications of this system on healthcare today. Sections of the book consider the initial conditions surrounding the emergence of the new breast cancer treatment, the drivers of clinical use, and the struggle for evidence-based medicine. A concluding section considers the significance of the story for our healthcare system.

[Copyright: 614b19291fcd11f8350c7e29c7c63831](https://doi.org/10.1017/9781017006383)