
This is an impressive account of the encounter of the peoples of Safavid and Qajar Iran (c. 1500-1900) with alcohol (mainly wine), opium, tobacco, coffee and tea. The author draws on a host of primary and secondary, indigenous and foreign, as well as normative and descriptive, sources to delineate a complex and sometimes surprising story. His overall perspective is a healthy corrective to tired and unsupportable views of a declining Middle East after 1500. Instead, he appropriately considers the introduction and spread of these substances as a mark of a “vibrant rather than an atrophying society” (4). Readers here will look in vain for simple-minded general statements, but rather will find nuanced discussions of patterns changing over time and place. And, much to his credit, Matthee constantly seeks to distinguish between the ideal and the real in Iranian society and life. Finally, he is very good at finding traces of evidence embedded in otherwise irrelevant narratives.

Five chapters treat wine, opium and coffee during the Safavid era (until the early eighteenth century) while another four examine wine, opium and tobacco, coffee and tea during the subsequent Qajar era. The introduction and conclusion both are useful. I found the opening overview chapter that gave a mini-history of the Safavid and Qajar periods to be unhelpful and distracting but non-specialists in Middle East history may disagree.

All five of the drugs and stimulants, Matthee demonstrates, were available and in use during the periods under study. The “key” to the specific ways in which they were used and understood rested in the particular cultural context, defined as “an assembly of cultural traits such as social structures, customary behavior, ideas, words, and material objects that made sense to contemporaries as elements of their world” (294). Matthee is no mere emulationist; while at times he does emphasize emulation as an important element explaining transmission, his analysis is more complicated. Thus, for example, the highly visible use of wine in the early Safavid court did not percolate down into the rest of society. Rather, the first Safavid shahs could drink openly and heavily precisely because such behavior marked and was appropriate to charismatic kingship. By contrast, later Safavid monarchs and their Qajar successors did not possess such legitimacy and needed to be more publicly circumspect in their drinking. Matthee offers persuasive explanations for the apparently-contradictory presence of substance use together with piety, among the ulema and others. At the same time, he repeatedly shows that widespread use almost always was not abuse, as, for example, opium addiction became in China. More generally, he demonstrates that commodities usually spread from towns into the countryside. His analysis also gives credit to non-cultural factors, notably economics and geography. For example, the later nineteenth-century conquest of tea over coffee derived from the growing price gap between the
two and the important role of Russia.

As the text develops, the author increasingly warms to the historiographical issues concerning receptivity to drugs and stimulants including class and location, but does not deal with it directly until the middle of the text (191). These issues are important enough to his subject, however, that they ought to have been a central part of the introduction. Thus, he warns us to take care in assessing observers’ (especially Europeans’) assertions that use of a particular substance was “common”. The substance may have been commonly used among government officials but not at all among urban merchants. And so, he correctly admonishes us to pay attention to chronology, location – north, south, urban, rural – and also class – aristocrat, ulama, merchant, or peasant. Such careful attention often leads him to subtle presentations of stimulant use.

Overall, the sources utilized offer rather more information on elites and urban populations and rather less on non-elites and rural dwellers. Given the nature of the sources available to Iranian specialists, such biases are difficult to overcome. But they do result in a somewhat distorted image of Iranian society – the peasants and workers remain distant and vague figures while rulers and aristocrats are more sharply defined. And, the sources push the narrative towards weighting the normative at the expense of the real. The author is well aware of these problems, but they nonetheless do persist.

Nevertheless, this is an excellent book of great utility. It opens up new avenues of understanding social history for Middle East historians. It is of at least equal value to readers of this journal seeking to understand stimulant and drug use in a region previously known mainly through stereotypes. This book will be read with much profit by specialists and generalists alike.


Narcotic Culture: A History of Drugs in China is a collaborative work by Frank Dikötter (one of the most prolific historians of modern China), Lars Laamann, and Zhou Xun. This study is an ambitious history of drugs in China from the late Ming dynasty (1368-1644) to the founding of the People’s Republic in 1949. The authors analyse an impressive range of Chinese, English, and various European language research materials from archives scattered across the globe. No Japanese language primary sources are cited, which is curious since the authors examine regions (for example, the Northeast and Taiwan) that were ruled by the Japanese who, at times, played signal roles in the development of their drug cultures. Several works by Japanese authors in different languages are referenced, but there is a voluminous Japanese language literature that could shed even further light on this subject. The book is graced with an extensive bibliography, general index, useful character lists, and illustrations that vividly represent the glamour and dread often associated with drug use.

The study proceeds in a roughly chronological fashion through eleven chapters that situate drugs within various milieus, analysing subjects such as different types of drugs and the sources of their popularity, smoking culture, narcophobia, addiction cures, and the syringe. This structure works well in support of the authors’ main argument, that Chinese were not victims of an international opium plague, but rather were drug users who made disciplined choices based on moderate usage. Chief aims of this work include questioning the premises of narcophobic discourse and the politics of prohibi-
tion that structured medical understandings of addiction through moral attitudes and political strategies, thereby turning opium into a rallying point, especially for nationalist critiques of foreign imperialism. The remedies put forward to end smoking opium (for example, morphine and asylums) are shown to have “exacerbated rather than contained a ‘drug problem’” (9). The ultimate “cure,” prohibition, engendered corruption, a black market, and a criminal underclass.

The book’s premise – that opium use in China was overwhelmingly moderate and not detrimental to the health and well-being of users – is controversial despite the findings of the Royal Commission on Opium (1894-95), which found that opium had few harmful effects on the body, apart from inducing constipation and possibly impairing sexual capacity. In *Narcotic Culture*, the smoking of opium is consistently depicted as a conscious choice for which users sought reliable, not infinite, supplies of the drug, a pursuit equated with tobacco smoking. Opium, as a “culturally privileged intoxicant” (93) was employed in a wide range of forms and capacities, from health tonics and “pick-me-ups” to replacement of food and, perhaps most importantly, as a social lubricant. China’s “culture of constraint” is argued to have mitigated excessive use, making opium only “problematic for a minority of smokers with personal or social problems” (75). Thus, opiates were most commonly employed as a medicinal product, to fulfill roles in controlling pain and a host of other bodily ailments in a society that lacked aspirin and penicillin; accounts by medical professionals, social commentators, and users are cited in evidence. The value of opiates to self-medication is repeatedly argued, although testimonials from users are, for obvious reasons, problematic.

The demonization of opium occurred as Qing (1644-1912) officials launched the world’s first war on drugs. Legislation dating from the 1720s demonstrated growing alarm over social order as scholar-officials sought to regain the position of collective power and moral authority they had enjoyed during the Ming. Prohibition was deeply implicated in debates over morality and political control. Qing activists depicted users as hapless victims trapped in ruinous poverty, a narrative dismissed by Dikötter, Laamann, and Zhou as “simplistic” (56). But while arguing that most users were able to carefully gauge consumption, the authors could justifiably extend more recognition to harms that resulted from “problem” usage, especially since as early as 1720 the Yongzheng emperor publicly lamented the heavy toll inflicted by heavy drug users: “their families’ livelihood vanishes, and nothing is left but trouble” (34). Countless individuals and families were believed to have been devastated by problematic drug use despite the authors’ assertions that underlying problems (such as poverty or disease) were to blame. Such contradictory stances make the mid-Qing emergence of medical understandings of *yin* (craving) and their ramifications worthy of even greater analysis, as suggested by the example of Yan Fu, one of modern China’s most prominent reformers. Yan repeatedly attempted to overcome his opium cravings, only to die from complications from asthma shortly after he was successful, raising the difficult question of what caused his death: asthma, smoking opium, or his refusal to continue treating his asthma by smoking opium?

*Narcotic Culture* problematizes opium’s prohibition, a “cure which was far worse than the disease” (207). The authors adopt a stance towards the recreational use of drugs that will no doubt rattle many. Arguments that morphine and heroin in pill form had “few concrete drawbacks” to their dissemination may be factual, but these factors also made them ruinous. Comparing heroin, morphine, and opium to bicycles, as part of a general craze for foreign goods, will hopefully arouse even further, much-needed dialogue on drugs and addiction. In the conclusion, the authors suggest that “narcotic
culture is well and truly dead” (210). But judging from the many guises of drugs that the authors outline, China’s narcotic culture has merely embarked on a new, equally controversial stage of a now-international war against drugs.


Scholars interested in the history of commercial brewing in Europe will welcome this English translation of Kristof Glamann’s history of the Danish brewing industry from the late Middle Ages through 1900. For the period through 1800, Glamann describes the kinds of beer Danes drank, brewers’ production processes, and the important role played by government policies in shaping the industry. Glamann argues that traditional handicraft brewing persisted in Denmark until the late nineteenth century when the increased scientific understanding of the brewing process coupled with the development of large-scale breweries using new technologies transformed the industry and established the basis of the modern, scientific brewing.

In examining the industry’s history before 1800, Glamann focuses on two main themes: technology and political economy. In the first chapter Glamann provides an especially valuable discussion of the inputs and brewing technologies used by Denmark’s brewers during the early modern era through the early decades of the nineteenth century. Based on contemporary sources, Glamann shows the reader step-by-step the processes by which brewers acquired and prepared their grains and hops. He then takes the reader into the brew house and provides a detailed analysis of the brewing itself. Glamann also details the numerous qualities and varieties of beer, including imports, from which consumers could choose.

Glamann’s second chapter analyzes the brewers’ efforts to establish guilds and the impact of government legislation in shaping the growth and productivity of the industry until the beginning of the nineteenth century. Glamann details how brewers’ guilds were established in Helsignor and in Copenhagen, gradually eliminating entry into the industry through government regulations. He provides a detailed analysis of the regulation of the brewing industry within the broader context of the crown’s effort to regulate Danish industry more generally. The introduction of excise taxes on beer in the seventeenth century was part of a larger royal effort to raise tax revenues, a process that resulted in an assize that regulated the price of beer (and other foodstuffs). To protect local brewers, the crown introduced prohibitive tariffs on German beers and the market for the once-thriving imports vanished. Finally, Glamann extensively describes the numerous conflicts between the Copenhagen brewers’ guild and the Royal Brew House that had been established by the crown to supply the Danish navy.

The following chapter presents a detailed case study of the sales cartel established in Copenhagen by the crown and brewers. Here Glamann examines the various motives and efforts to regulate the cartel that operated in Copenhagen between 1739 and 1805. He treats in extensive detail the numerous royal commissions that investigated and regulated the industry. He also describes the incessant wrangling within the industry and between the brewers and government authorities.

Glamann argues that, from a technical standpoint, the regulations led to the persistence of medieval brewing practices in Denmark through the early modern era. Although not all the beers brewed in Copenhagen were subject to the assize, Glamann shows
how the regulations established by the crown for fiscal reasons shaped the industry’s
technology and structure. As a result of the regulations, numerous small-scale brewer-
ies with an output of 2,000 barrels or less continued to operate. Glamann contrasts this
with the development of porter brewing in London during the late eighteenth century
where mid-sized to large breweries produced between 40,000 and 120,000 barrels. The
officially sanctioned cartel came under increasing pressure in the late eighteenth
century, finally breaking down in 1805 when the guild was disbanded, setting the stage
for the modernization and concentration of the Danish brewing industry.

In the final chapter, Glamann provides a succinct and very readable analysis of the
transformation of the Danish brewing industry during the nineteenth century, illustrating
the European-wide processes of technological diffusion and innovation that character-
ized brewing. Glamann shows how Bavarian lager beers, not English porter, would
prove to be the model on which the Danish industry would grow. Over the course of
the century, the scale of Danish breweries increased as new beer types and production
processes were introduced. Glamann describes the first attempts to introduce Bavari-
an brewing technology in 1830s and the commercial success that occurred after 1850
when Carlsburg and other brewers adopted new technologies, including mechanization
and steam. He also considers the impact of Pasteur’s insight into the role played by
yeast in the process of fermentation and the subsequent work by the Danish scientist
Emil Hansen in establishing cultured yeast, which gave brewers greater control over
the brewing process and helped establish the basis of modern, scientific brewing.

The translation has its shortcomings: twice, the reader is referred to appendices not
included in the translation (49, 56). For these and other appendices, the reader will
have to turn to the original. The book also would benefit from an index, a bibliography,
and a key to the abbreviations used in citing the location of the archival materials that
underpin much of the study.

Scholars interested in the comparative dimensions of European brewing will ap-
preciate this translation of Glamann’s book originally published in 1962. Placed in
the comparative framework of other studies of the brewing industry in pre-industrial
Europe, Glamann’s study illustrates the important role played by government policies
in shaping the kinds of beers that were sold and the size and efficiency of Denmark’s
brewing industry before 1800. Glamann’s book also nicely illustrates the remarkable
transformation of brewing in Denmark during the nineteenth century. Its translation
makes an important contribution to the English language scholarship on the history of
the European brewing industry.

Allan M. Brandt. The Cigarette Century: The Rise, Fall, and Deadly Persistence of
York, Stony Brook.

In his introduction to The Cigarette Century, Allan M. Brandt, the Amalie Moses Kass
Professor of the History of Medicine at Harvard Medical School, declares that very
little of twentieth-century American history was “truly smoke-free” (3). Brandt rein-
forces this claim through his detailed analysis of the cigarette’s prominence in Ameri-
can culture, science, politics, and law before expanding his examination to include the
globalization of the (American) cigarette. As such, this volume crosses the boundaries
among the histories of medicine, public health, consumption, gender, law, and regula-
tion. Ultimately, the book underscores the utility of the cigarette’s history in understanding how “a culture constitutes and assesses the risks of life – and death” (13).

Brandt has structured his study according to the five themes referenced above, beginning with three chapters under the heading of “Culture.” Within this section, he outlines the cigarette’s transformation into the preeminent form of tobacco consumption, pointing toward important technological advances that allowed for the mass production of cigarettes, the cigarette’s fit with war and the modern pace of life, and the crucial roles played by advertising and film in establishing meaning(s) for both the commodity and act of smoking. He correctly notes that the cigarette’s “rise” was contested, be it by the federal government breaking up the American Tobacco Trust built by James “Buck” Duke or an anti-smoking movement that was closely aligned with the temperance movement. These efforts failed to prevent the cigarette from becoming the “ideal product for the modern age,” a development that put an anti-tobacco movement based on Victorian ideals and values at odds with a larger and more powerful force: consumer culture (61). Advertisers and public relations experts helped the tobacco companies propel the cigarette to its triumph, employing innovative marketing methods that enabled cigarettes to be “virtually all things to all people” (100).

The health-related aspects of cigarette use come under closer scrutiny in the second section of the book, “Science,” beginning with a look at scientific studies on smoking between the 1920s and early 1940s. The dilemma posed by cigarette smoking forced scientists to reconsider basic questions of methodology since prevailing theories of disease causation did not fit. The emergence of epidemiological studies in the 1940s and 1950s provided knowledge generated outside of the laboratory, offering evidence of statistical links between smoking and a variety of diseases, including lung cancer. This new data, as Brandt notes, was subject to scientific scrutiny and produced a legitimate “controversy” over the application of statistical methods to studies of causation. This authentic debate, however, soon gave way to consensus except for a minority of skeptics, increasingly tied to the tobacco industry. The final chapter in this section, “Constructing Controversy,” focuses on the industry’s utilization of science in the name of public relations to offer consumers reassurances about safety. Through the use of internal memos and studies made available via litigation beginning in the 1980s, Brandt effectively contrasts the industry’s public stance that there was “no proof” with private research that revealed cigarettes were a cause of lung cancer. In the end, he decries the long-term damage the industry’s public relations strategy causes to the public’s belief and confidence in science, the media, and corporate America (204).

From here, Brandt shifts his attention toward the public policy aspects of the cigarette’s history. The opening chapter focuses on the 1964 Surgeon General’s Report and its implications for public health. Brandt ably shows that the industry’s unified response to the health scare in the 1950s required a comparable development within the field of public health, leading to the emerging of “procedural science” and meta-analysis of pre-existing studies. Rather than take this opportunity to react as responsible corporate citizens, the tobacco industry emphasized that smokers assumed risks that the industry itself refused to acknowledge, relying upon arguments of individual responsibility. The publication of the Surgeon General’s Report in 1964 initiated regulatory efforts that threatened the industry’s interests. To preempt stringent government oversight within a larger context of consumer protection, the tobacco industry successfully co-opted congressional oversight to produce weak legislation such as the 1965 Federal Cigarette Labeling and Advertising Act. Nonetheless, Brandt notes that industry victories in the face of defeat could not compete with social and cultural trends that transformed
public perception of cigarettes and smokers, particularly in light of evidence about the “imposed” health risks of secondhand smoke.

Tobacco control advocates shifted their focus from congressional regulation to the use of tort litigation against the industry, further redefining the social and cultural understandings of smoking and smokers. More importantly, the discovery process in these cases produced a wealth of documents and sources, utilized in this volume, that had been previously been closely guarded by the companies. These sources were augmented by internal leaks and whistle-blowers who provided anti-tobacco activists and investigative journalists with additional materials highlighting the industry’s lengthy history of obfuscating science and favoring economic interests over public health. Brandt argues that the failure to defeat a maligned industry that had lost all credibility stemmed from the absence of an organized public health constituency, as exemplified by the inclusion of a solitary public health representative in settlement negotiations leading to the 1997 “Global Settlement Agreement.”

Brandt’s final chapter further highlights the tobacco industry’s disingenuous practices, as it sought to develop markets in developing nations that lacked effective tobacco control legislation or movements. The cultivation of international markets led companies like Philip Morris to employ questionable tactics to undermine World Health Organization initiatives, including a publicity campaign to exploit fear of AIDS in order to distract attention away from tobacco control, or argue that WHO efforts were an example of neo-colonialism that threatened national independence (470, 484).

The Cigarette Century is an at times one-sided view of the cigarette’s history, a point reinforced by the author’s participation as an expert witness in a Department of Justice lawsuit against the tobacco industry. Brandt argues that the potential pandemic represented by smoking-related diseases is sufficient grounds for becoming an advocate supported by responsible historical scholarship. As his epilogue makes clear, he has no tolerance for historians who carelessly articulate industry talking points despite lacking any experience in studying the cigarette’s history. Nonetheless, readers should not be put off by Brandt’s advocacy; his meticulously researched analysis of industry practices, critical transitions in the nature of medical research, and shifting notions of public health should be required reading for all students in the history of public health, medicine, and consumer culture.


In this interesting and challenging book, Richard Degrandpre’s overarching thesis is that America’s obsession with pharmaceutical drugs blinds it to the complex cultural and social forces that influence a drug taker’s experience with the substance. Using many examples from experiments, ranging from discrete neurochemical experiments to broader behavioural psychological studies, DeGrandpre argues that this “cult of pharmacology” creates a notion of “angel” drugs (pharmaceuticals like Prozac and Ritalin, the subject of one of DeGranpre’s other books, Ritalin Nation) or “demon” drugs (like cocaine marijuana and heroin). According to the “cult,” angel drugs cure illnesses despite evidence of serious problems and possibly even limited pharmacological value, while demon drugs are evil and addictive, despite their long history and evidence that they are not such a big psychopharmacological problem.
DeGrandpre begins by deconstructing the hype around several recent wonder drugs, to break down assumptions around the binary metaphor of “angels and demons.” For instance, while studies have suggested that Ritalin and cocaine have basically the same effect, one is deemed a good drug, and one is considered irredeemably evil. Describing the numerous psychological side effects of angel drugs, such as violent mood changes and murder-suicides, of selective serotonin reuptake inhibitors like Prozac, he then looks at how the drug companies’ records suggest that problems had been identified earlier, but had not been disclosed, or that the drugs might not even have had the sort of positive effects the marketing material suggested. He then asks why, given this damning evidence, the makers of these drugs rarely face convictions in the courts. The reason: the cult of pharmacology. He then looks at a demon drug of a different kind, tobacco, arguing that some studies have suggested that it is not the nicotine that is addictive, but rather the social and cultural rituals around smoking that cause a habit.

From here, DeGrandpre suggests that perhaps the fixation on neurological reaction, what he calls “pharmacologicalism,” is wrong. That is, our reductionist perception of drugs considers them in terms only of their chemical effects, rather than appreciating the social context in which they are consumed (such as the various tactile sensations and rituals involved in smoking a cigarette). He suggests that perhaps things like the effect of drugs, be it the addictive nature of nicotine, narcotic drugs and alcohol, or the expected effects of pharmaceuticals, are the results of “placebo texts” written about them. Our social and cultural expectations of what should happen when we take drugs, he suggests, may be more powerful than the chemical reactions themselves (other people call that “social construction”). He draws upon broad sociological and anthropological studies to back up this claim, looking briefly at the history of pharmaceuticals, opium eating, the Royal Commission on Opium, prohibition in the United States and the growth of big Pharma in the twentieth century. He also draws upon diverse studies, from bench science to behavioral psychology.

While there is much to admire in work like this one, there is also much of concern. Since the book has been packaged for a general audience, it fetishizes scientific studies, while lacking a sophisticated appreciation of the historical sources. DeGrandpre uses an encyclopedic knowledge of his field to present a social constructionist argument, yet while his detailed retelling of laboratory studies is mind-boggling, his characterizations of different historical trends tends to ignore the complexity of history. For example, he observes that most users of opiates at the end of the nineteenth century were upper class ladies, and that physicians were arguing that opiates were generally not addictive. But he does not acknowledge the social context of these statements (doctors defending one of the few drugs that seemed to have therapeutic value, class-based perception of habituation, etc.), instead seeing the statements as support for the theory the drugs were not really addictive (the “placebo text” of opiate addiction was yet to be written). When looking at the growing demonization of narcotic drugs, he glosses over the serious racial and ethnic discourses that many argue drove the push against these drugs. When charting the isolation of morphine and heroin, he calls the process “products of the same Western reductionist attitude that led to the isolation of cocaine,” (125) when there is a bigger, more complex, story to be told (the growth in laboratory science, a concern over opiate impurity and doctors’ control over dosage, pharmaceutical competition). When looking at the change in FDA regulations at the beginning of the twentieth century, he lumps all patent medicine vendors together, implying that there was no difference between big pharmaceutical labs and fly-by-night patent medicine rackets. Opting for the interesting story rather than historical complexity is a
journalistic commonplace that diminishes the potency of such analysis. So, while his point about social context affecting our perception of drug impact may be compelling, when he uses evidence in such a haphazard way, the historian must beware.

Apart from the problems with historical contextualization, DeGrandpre’s argument collapses upon itself. He spends considerable time discussing the dangerous and contradictory effects of drugs like Ritalin and Prozac, but if his argument about the power of “placebo texts” were valid, then the people who took these drugs should not have had such contrary reactions. DeGrandpre argues that, irrespective of its neurochemical impact on the brain, drugs cause people to act the way they think they should act. The placebo effect, he must know, has a degree of validity, but double-blind placebo-controlled trials exist because the placebo effect is but one of any number of effects a drug might have.

A final issue with this book is simply that many of the good bits of it have been said before, and in a more satisfyingly nuanced way. Unfortunately, other works consider things like the complexities of social, political, cultural and other forces when they talk about history, eschewing the interesting stories that have little direct relevance to the argument. DeGrandpre is certainly a capable story teller, and he has a complex understanding of pharmacology that I envy. But the limited contextualization of the stories he tells, and the tendency to gloss over key features in the history of drugs and addiction, mean that while it might sell well, it should not do so in academic history courses.


Prozac on the Couch is a complex and original cultural history of American biological psychiatry and psychotropic medications from 1955-2002. Jonathan Metzl, who holds an MD in psychiatry and a Ph.D. in American Studies, draws on his interdisciplinary background to upend the widely shared assertion by historians of American psychiatry that biological psychiatry replaced psychoanalysis in a dramatic paradigm shift that took place in the 1970s. Through close readings of a wide range of sources, he shows quite convincingly that the biological revolution in psychiatry began in popular culture in the 1950s, at the height of the “golden age” of psychoanalysis in America. Using theoretical approaches drawn from cultural studies and psychoanalysis, he argues that psychoanalytic assumptions about gender remain imbedded in, although not acknowledged by, present-day biological psychiatry.

Metzl explicitly reads the history of psychotropic drugs psychoanalytically, as his title indicates. He organizes his chapters as a series of “case studies” separated by genre in order “to rethink the interrelation between scientific innovation and popular perception” (26) Metzl uses different types of print culture for each of his case studies: popular magazine articles from the 1950s and early 1960s; pharmaceutical advertisements in psychiatric journals from 1964-97; and literary works from the 1990s (12). More provocatively, he relies throughout his book on Freudian theory. To readers unfamiliar with Freud’s writings and psychoanalytic terms, the book could be tough going. Metzl acknowledges the methodological dilemma of using psychoanalysis “as an object of study and as a heuristic model for understanding the function of psychopharmacology.” He does so, however, because “psychoanalysis allows for a critical engagement
with questions of gender that helps explain why pharmaceutical discourse behaves the way it does” (22). All of this theoretical complexity boils down to one main conclusion that Metzl repeats throughout his book: psychoanalysis “forms the unconscious of biological psychiatry” (25).

After a lengthy introduction entitled “The Freud of Prozac,” Metzl gives a brief history of psychiatry from 1955-2002, drawing primarily on articles and advertisements appearing in the *American Journal of Psychiatry (AJP)*. He demonstrates that most psychiatrists were skeptical about psychotropic medications in the 1950s and 1960s, a period when psychoanalytic assumptions dominated American psychiatry. At best, they saw them as adjunct to psychoanalysis. By the mid-1970s, a full-blown challenge to psychoanalysis from many sources, ranging from the antipsychiatry writings of R. D. Laing and Thomas Szasz to drastic funding reductions for psychotherapy by insurance companies and the federal government, led to a new emphasis in psychiatry on empirical diagnoses and double-blind studies of emerging psychotropic drugs. This new consensus was solidified by the *Diagnostic and Statistical Manual of Mental Disorders* published in 1980 (*DSM-III*), which replaced psychoanalytic neurotic disorders based on the assumption of an unconscious with a broad range of new mental disorders defined by symptoms that could be observed by physicians during an examination (53).

As psychotropic drugs grew in importance to treat these new disease categories, the role of psychiatrists diminished. Metzl shows how doctors literally disappeared from the pharmaceutical ads and the research articles printed in the *AJP*. The doctor as hero was replaced by the wonder drug. Photos of pills replaced images of psychiatrists in pharmaceutical ads; double-blind studies of medications rather than case studies now dominated research articles. Medications gained the authority physicians once held. In the remaining chapters of his book, Metzl convincingly rebuts the view that this biopsychiatry was objective and gender neutral in contrast to the subjective and sexist assumptions of Freudian psychiatrists.

In the third, longest, and most important chapter of his book, Metzl analyzes the challenge to psychoanalysis that emerged in popular culture in the 1950s. Through an examination of articles and columns in mass-circulation magazines, including *Newsweek, Time, Cosmopolitan, Ladies’ Home Journal, and Scientific American*, Metzl shows how Miltown, a tranquilizer first marketed in 1955, became “America’s first psychopharmacological wonder drug” (73). These articles asserted that Miltown would treat psychoanalytically defined problems such as “marriage phobia, women’s frigidity, [and] ‘castrating mothers’” (103). Pointing to the failure of psychoanalysis to resolve these problems, they led women to seek prescriptions for Miltown. By 1956, five percent of Americans, mostly women, were taking tranquilizers. The following year, physicians wrote 35 million prescriptions for them (73). Metzl convincingly argues that the emergence of psychotropic drugs at the height of the golden age of psychoanalysis explains why there was no clean break between psychoanalysis and biological psychiatry. Drugs did “the cultural work once assumed by Freudian psychoanalysis – treating the regulation of gender norms and modulating gender-based discontent” (113).

Metzl persuasively asserts that Miltown was the first “mother’s little helper,” a name given to the benzodiazepine Valium in the 1970s, when three-fourths of the ten percent of Americans taking it were women (145). In a very condensed fourth chapter, Metzl compares advertisements in *AJP* and the *Archives of General Psychiatry* for the tranquilizer Deprol in the 1960s, Valium in the 1970s, and Prozac in the 1990s. The Deprol
ads, he asserts, usually portrayed emasculating married women, while the Valium ads responded to feminism by often focusing on single “pathological” women. Prozac, which had become “the second-best selling drug” in the U.S. by 1994 (152), ran ads in psychiatric journals showing the women taking it as happily married. Pharmaceutical ads throughout these decades presented middle-class white women as the patients in need of treatment and normalized gender in much the way psychoanalysis had.

Metzl’s final chapter distracts from his argument. He shifts to a textual analysis of a seemingly random assortment of fictional and autobiographical accounts written in the 1990s about women on Prozac: an essay by Lauren Slater, short stories by Pagan Kennedy and Gary Krist, and a novel by Persimmon Blackbridge. In each narrative, Metzl claims that the empowerment the characters assert Prozac gave them is undermined because “women nonetheless represent the underside of this narrative of progress. Theirs is the emotionality from which civilization needs to be protected” (193).

*Listening to Prozac* offers an illuminating analysis of the continuities between psychoanalysis and biological psychiatry. Metzl convincingly excavates the role popular culture played in combining psychoanalytic assumptions with biochemical treatments in the 1950s, two decades before the “revolution” in psychiatry supposedly occurred, and skillfully delineates the social construction of psychotropic drugs. Metzl’s use of a wide range of sources and combination of disciplinary insight is illuminating. But his reliance on psychoanalytic theory to analyze his subject is problematic. If psychoanalysis is gendered, how can the theoretical assumptions drawn from it be used uncritically? Moreover, his psychoanalytic arguments are often difficult to follow.

Ultimately, however, the greatest flaw in this provocative book is its uneven use of sources. Metzl analyzes different types of print culture for each period. Using a full range of professional and popular sources in every chapter would have more effectively delineated change over time. This bifurcation of sources in an argument based on undermining binaries seems falsely drawn. In the decade since the introduction of direct-to-consumer pharmaceutical ads, which were first allowed in 1997, this division seems to occlude a cultural analysis of how psychotropic drugs operate today. Metzl dismisses the antidepressant advertisements in popular magazines as “vague, caricatured, or abstract to the point of being unproblematic” (163). Comparison of antidepressant ads in psychiatric journals and popular sources would have been illuminating. Perhaps the deeply imbedded gendering of psychotropic drugs has been dissolved by the need for an ever-expanding market for pharmaceutical panaceas.
International Workshop on Alcohol in the Atlantic World: Historical and Contemporary Perspectives, 24-27 October, 2007, York University, Toronto, Ontario, Canada

This International Workshop on Alcohol in the Atlantic World: Historical and Contemporary Perspectives will be an assembly of established researchers and new scholars examining alcohol throughout the Atlantic World from a variety of historical and contemporary perspectives and disciplinary traditions. The major themes include, but are not limited to production, trade, and consumption. The geographic focus of the workshop is Africa, the Americas, the Caribbean, and Europe within the context of the Atlantic world.

The Workshop will open with a Keynote on alcohol in the making of the Atlantic world. Six different panels will be devoted to the presentation of original papers, each followed by a discussant who will place the papers within broader contexts. Five of the panels will focused geographically upon Europe, the Caribbean, North America, Latin America, and Africa, with discussions centered on their Atlantic interactions mediated through alcohol. Another panel will be devoted to Globalization in and beyond the Atlantic. A Plenary will close the Workshop with a discussion of what has been accomplished and provide an agenda for future directions of research. Papers will be circulated amongst participants prior to the workshop.

For more information, contact the organizers:

José C. Curto and David V. Trotman  
C/O Secretariat Harriet Tubman Resource Centre on the African Diaspora  
233 Founders College, York University  
4700 Keele St. Toronto, Ontario, Canada  
M3J 1P3

Or by email (preferred) to: alcohol@yorku.ca