years' (1967-85) St Christopher's becomes a hub for the diffusion of images, practices and knowledge of good care for the dying. We see Saunders working tirelessly to display the work done at St Christopher's—to students, visitors, lecture audiences and the media—as rewarding and effective. She receives credit as the inspiration for the establishment of hundreds of hospice and palliative care services in Britain, the United States and elsewhere. In the final section. 'An exacting joy' (1986–99) Saunders reflects upon the "maturation" of the hospice movement and seeks to define her own role within it. She traces its origins to nineteenth-century religious charitable homes, a concept she renovated through the introduction of modern therapeutics and professionalism, combined with a strong spiritual orientation and a gift for listening to her patients.

The content of the letters, however, provides a glimpse beyond the teleological coherence of Clark's and most other accounts of Saunders' role in the hospice movement. While this is unfortunately a one-way correspondence that includes only Saunders' side, it illustrates a twoway interaction between their author and her surroundings. Readers can gain a sense of how Saunders tested out the reception of her ideas, identified resources and navigated both mundane and ideological constraints. A different reading of these letters need not question the magnitude of Saunders' achievements or the accuracy of Clark's commentary. But it can open other relevant stories by asking about the (largely Anglo-American) social structures and dynamics that made the hospice idea so appealing to certain groups of people (but not others), enabled and shaped the implementation of its various incarnations, and established Saunders as the uncontested hero of its history. While Clark's introductions are careful and informative, they offer limited insight into these processes.

Saunders' letters offer a privileged account of her interactions because readers of this volume are not her intended audience. But such readers are the audience to whom Clark's editorial narrative is directed. Meant to be unobtrusive, Clark's editing is uneven. Footnotes have been added mainly to clarify names and bibliographical references, but many of these, in addition to unclear references to events and sources of tension, are left unexplained. Clark's chief, if least visible, editorial intervention is in the selection of about 10 per cent of approximately 7000 letters. While he does not hide that he has chosen to tell a particular story. Clark tells us little about how he made his choices and what he left out. One wonders, for example, about the extent to which the exclusion of AIDS patients from hospice care, or its limited accessibility and appeal for non-white middleclass Britons, was fully illustrated by the handful of letters addressing these issues. These silences are a reminder that such a volume can, at best, provide a partial set of clues into the complex historical processes that have affected modern peoples' experiences of dying and that, ultimately, these transformations are not reducible to the influence of a single individual or to the emergence of an ideal of care.

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Lara V Marks, Sexual chemistry: a history of the contraceptive pill, New Haven and London, Yale University Press, 2001, pp. xi, 372, illus., £20.00 (hardback 0-3-08943-0).

In May 1960 the United States Food and Drug Administration approved an oral contraceptive, a pill containing oestrogen and progesterone that offered women a highly effective method to prevent pregnancy. In the four decades since 1960, the oral contraceptive—popularly known as "the pill"—has been marketed to women around the world. As Lara Marks makes clear in this book, strikingly large proportions of women, especially in developed countries, have taken the pill at some time in their reproductive lives. Even in the less industrial nations, no other birth control measure, other than the condom, has been so widely distributed and used in so many countries.

Given the importance and implications of this medical and social innovation, the pill has not lacked historical attention. In recent years,

a number of historians have examined the development of oral contraceptives, especially in the United States. But what Marks does in this important book is to place the scientific development of the pill, together with its economic and regulatory dimensions, in a muchneeded international perspective. In clear and convincing fashion, Marks lays out the influence of the European sex hormone industry in the interwar period, analyses the impact of the emigration of refugee scientists to American laboratories, and traces the myriad national contexts in which clinical trials of various oral formulations were conducted. In so doing, she significantly enhances our understanding of the pill's development and diffusion in comparing the British and North American experiences with the contraceptive.

One of the reigning historical interpretations that Marks challenges is the depiction of the women who participated in early trials of oral contraceptives as "unwitting guinea pigs" of male scientists. Marks joins other historians in noting that important research on an oral contraceptive was stimulated and funded by prominent American women, including the philanthropist Kathleen McCormick and the birth control advocate Margaret Sanger. McCormick's extensive funding made possible not only the animal studies to screen drugs for toxicity and efficacy, but also the clinical trials of the new formulations that necessarily involved large numbers of women to test the drug. But where could such women be found, especially for research that violated the societal norms about sexuality? Marks described how researchers recruited nurses to serve as volunteers (a good choice since they were able to follow the detailed instructions required in the early tests). But other women were also pressed into service, including patients suffering from severe mental disorders in a Massachusetts psychiatric hospital. Another major locus of clinical trials on the pill was the American controlled island of Puerto Rico. where large numbers of impoverished women participated in clinical studies. Marks mostly dismisses charges that Puerto Rican women represented a readily accessible pool of available research subjects. She argues that researchers

took considerable trouble to monitor the safety of these women and the wellbeing of the babies that resulted from the failure of the drugs (or from lack of compliance with the regimen). Perhaps because we hear so little from these women subjects or from activists who protested the exploitation of these women, Marks is less than persuasive that certain sociocultural factors, especially racism, did not make these women more attractive research subjects than middleclass white women. Unlike Marks, I don't find the lack of a signed consent form among the most troubling features of these early trials. Although some investigators in this period, including researchers who were infecting children with hepatitis virus, did obtain written permission, this was hardly conventional practice. More troubling was the risk, both short-term and long-term, that women experienced, despite the physicians' care to minimize dangers from the drugs.

Marks's extensive research and numerous interviews with participants in the development of the pill are impressive. She offers a nuanced analysis of the medical controversies that the pill created; her discussion of the relationship between oral contraceptives and cancer is especially useful for the light it sheds on the persistent uncertainties that have shaped medical and popular responses to the risks and benefits of the pill. In the 1960s the oral contraceptive was hailed as a "dream come true," freeing women from the burdens of unwanted pregnancy. As Marks convincingly shows, freedom is seldom free or without risk.

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Arthur A Daemmrich, Pharmacopolitics: drug regulation in the United States and Germany, Chapel Hill and London, University of North Carolina Press, 2004, pp. xiii, 203, £25.50 (hardback 0-8078–2844-0).

During the second half of the twentieth century the pharmaceutical industry made an increasingly significant contribution to the national economies not only of the two countries