



The University of Western Ontario

HISTORY 9720B

Medicine and Technology

Fall/Winter 2022-23

Wed 10:30--12:30 p.m. in LwH 2270C

*** Revised Jan 2023**

Prof Shelley McKellar

Office Hours: Wed 12:30-2:30 p.m. in LwH 2227 / Email: smckell@uwo.ca

Course Description:

A medical technology can be anything from a tongue depressor to dialysis equipment, from infusion pumps to surgical tools, and from an electronic patient record to imaging technologies and artificial intelligence (AI). To what extent has the work of healing and an individual's medical experience been shaped by technology? How have new instruments, machines, and systems been introduced and adopted (or rejected) in medicine over the past two centuries? How has technology disrupted (or not) medical knowledge and practice? While some scholars herald the benefits of medical technology, such as improved hospital and administrative productivity or greater insights into disease and medical treatment, other scholars suggest that the reign of technology in medicine is to the detriment of patients, doctors, and society in general.

This seminar examines the role of technology in medicine and its impact on medical practice, medical institutions, health care professionals, patients, and society at large. This seminar will explore the ways in which medical technology has shaped, and in turn been shaped by, scientific, political, economic, and sociocultural factors. Through weekly topics, students will investigate key episodes in the history of medicine and technology that resulted in "tacit skill" and "tacit knowledge" production and its translation (adoption or rejection) into diagnostic and therapeutic medical practice. Themes of agency and "ways of knowing," issues of race, gender, class, and disability, as well as the role of health care politics, economics, professional authority, patient advocacy, consumerism, and more will be discussed. Students will engage with a variety of primary sources throughout this course and be exposed to material culture theory and methodology (through the handling of objects from Western's Medical Artifact Collection).

Course Objectives:

Upon completion of this course, students should know, understand, and be able to use concrete examples to explain the following in appropriate historical and social context:

- The development, emergence, legacies, and antecedents of some landmark medical technologies.
- Medical technology's role within or impact upon medical professionals, institutions, and the experience of the patient; the practice of medicine; and the production and revision of medical knowledge.
- Significant theoretical and/or historiographic approaches to the study of medical technologies.
- Key controversies in the development and/or use of medical technologies.
- Interactions between medical technologies and ethnicity, race, gender, and class.

Methods of Evaluation:

Workshop Assignment: Object-inspired Teaching	20 %	Due: Feb 15
<i>(‘Yellow Folder’ digital and hard copy submissions; 5 min. presentation)</i>		
Research Essay Outline or “The Frame”	10 %	Due: Mar 1
<i>(one slide / 5 min. presentation, followed by Prof & peer feedback)</i>		
Research Essay Findings or “The Analysis”	10 %	Due: Apr 5
<i>(one slide / 5-10 min. presentation, followed by Q&A)</i>		
Research Essay Assignment	30 %	Due: Apr 12
<i>(15-20 pages approx.)</i>		
Seminar Participation	30 %	Due every mtg
<i>- see participation “bucket” below for products/ activities</i>		

Assignments to be Submitted and/or Presented:

- **Workshop Assignment: Object-inspired Teaching** – compile a “yellow folder” of primary and secondary material (include full copy of a minimum of 4 primary sources; include a bibliography of primary sources and secondary sources) and design a lesson plan (roughly 1-2 pages), tailored to the chosen medical artifact, for an object-focused, hands-on exercise for an undergraduate history student. This should be a self-directed exercise for the undergraduate student. In the lesson plan, identify the learning objectives and offer guidance (questions, analytical models, other?) to interrogate the artifact (what is this?) and gain historical meaning (so what?) that foregrounds microhistory as a pathway to greater themes, events, and patterns in history.
 - **Submission:** You will submit your workshop assignment online via the OWL course site AND submit a hard copy in the “yellow folder” to the professor. An **electronic copy** of your work is required for grading. On our OWL course site, please upload your written assignments as MS Word documents (no pdf documents please) and use the file name “Last name assignment” (ex. “McKellar workshop assignment”).
 - **Presentation:** You will have 5 minutes to share your “Object-inspired Teaching” work with the class. Students may share their work via PowerPoint slides, if they wish (optional, not mandatory). To repeat: each student will be limited to 5 minutes to present their work.
- **Research Essay Assignment (roughly 15-20 pages)** -- research and write a history of medicine paper on a topic of your choosing, which includes a technological aspect (at least in part). Your research is expected to include recent scholarships (by leading medical historians) and primary source materials. A semester is short so select a topic early in the term. Your essay should demonstrate topic engagement, deep interrogation of your sources (primary and secondary), and a focused, well-written argument that is persuasive and substantiated.
 - **Submission:** You will submit your research essay online via the OWL course site. An **electronic copy** of your work is required for grading. There is no need to submit a paper copy of your research essay. On our OWL course site, please upload your written assignments as MS Word documents (no pdf documents please) and use the file name “Last name assignment” (ex. “McKellar research essay”).

- **Research Essay Outline or “The Frame”** – present a working outline or “frame” for your research essay, from which the professor and classmates will offer feedback after presentation.
 - **Submission:** You will submit your one slide (preferably as a PowerPoint slide) online via the OWL course site. Please use the file name “Last name assignment” (ex. “McKellar essay outline”).
 - **Presentation:** You will have 5 minutes to present your working outline or “frame” for your research essay. Students will speak to their one slide (which will be displayed on screen in classroom). To repeat: each student will be limited to 5 minutes to present their work.

- **Research Essay Findings or “The Analysis”** – present your findings or “analysis” (so what?) from your research essay, from which the professor and classmates will offer feedback after presentation.
 - **Submission:** You will submit your one slide (preferably as a PowerPoint slide) online via the OWL course site. Please use the file name “Last name assignment” (ex. “McKellar essay findings”).
 - **Presentation:** You will have 5 to 10 minutes to present your essay findings or “analysis”. Students will speak to their one slide (which will be displayed on screen in classroom).

Due Dates, Late Penalties, Missed Seminar Meetings:

Please note the due dates for the presentations and written assignments. Students are expected to respect all due dates. Please see the professor with any routine requests for extensions but note that extensions are not granted gratuitously. The oral presentations are scheduled on specific dates, with seminar readings balanced accordingly. Please make every effort to present on those dates. The failure to offer a presentation on those days will result in a zero grade for that assessment.

The penalty for late written assignments is **5% each day (including Saturday and Sunday)** after the due date. For “non-routine” requests for accommodation (ie. medical or compassionate grounds), students must see the Graduate Chair, who will communicate with the professor thereafter. The final date to submit material for the course is April 30, 2023. All requests for extensions for course work that go beyond the last day of term must be approved by the Graduate Chair. Note that all written assignments must be completed to pass the course.

Seminar Participation:

Seminar participation is mandatory, so please make every effort to attend our seminar meetings. No ‘makeup’ work is possible for missed seminar attendance. In calculating the grades for weekly seminar participation, the lowest grade will be excluded. This means that if a student needs to miss one class, that grade of zero will be dropped. It is expected that students will attend class having read all assigned weekly readings and prepared to offer comments, ask questions, describe arguments, and make connections between readings. Informed, weekly participation is vital to the success of the seminar. **Be warned:** If I find that students are NOT demonstrating a close reading of all weekly readings during our seminar discussions, students will be asked to submit weekly Reflection Pieces (written essays), in advance of our meeting, as demonstrable work product that students are understanding the assigned readings.

There are various components to your final seminar participation mark, including moderating a meeting, offering peer feedback to student presentations, and effective and relevant comments to contribute to a high-level discussion of weekly materials. Check out the “participation bucket” below and feel free to suggest additional opportunities to add to the bucket!

Participation “Bucket” – Products / activities required to earn participation marks:

- **Active Participant** (showing preparation, engagement & listening skills) in weekly seminar meetings, specifically by:
 - Demonstrating comprehension of weekly readings
 - Engaging with seminar discussion with quality comments that are insightful, constructive, thoughtful, based on scholarship (not anecdotal)
 - Demonstrating active listening to hear what others are saying, building on others’ remarks, and contributing to the dialogue
- **Moderator** of one weekly seminar meeting, which includes a 1-page summary of a moderating plan, with list of questions prepared to initiate and sustain seminar discussion (this shall be a point-form or talking points document, and NOT an essay, to be submitted to professor only at the start of meeting)
- **Presenter** of a book from “Recent Scholarship” list at one seminar meeting, which includes a 1-page summary of book contents and its contribution to our weekly discussion (this shall be a point-form or talking points document, and NOT an essay, to be distributed to everyone at the start of the meeting)
- **Contributor** of quality peer feedback on work products of classmates (specifically presentations)
- **Attendee** at a HoM activity offered on Western campus (*optional but will earn bonus marks)

Course Schedule and Readings:

Wk	Topic	Assigned Readings for Seminar Discussion
1 Jan 11	Introduction: Medicine and Technology How have scholars approached the history of medicine and technology?	No assigned reading for this first meeting. In-Class Reading (will be distributed): <ul style="list-style-type: none">• Lewis Thomas, “The Technology of Medicine” in <i>The Lives of a Cell: Notes of a Biology Watcher</i>. New York: Viking Press, 1974. <i>*note 3 levels of technology in medicine</i>• Jennifer Stanton, “Introduction,” in <i>Innovations in Health and Medicine: Diffusion and Resistance in the Twentieth Century</i>, edited by J.Stanton. New York: Routledge Press, 2002. <i>*note conceptual framework of ‘innovation’; concentrate on pages 1-7 to understand key theories/authors in historiography</i>• Nik Brown and Andrew Webster, “Introduction,” in <i>New Medical Technologies and Society: Reordering Life</i>. Cambridge: Polity Press, 2004. <i>*note focus on the dynamic interaction between the technical and the society; the shaping of medical technology trajectories; additional influential scholars in the field discussed</i>

		<ul style="list-style-type: none"> Carsten Timmerman and Julie Anderson, "Introduction" in <i>Devices and Designs: Medical Technologies in Historical Perspectives</i>, edited by C.Timmerman and J.Anderson. Houndsmills: Palgrave Macmillan, 2006. <i>*note the more conventional focus of articles (authors admit less interested in theories); volume of case studies</i> Thomas Schlich and Christopher Crenner, "Introductory Essay," in <i>Technological Change in Modern Surgery: Historical Perspectives on Innovation</i>, edited by T.Schlich and C.Crenner. Rochester: University of Rochester Press, 2017. <i>*note 3 layers of meaning of "technology", note editors' challenge to innovation studies; concentrate on pages 1-12; volume of case studies</i> <p><u>Background HoM Reading:</u></p> <ul style="list-style-type: none"> Duffin, Jacalyn. <i>History of Medicine: A Scandalously Short Introduction</i>. Toronto: University of Toronto Press, 2021. Third Edition. Ch.9 "Technology and Disease: Stethoscopes, Hospitals, and Other Gadgets" pp.231-255. Kirk-Montgomery, Allison and Shelley McKellar. <i>Medicine and Technology in Canada, 1900-1950</i>. Ottawa: Canada Science and Technology Museum, 2008. Ch.1 "Instruments of Private Practice and Public Health" pp.5-23.
2 Jan 18	WORKSHOP: Medical Artifact Collection * Exercise Handout distributed in workshop session	Hamilton, Michelle A. and Shelley McKellar. "Learning through Objects: Development of the UWO Medical Artifact Collection as a Teaching and Research Resource." <i>Canadian Bulletin of Medical History</i> vol. 23, no. 1 (2006): 219-243. Edmonson, James M. "Learning from the Artifact: Surgical Instruments as Resources in the History of Medicine and Medical Technology," <i>Caduceus: A Humanities Journal for Medicine & the Health Sciences</i> 9,2 (1993): 87-98.
3 Jan 25	Medical Interactions and Relationships How has technology in medicine influenced interactions, relationships, and health care delivery?	Howell, Joel. <i>Technology in the Hospital: Transforming Patient Care in the Early Twentieth Century</i> . Baltimore, MD: Johns Hopkins University Press, 1995. Ch. 1 "Physicians, patients, and medical technology" pp.1-29; Ch 8 "Machines and Medicine: Lessons from the Early 20 th C," pp.227-249. (Note: the publication date of 1995; outdated analysis?) Reiser, S. J. <i>Technological Medicine: The Changing World of Doctors and Patients</i> . Cambridge: Cambridge University Press, 2009. Ch 1 (on stethoscope) and Ch 2 (on X-rays) (Note: who is this author: Stanley J. Reiser?)

		<p>Reinhart, Richard A. “The Stethoscope in 19th Century American Practice: Ideas, Rhetoric, and Eventual Adoption.” <i>Can. Bull. Med. Hist</i> 37,1 (2020): 50–87</p> <p>Davis, Audrey B. “Life Insurance and the Physical Examination: A Chapter in the Rise of American Medical Technology.” <i>Bulletin of the History of Medicine</i> 55 (1981), 392–406</p> <p><u>Uroscopy: A Primary Source interrogation --</u></p> <ul style="list-style-type: none"> Gilles of Corbeil, On Urines, excerpt in Faith Wallis, ed., <i>Medieval Medicine. A Reader</i>, (Toronto: University of Toronto Press, 2010): 256-258. <p>Supporting secondary source reading:</p> <ul style="list-style-type: none"> Faith Wallis, “Signs and Senses: Diagnosis and Prognosis in Early Medieval Pulse and Urine Texts.” <i>Social History of Medicine</i> 13 (2000): 265–78. Michael McVaugh, “Bedside Manners in the Middle Ages,” <i>Bulletin of the History of Medicine</i> 71, no. 2 (1997): 201-223.
<p>4</p> <p>Feb 1</p>	<p>Hospitals</p> <p>How has technology altered the hospital as a site of healing?</p>	<p>Howell, Joel. <i>Technology in the Hospital: Transforming Patient Care in the Early Twentieth Century</i>. Baltimore, MD: Johns Hopkins University Press, 1995. Ch. 4 and Ch. 5 on the x-ray (Note: scan these chapters building on previous week’s discussion of Howell book)</p> <ul style="list-style-type: none"> Howell, Joel. “The CT Scan after 50 Years — Continuity and Change.” <i>New England Journal of Medicine</i> 385.2 (July 2021): 104-5 <p>Reiser, S. J. <i>Technological Medicine: The Changing World of Doctors and Patients</i>. Cambridge: Cambridge University Press, 2009. Ch 2 (on X-rays) (Note: scan this chapter building on previous week’s discussion of Reiser book)</p> <p>De La Pena, Carolyn Thomas. ““Bleaching the Ethiopian”: Desegregating Race and Technology through Early X-Ray Experiments.” <i>Technology & Culture</i> 47, 1 (Jan 2006): 27-55.</p> <p>Lavine, Matthew. “The Early Clinical X-Ray in the United States: Patient Experiences and Public Perception,” <i>Journal of the History of Medicine and Allied Science</i> 67, 4 (Oct 2012): 587-625. (Note: x-ray as “icon of new scientific medicine” and “technological panacea” expectation)</p> <p>Margarete Sandelowski, <i>Devices and Desires: Gender, Technology, and American Nursing</i> (University of North Carolina Press, 2000). Ch 2 “Object lessons.” pp.21-43; “The Utensils & Materials at Hand,” pp.44-66</p>

		<p><u>X-rays: A Primary Source interrogation --</u></p> <ul style="list-style-type: none"> • Third, Jas. “Some diagnostic and therapeutic uses of the x-rays.” <i>Canada Lancet</i> Vol 35 (1902): 526-535. • Cartoon—<i>Life</i>, Feb 1896. The New Roentgen Photography. “Look Pleasant, Please” • Newspaper—<i>The San Francisco Call</i>, 18 Feb 1896 <p>Supporting secondary source reading:</p> <ul style="list-style-type: none"> • Jose Van Dijck. <i>The Transparent Body: A Cultural Analysis of Medical Imaging</i>. Seattle: University of Washington Press, 2005. ch 1 “Mediated Bodies and the Ideal of Transparency” <p>* Do imaging technologies make the body “transparent”? – consider the “medical gaze,” the “cultural construct” of the transparent body, the promise and fears of “seeing within,” and more</p> <p><u>Recent Scholarship:</u></p> <p>Lux, Maureen K. <i>Separate Beds: A History of Indian Hospitals in Canada, 1920s-1980s</i>. Toronto: University of Toronto Press, 2018.</p> <p>McDonald, Lynn. <i>Florence Nightingale and the Medical Men: Working Together for Health Care Reform</i>. Montreal: McGill-Queen’s University Press, 2022.</p> <p>Womack, Jeffrey. <i>Radiation Evangelists: Technology, Therapy, and Uncertainty at the Turn of the Century</i>. Pittsburgh, PA: University of Pittsburgh Press, 2020.</p>
5 Feb 8	<p>Obstetrics and Gynecology</p> <p>How does gender implicitly and explicitly affect professional authority and patient experiences in the case of some medical technologies?</p>	<p>Mitchinson, Wendy. <i>Giving Birth in Canada, 1900-1950</i>. Toronto: University of Toronto Press, 2002. Chapter 6 “Obstetrical Intervention”</p> <p>Sandelowski, Margarete. 2000. “This Most Dangerous Instrument: Propriety, Power, and the Vaginal Speculum”. <i>Journal of Obstetric, Gynecologic & Neonatal Nursing</i> 29,1 (2000): 73-82</p> <p>Tone, Andrea. “Medicalizing Reproduction: The Pill and Home Pregnancy Tests,” <i>The Journal of Sex Research</i> 49, 4 (2012): 319-327.</p> <p>Freidenfelds, Lara. <i>The Myth of the Perfect Pregnancy</i> (Oxford, UK: Oxford University Press, 2019). Chapter 7 “Seeing the Baby” and Chapter 8 “Detecting the Baby”</p>

		<p>Lewis, Carolyn Herbst. "The Gospel of Good Obstetrics: Joseph Bolivar DeLee's Vision for Childbirth in the United States." <i>Social History of Medicine</i> 29, 1 (2016), p.112-130</p> <p><u>Forceps: A Primary Source interrogation</u> –</p> <ul style="list-style-type: none"> Joseph B. DeLee, 'The Prophylactic Forceps Operation', <i>American Journal of Obstetrics and Gynecology</i>, 1920, 1, 34–44. <p><u>Recent Scholarship:</u></p> <p>Kline, Wendy. <i>Coming Home: How Midwives Changed Birth</i>. New York: Oxford University Press, 2019.</p> <p>Marsh, Margaret and Wanda Ronner. <i>The Pursuit of Parenthood: Reproductive Technology from Test-Tube Babies to Uterus Transplants</i>. Baltimore: Johns Hopkins University Press, 2019.</p> <p>Wolf, Jacqueline H. <i>Cesarean Section: An American History of Risk, Technology, and Consequence</i>. Baltimore: Johns Hopkins University Press, 2018.</p>
<p>6</p> <p>Feb 15</p>	<p>Surgery</p> <p>How is surgery revered and/or contested as a professional skill? As contributing knowledge? As a curative measure (patient outcome)?</p> <p>Due at this meeting:</p> <p>Workshop Assignment: Object-inspired Teaching</p> <p>Submission & Presentation</p>	<p>Schlich, Thomas and Chris Crenner, editors. <i>Technological change in modern surgery: historical perspectives on innovation</i>. Rochester, NY: University of Rochester Press, 2017. Chapters 1, 3, 6.</p> <ul style="list-style-type: none"> Schlich, Thomas and Chris Crenner, "Technological Change in Surgery: An Introductory Essay" pp 1-20 Frampton, Sally. "Defining Difference: Competing Forms of Ovarian Surgery in the Nineteenth Century," pp 51-70 McKellar, Shelley. "Disruptive Potential: The "Landmark" REMATCH Trial, Left Ventricular Assist Device (LVAD) Technology, and the Surgical Treatment of Heart Failure in the United States" pp 129-155 <p>Lerner, Barron. <i>The Breast Cancer Wars: Hope, Fear, and the Pursuit of a Cure in Twentieth-Century America</i>. Oxford: Oxford University Press, 2003. Ch.2 "Establishing a Tradition: William Halstead and the Radical Mastectomy" pp.15-40.</p> <p>Collins, Brianne M and Henderikus J. Stam. "Freeman's transorbital lobotomy as an anomaly: A material culture examination of surgical instruments and operative spaces," <i>History of Psychology</i> Vol. 18, Iss. 2, (May 2015): 119-131.</p>

		<p>Frampton, Sally. "John Wickham's New Surgery: 'Minimally Invasive Therapy', Innovation, and Approaches to Medical Practice in 20th C Britain," <i>Social History of Medicine</i> 30,3 (Aug 2017): 544-566.</p> <p><u>Surgical Instruments: A Primary Source interrogation --</u></p> <ul style="list-style-type: none"> Truax, Charles Henry. <i>The Mechanics of Surgery: Comprising detailed descriptions, illustrations, and lists of the instruments, appliances, and furniture necessary in modern surgical art.</i> Chicago: Hammond Press, W.B. Conkey Company, 1899. <p>Available on the Internet Archive at: https://archive.org/details/mechanicsofsurge00truaiala</p>
	READING WEEK	
<p>7</p> <p>Mar 1</p>	<p>Race</p> <p>1) Readings Discussion</p> <p>How is technology misconstrued or positioned as "neutral"?</p> <p>2) Student Presentations</p> <p>"The Frame" Presentations</p>	<p>Fraser, Jennifer. "Breast Cancer, Inuit, and the Extractive Coloniality of Disease Distributions and Diagnostic Imaging Technologies." <i>Technology & Culture</i> 62, 3 (July 2021): 709-740.</p> <p>Lundy Braun, "Spirometry, Measurement, and Race in the Nineteenth Century," <i>Journal of the History of Medicine and Allied Sciences</i> 60 (2005): 135-169.</p> <p>Wailoo, Keith C. <i>Drawing Blood: Technology and Disease Identity in Twentieth-Century America.</i> Baltimore, Johns Hopkins University Press, 1997. Ch. 5 "Detecting "Negro Blood": Black and White Identities and the Reconstruction of Sickle Cell Anemia," pp.134-161 and Conclusion "Disease Identity in the Age of Technological Medicine," pp.188-200.</p>
<p>8</p> <p>Mar 8</p>	<p>Information, Data, and the Digital Age</p> <p>How are certain data management and communication technologies adopted (successfully and/or unsuccessfully) within a medical environment?</p>	<p>Rampton, Vanessa, Maria Bohmer, Anita Winkler. "Medical Technologies Past and Present: How History Helps to Understand the Digital Age." <i>Journal of Medical Humanities</i> (May 2021), 1-22.</p> <p>Dolan, Brian and Allison Tillack. "Pixels, Patterns and Problems of Vision: The Adaptation of Computer-Aided Diagnosis for Mammography in Radiological Practice in the U.S." <i>History of Science</i> 48, 2 (2010): 227-249.</p> <p>Warner, John Harley. "The Uses of Patient Records by Historians: Patterns, Possibilities and Perplexities." <i>Health and History</i> Vol. 1, No. 2/3 (1999), pp. 101-111.</p>

		<p>Medeiros, Aimee. “A Tale of Two Charts: The History of Gendering Sex-Specific Growth Assessment in Pediatrics,” in <i>Pink and Blue: Gender, Culture, and the Health of Children</i>. Edited by Elena Conis, Sandra Eder, Aimee Medeiros. New Brunswick, NJ: Rutgers University Press, 2021.</p> <p>Strehle, E. M. and N. Shabde. “One Hundred Years of Telemedicine: Does this new Technology have a place in Paediatrics?” <i>Archives of Disease in Childhood</i> 91 (2006):956-959.</p> <p>Greene, Jeremy A. Victor Braitberg, Gabriella Maya Bernadett. “Innovation on the Reservation: Information Technology and Health Systems Research among the Papago Tribe of Arizona, 1965–1980.” <i>ISIS</i> 111,3 (Sep2020): 443-470.</p> <p>Ongoing debate (optional reading):</p> <ul style="list-style-type: none"> • Topol, Eric J., Steven R. Steinhubl, Ali Torkamani. “Digital Medical Tools and Sensors.” <i>JAMA</i> 313, 4 (2015):353-354. • Verghese, Abraham. “What this Computer needs is a Physician: Humanism and Artificial Intelligence.” <i>JAMA</i> 319, 1 (2017): 19-20. <p><u>The Electronic Medical Record (EMR): A Primary Source interrogation –</u></p> <ul style="list-style-type: none"> • J.H. Bradshaw-Smith, “A computer record-keeping system for general practice,” <i>British Medical Journal</i> 1 (1976): 1395-97. <p><u>Recent Scholarship:</u></p> <p>Greene, Jeremy A. <i>The Doctor Who Wasn’t There: Technology, History, and the Limits of Telehealth</i>. Chicago: University of Chicago Press, 2022.</p> <p>Melissa M. Littlefield. <i>Instrumental Intimacy: EEG Wearables and Neuroscientific Control</i>. Baltimore: Johns Hopkins University Press, 2018.</p>
9 Mar 15	(Mis?)Use How do “unintended consequences” or different users affect the use (or misuse) of some medical	<p>Wallis, Jennifer. “Bloody Technology: The sphygmograph in asylum practice,” <i>History of Psychiatry</i> 28, 3 (Sep 2017): 297-310.</p>

	<p>technologies? How is the ‘allure and ambivalence’ of certain medical technologies navigated by different constituents?</p>	<p>Wexler, Anna. “The Medical Battery in the United States (1870-1920): Electrotherapy at Home and in the Clinic,” <i>JHMAS</i> 72, 2 (Apr 2017): 166-192.</p> <p>Zanette, Francois. “Curing with Machines.” <i>Technology & Culture</i> 54, 3 (Jul 2013):</p> <p>Dudley, Anu King. “Moxa in 19th Medical Practice,” <i>JHMAS</i> 65,2 (Apr 2010): 187-206.</p> <p>Larkin, Lesley. “Authentic Mothers, Authentic Daughters and Sons: Ultrasound Imaging and the Construction of Fetal Sex and Gender.” <i>Canadian Review of American Studies</i> 36, 3 (2006): 273-291.</p> <p><u>Advertisements/ Popular Culture: A Primary Source interrogation --</u></p> <ul style="list-style-type: none"> • 1920s Advertisements (Uploaded on OWL) <ol style="list-style-type: none"> 1) “That Other You Could End Your Marriage!” (Lysol disinfectant) 2) “A Perfect Wife ... until 6 p.m.” (Lysol disinfectant) 3) “Hands catch Germs” (Kleenex) 4) “No more nagging to get his hands clean” (Lifebuoy soap) 5) “What is your baby worth?” (Fly-Tox spray) <p>Supporting secondary source reading:</p> <ul style="list-style-type: none"> • Nancy Tomes, “The Making of a Germ Panic, Then and Now,” <i>American Journal of Public Health</i> 90, 2 (Feb 2000): 191-198 <p><u>Recent Scholarship:</u></p> <p>McKellar, Shelley. <i>Artificial Hearts: The Allure and Ambivalence of a Controversial Medical Technology</i>. Baltimore: Johns Hopkins University, 2018.</p>
<p>10</p> <p>Mar 22</p>	<p>Bodies</p> <p>How does disability influence the adoption of certain medical technologies, notably the aspects of tacit skill and tacit knowledge (or “ways of making and knowing”)</p>	<p>Linker, Beth. “Toward A History of Ableness,” <i>All of Us</i>, The Disability History Association's blog (June 1, 2021). http://allofusdha.org/research/toward-a-history-of-ableness/</p> <p>Ott, Katharine. “The Sum of Its Parts: An Introduction to Modern Histories of Prosthetics,” in <i>Artificial Parts, Practical Lives: Modern Histories of Prosthetics</i>. New York: NYU Press, 2002. p.1-42.</p>

		<p>Bivins, Roberta and Hilary Marland, “Weighing for Health: Management, Measurement and Self-surveillance in the Modern Household,” <i>Social History of Medicine</i> 29,4 (2016): 757-780.</p> <p>Jarrin, Alvaro and Chiara Pussetti, “Introduction: The Uncanny Aesthetics of Repairing, Reshaping, and Replacing Human Bodies,” in <i>Remaking the Human</i>. Edited by Alvaro Jarrín and Chiara Pussetti. New York: Oxford University Press, 2021</p> <p><u>Cochlear implants as a divisive choice: A Debate interrogation --</u></p> <ul style="list-style-type: none"> • Gerald O’Donoghue, “Cochlear Implants—Science, Serendipity, and Success” <i>New England Journal of Medicine</i> 369, 13 (Sept 26, 2013): 1190-1193. • Caroline Praderio, “Why some people turned down a ‘medical miracle’ and decided to stay deaf,” <i>Insider</i> (Jan 3, 2018) <p>* Is medical technology about “fixing” bodies and/or people? Who declares this authority?</p> <p><u>Recent Scholarship:</u></p> <p>Jaipreet Viridi, <i>Hearing Happiness: Deafness Cures in History</i>. Chicago: University of Chicago Press, 2022</p>
11 Mar 29	<p>Drugs</p> <p>How can the framing of drugs as a “therapeutic revolution” in medicine be contested (or not) in comparison with other medical technologies?</p>	<p>Greene, Jeremy A., Flurin Condrau, and Elizabeth Siegel Watkins, editors. <i>Therapeutic Revolutions: Pharmaceuticals and Social Change in the Twentieth Century</i>. Chicago: University of Chicago Press, 2016) – 5 chapters:</p> <ul style="list-style-type: none"> - Introduction “Medicine Made Modern by Medicines” - Ch. 1 “Futures and their Uses: Antibiotics and Therapeutic Revolutions” by Scott H. Podolosky and Anne Kveim Lie - Ch 2 “Reconceiving the Pill: From Revolutionary Therapeutic to Lifestyle Drug” by Elizabeth Siegel Watkins - Ch 6 “Pharmaceutical Geographies: Mapping the Boundaries of the Therapeutic Revolution” by Jeremy A. Greene - Ch 11 “A Therapeutic Revolution Revisited” by Charles E. Rosenberg <p>Vitale, Judith. “Opiates and the ‘Therapeutic Revolution’ in Japan,” <i>Social History of Medicine</i> 34, 3 (2020): 938-961.</p>

		<p><u>Aspirin: Using Primary Sources to situate (historically) a current debate --</u></p> <ul style="list-style-type: none"> • “Is the New Aspirin Advice a Medical Flip-Flop, or Just Science?” <i>New York Times</i> (22 Oct 2021) <p><u>Recent Scholarship:</u></p> <p>Dyck, Erika and Maureen Lux. <i>Challenging Choices: Canada’s Population Control in the 1970s</i>. Montreal: MQUP, 2020.</p> <p>Richert, Lucas. <i>Strange Trips: Science, Culture, and the Regulation of Drugs</i>. Montreal: MQUP, 2019.</p>
12 Apr 5	<p>Wrap Up: Medicine and Technology</p> <p>1) Student Presentations</p> <p>“The Analysis” Presentations</p> <p>2) Wrap-Up Discussion</p> <p>How does our focus of technology in medicine reinforce or disrupt our understanding of medical history? Our conclusions for this seminar?</p>	
13 Apr 12	<p>No class meeting</p> <p>DUE TODAY (online submission) Research Essay Assignment</p>	

Additional Statements

Accessibility Options:

You may also wish to contact Accessible Education (formerly known as Services for Students with Disabilities (SSD)) at 661-2111 x 82147 for any specific question regarding an accommodation. See: [Accessible Education - Academic Support & Engagement - Western University \(uwo.ca\)](https://www.uwo.ca/univsec/pdf/academic_policies/engagemnt/engagemnt_uwo.ca.pdf)

Request for Accommodations/Medical Issues

Students are entitled to their privacy and consequently they do not need to disclose personal information to their course professors. In the event that students feel the need to discuss personal information, they should see the graduate chair. Unlike undergraduate students, graduate students cannot be referred to Social Science Academic Counselling to have their medical or non-medical circumstances evaluated and to receive a recommendation for accommodation. Those facilities are for undergraduates only, and there is no process beyond the department to secure recommendations for accommodation. Our process is that faculty should deal with routine requests for extensions. However, a student's request for accommodation (on medical, non-medical, compassionate grounds) should go to the graduate chair, Prof. Eli Nathans (enathans@uwo.ca) who will consult and communicate with faculty. Additionally, faculty and students should communicate with the grad chair about any case in which work is not submitted before grades are due. In the event that the graduate chair is also the course professor, then a request for accommodation can be taken to the department chair.

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Plagiarism:

Students must write their essays and assignments in their own words. Whenever students take an idea, or a passage from another author, they must acknowledge their debt both by using quotation marks where appropriate and by proper referencing such as footnotes or citations. Plagiarism is a major academic offense.

For more information on plagiarism and other scholastic offenses at the graduate level see: https://www.uwo.ca/univsec/pdf/academic_policies/appeals/scholastic_discipline_grad.pdf

All required papers may be subject to submission for textual similarity review to the commercial plagiarism detection software under license to the University for the detection of plagiarism. All papers submitted will be included as source documents in the reference database for the purpose of detecting plagiarism of papers subsequently submitted to the system. Use of the service is subject to the licensing

agreement, currently between The University of Western Ontario and Turnitin.com (<http://www.turnitin.com>).

The following rules pertain to the acknowledgements necessary in academic papers.

A. In using another writer's words, you must both place the words in quotation marks and acknowledge that the words are those of another writer.

You are plagiarizing if you use a sequence of words, a sentence or a paragraph taken from other writers without acknowledging them to be theirs. Acknowledgement is indicated either by (1) mentioning the author and work from which the words are borrowed in the text of your paper; or by (2) placing a footnote number at the end of the quotation in your text, and including a correspondingly numbered footnote at the bottom of the page (or in a separate reference section at the end of your essay). This footnote should indicate author, title of the work, place and date of Publication and page number. Method (2) given above is usually preferable for academic essays because it provides the reader with more information about your sources and leaves your text uncluttered with parenthetical and tangential references. In either case words taken from another author must be enclosed in quotation marks or set off from your text by single spacing and indentation in such a way that they cannot be mistaken for your own words. Note that you cannot avoid indicating quotation simply by changing a word or phrase in a sentence or paragraph which is not your own.

B. In adopting other writer's ideas, you must acknowledge that they are theirs.

You are plagiarizing if you adopt, summarize, or paraphrase other writers' trains of argument, ideas or sequences of ideas without acknowledging their authorship according to the method of acknowledgement given in 'A' above. Since the words are your own, they need not be enclosed in quotation marks. Be certain, however, that the words you use are entirely your own; where you must use words or phrases from your source; these should be enclosed in quotation marks, as in 'A' above.

Clearly, it is possible for you to formulate arguments or ideas independently of another writer who has expounded the same ideas, and whom you have not read. Where you got your ideas is the important consideration here. Do not be afraid to present an argument or idea without acknowledgement to another writer, if you have arrived at it entirely independently. Acknowledge it if you have derived it from a source outside your own thinking on the subject.

In short, use of acknowledgements and, when necessary, quotation marks are necessary to distinguish clearly between what is yours and what is not. Since the rules have been explained to you, if you fail to make this distinction, your instructor very likely will be forced to regard your omission as intentional literary theft. Plagiarism is a serious offence which may result in a student's receiving an 'F' in a course or, in extreme cases, in their suspension from the University.

If a History graduate course professor suspects course work of possible plagiarism, or if a graduate supervisor suspects a cognate or thesis of possible plagiarism, the faculty member will meet with the student. If the issue is not resolved, the student then meets with the graduate chair to discuss this situation, and so that the student can present or respond to evidence. Afterwards the graduate chair will make a decision about whether misconduct has occurred and any penalties; this will be communicated in writing to the student within 3 weeks. The student may appeal this decision to the Vice-Provost (Graduate) within 3 weeks of the issuance of the chair's decision. If the student does not appeal, the Vice-Provost will review the case. The Vice-Provost may confirm affirm, vary, or overturn the graduate chair's decision or penalty.

Information on the appeals procedures for graduate students can be found here:

http://www.uwo.ca/univsec/pdf/academic_policies/appeals/appealsgrad.pdf

Support Services

Students who are in emotional/mental distress should refer to Mental Health@Western, http://uwo.ca/health/mental_wellbeing/ for a complete list of options about how to obtain help.

As part of a successful graduate student experience at Western, we encourage students to make their **health and wellness** a priority.

- Western provides several on campus health-related services to help you achieve optimum health and engage in healthy living while pursuing your graduate degree. For example, to support physical activity, all students, as part of their registration, receive membership in Western's Campus Recreation Centre. Numerous cultural events are offered throughout the year. Please check out the Faculty of Music web page <http://www.music.uwo.ca/> and our own McIntosh Gallery <http://www.mcintoshgallery.ca/>
- Information regarding health- and wellness-related services available to students may be found at <http://www.health.uwo.ca/>
- Students seeking help regarding mental health concerns are advised to speak to someone they feel comfortable confiding in, such as their faculty supervisor, their program director (graduate chair), or other relevant administrators in their unit. Campus mental health resources may be found at http://www.health.uwo.ca/mental_health/resources.html

UWO has many services and programs that support the personal, physical, social, and academic needs of students, in a confidential environment. The Student Development Centre (SDC) has trained staff and an array of services to help students achieve their personal, academic and professional goals. See:

[Academic Support & Engagement - Western University \(uwo.ca\)](#)

If you have any further questions or concerns, please contact, Heidi Van Galen, Department Manager, Department of History, 519-661-2111 x84963 or e-mail vangelen@uwo.ca.