

Health, Technology and Society: a major new series

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Principal classes of medical technology:

Medicines: therapeutic



Assistive devices/prosthetics: replacement implants

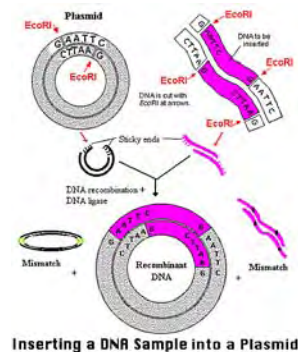


Surgery and repair/removal: curative



The Chir Team at INRIA Sophia Antipolis integrates vision and robotic algorithms around the Da Vinci (TM Intuitive Surgical, Inc) system in collaboration with Professor Carpentier's team (Hopital Broussais) in heart surgery.

Genetic modification – body modification at the level of DNA



The Series: some central issues

Technologies and the techniques, models and assumptions on which they are based, are *given* meaning through the way they are tied into *other techniques, medical devices and social/clinical practices*

e.g. the domestication of technologies



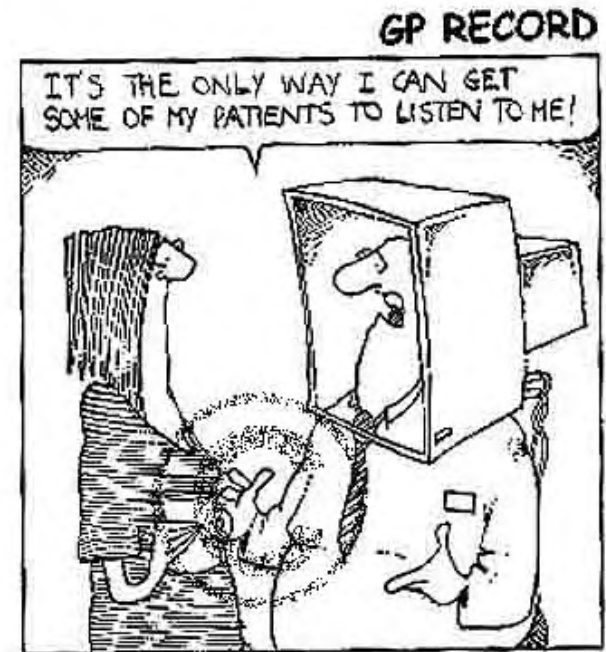
The Series: some central issues

Technologies are always expressed through, social relationships. Technologies perform, or 'work' within the context of, as well as through, such relationships.

...drug compliance depends on patients' understanding, context of use, and how they (and perhaps carers) understand and cope with their illness/condition

The Series: some central issues

How are new and mundane technologies used and experienced at an everyday level where these relationships are played out, in, for example, the hospital setting, primary practice, and the home?



The Series: some central issues

Health technologies can have dual effects of health technologies: immediate physical/side effects, or more complex effects that reflect the 'novel' relationships that they create

'Medical innovations...create novel interdependencies' (Lehoux, 2006)

The Series: some central issues

The value of technologies changes, perhaps because of better ways of getting patient information, or delivering the treatment they provide, or through changing social expectations about treatment

The Series: some central issues

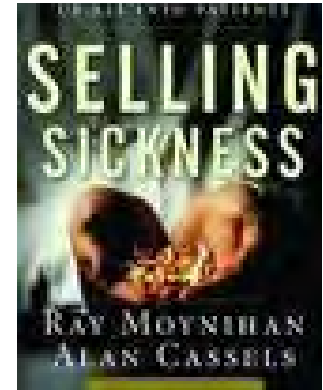
The 'value' of medical techniques, devices or therapeutics (such as new drugs) is subject to national (and international) evaluation, regulation and monitoring...which varies according to distinct political cultures.

...such as in stem cells



The Series: some central issues

As consumers of health, people capture health innovations for their own personal use, especially in fee-based health markets such as the US, a model increasingly adopted across Europe and Pacific Rim countries



The Series: some central issues

Despite increasing heterogeneity: strong structuring of health care/ path dependency..some core technologies:

MRI/CTC scanning

ACE inhibitors

Balloon angioplasty

Statins

Mammography

The Series: some central issues

Resourcing for health interventions and who pays for it: the consumer or the state? Demographic shift towards a greater number of older people in the population as a whole will increase this trend towards private insurance.

The Series: some central issues

How are health technologies introduced in the first place, and what factors have shaped their introduction?

...technologies spill across fields and markets: increasingly complex innovation process