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Nikolas Rose. *The Politics of Life Itself: Biomedicine, Power, and Subjectivity in the Twenty-First Century*. Princeton: Princeton University Press, 2007. 350p.

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The question raised time and again by those studying Michel Foucault's work is this: if Foucault were alive, what would he have to say about the issues we face today? The answer—or at least part of it—can be found in Nikolas Rose's new study, *The Politics of Life Itself: Biomedicine, Power, and Subjectivity in the Twenty-First Century*. Rose's study serves not as an application of Foucault's ideas to the increasingly molecular view of self, but as an extension of Foucault's methods to examining the changing politics of life.

In the opening chapters, Rose explores the ways conceptions of self have been affected by advances in medicine, presenting the development of a molecular self alongside the molar self. The molar or corporeal self—the self as a collection of “limbs, organs, tissues, flows of blood, hormones, and so forth” (11)—is the self increasingly subjected to the gaze of the medical expert in the nineteenth and twentieth centuries, and it is the development of the idea of the corporeal self which Foucault analyzes to explain the effects of biomedicine on society. While contemporary medical advances have prompted a view of self in increasingly smaller units, this molecular view of self has supplemented, rather than replaced, the molar view. Considering, for instance, the advertisements for a wide range of anti-depressants which promise self-improvement at the chemical level, but also the prevalence of fitness advertisements which promote the development of self at the level of the limb or of the physical body, Rose shows that we might think today of self as comprised of cells, molecules, or genetic code, but that this molecular view informs and changes, but does not replace, the molar view of self.

The movement from thinking about self in corporeal terms to thinking about self in molecular terms, then, is not a simple evolution from one way of thinking to another. Rather, the corporeal self and the molecular self co-exist, and the ways of thinking about self in one way inform ways of thinking about self in the other. Coupled with rapid advances in communications and information technologies, the role of the medical or government health official becomes increasingly pastoral in nature; the official becomes an advisor and counselor to the individual, who takes on increased responsibility not only for his physical health, but also for his genetic health and, by extension, for the genetic health of his offspring or potential offspring. Where the nineteenth-century subject is responsible to heal diseases of or injury to the corporeal self, the twenty-first-century subject is responsible to prevent possible

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disease through the study of genetics within the scope of what Rose describes as “not disease but the almost infinitely expandable and malleable empire of risk” (87).

While this move to protect unborn generations from possible disease calls to mind the purifying intentions of the eugenic programs of Nazi Germany in the first half of the twentieth century, it is also remarkable in its movement inward and toward preventing a possible future ailment. The ailment being prevented has no obvious physical signs; it leaves no mark on the corporeal body that is discernable to the patient without the aid of the medical professional. The medical professional serves, in a way, as advisor or pastor to the patient, much as the Christian priest served, in Foucault’s terms, to conduct, direct, lead, guide, take in hand, and manipulate men (Foucault, *Security, Territory, Population* 165). The medical professional does not cure disease only; the medical professional advises the patient in a self-improvement rooted in the prevention of possible disease. Rose is careful to point out, though, that the widespread diffusion of information insures that these “experts are no longer regarded as the sole authority of truth” (128), for patients have become biological citizens who “take responsibility for [their] own heredity” (139).

Rose describes his work as descriptive in nature, and as such, it is an effective and important analysis of the changing nature of self in the early twenty-first century. However, as much as this book attempts to write about the present without engaging in political debate, Rose’s book does take to task—perhaps reluctantly, but significantly—the relationship between pharmaceutical companies and medicine. Rose points out that “commercial decisions” regarding the development, testing, marketing, and distribution of new drugs “are actually shaping the patterns of psychiatric thought at a very fundamental level” (221). In spite of the careful line he draws between describing the changes he sees in the world and the arguments taking place about those changes, Rose does engage, at least with a cautionary analysis about the influence of the market on medicine and, in turn, on our very ideas of self.

Rose remarks in the conclusion to this study that he writes “not to judge, but...to help make judgment possible” (259). And he does so, by shedding a very bright and clear light on new ways of thinking about life, body, medicine, and identity. ✱