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Ontological Terror

## Evidence-based Dementia Practice

In *Ontological Terror* Calvin L. Warren intervenes in Afro-pessimism, Heideggerian metaphysics, and black humanist philosophy by positing that the "Negro question" is intimately imbricated with questions of Being. Warren uses the figure of the antebellum free black as a philosophical paradigm for thinking through the tensions between blackness and Being. He illustrates how blacks embody a metaphysical nothing. This nothingness serves as a destabilizing presence and force as well as that which whiteness defines itself against. Thus, the function of blackness as giving form to nothing presents a terrifying problem for whites: they need blacks to affirm their existence, even as they despise the nothingness they represent. By pointing out how all humanism is based on investing blackness with nonbeing—a logic which reproduces antiblack violence and precludes any realization of equality, justice, and recognition for blacks—Warren urges the removal of the human from its metaphysical pedestal and the exploration of ways of existing that are not predicated on a grounding in being.

## Journal of Therapeutics and Dietetics

The philosophy of medicine has become a vibrant and complex intellectual landscape, and *Care and Cure* is the first extended attempt to map it. In pursuing the interdependent aims of caring and curing, medicine relies on concepts, theories, inferences, and policies that are often complicated and controversial. Bringing much-needed clarity to the interplay of these diverse problems, Jacob Stegenga describes the core philosophical controversies underlying medicine in this unrivaled introduction to the field. The fourteen chapters in *Care and Cure* present and discuss conceptual, metaphysical, epistemological, and political

questions that arise in medicine, buttressed with lively illustrative examples ranging from debates over the true nature of disease to the effectiveness of medical interventions and homeopathy. Poised to be the standard sourcebook for anyone seeking a comprehensive overview of the canonical concepts, current state, and cutting edge of this vital field, this concise introduction will be an indispensable resource for students and scholars of medicine and philosophy.

### Medical Philosophy

In *Para-States and Medical Science*, P. Wenzel Geissler and the contributors examine how medicine and public health in Africa have been transformed as a result of economic and political liberalization and globalization, intertwined with epidemiological and technological changes. The resulting fragmented medical science landscape is shaped and sustained by transnational flows of expertise and resources. NGOs, universities, pharmaceutical companies and other nonstate actors now play a significant role in medical research and treatment. But as the contributors to this volume argue, these groups have not supplanted the primacy of the nation-state in Africa. Although not necessarily stable or responsive, national governments remain crucial in medical care, both as employers of health care professionals and as sources of regulation, access, and – albeit sometimes counterintuitively – trust for their people. “The state” has morphed into the “para-state” — not a monolithic and predictable source of sovereignty and governance, but a shifting, and at times ephemeral, figure. Tracing the emergence of the “global health” paradigm in Africa in the treatment of HIV, malaria, and leprosy, this book challenges familiar notions of African statehood as weak or illegitimate by elaborating complex new frameworks of governmentality that can be simultaneously functioning and dysfunctional. Contributors: Uli Beisel, Didier Fassin, P. Wenzel Geissler, Rene Gerrets, Ann Kelly, Guillaume Lachenal, John Manton, Lotte Meinert, Vinh-Kim Nguyen, Branwyn Poleykett, Susan Reynolds Whyte

### Medical Era

This book brings together the philosophies of technology and nihilism to investigate how we use technologies, from Netflix and Fitbit to Twitter and Google. It diagnoses how technologies are nihilistic and how our nihilism has become technological.

### National eclectic medical association. Quarterly

The era of therapeutic nihilism in dementia has ended, with the emergence of agents for symptomatic treatment, those that delay the course of the disease or prevent the onset of dementia, and new methods to manage symptoms. With the expansion of therapies, there is a clear danger of being overwhelmed by the volume of data. This book is designed to collect this information, distil what is relevant and reliable, and present it in a format that is useful to clinicians who manage and treat people with dementia. The book is designed to bring together the latest, best and practical evidence on all aspects of

management, from diagnosis and therapy to social and ethical considerations. The editors are all dynamic clinicians involved in the care of patients with dementia and the evaluation of therapies. Two of the editors are the leaders of the Cochrane Collaboration for the examination of therapies for dementia. There are no other books that take such a practical and problem-oriented or approach to the diagnosis and management of dementia. Furthermore none but this can be described as truly evidence-based.

### Psychoanalysis in Medicine

Philosophy of Medicine asks two central questions about medicine: what is it, and what should we think of it? Philosophy of medicine itself has evolved in response to developments in the philosophy of science, especially with regard to epistemology, positioning it to make contributions that are medically useful. This book locates these developments within a larger framework, suggesting that much philosophical thinking about medicine contributes to answering one or both of these two guiding questions. Taking stock of philosophy of medicine's present place in the landscape and its potential to illuminate a wide range of areas, from public health to policy, Alex Broadbent introduces various key topics in the philosophy of medicine. The first part of the book argues for a novel view of the nature of medicine, arguing that medicine should be understood as an inquiry into the nature and causes of health and disease. Medicine excels at achieving understanding, but not at translating this understanding into cure, a frustration that has dogged the history of medicine and continues to the present day. The second part of the book explores how we ought to consider medicine. Contemporary responses, such as evidence-based medicine and medical nihilism, tend to respond by fixing high standards of evidence. Broadbent rejects these approaches in favor of Medical Cosmopolitanism, or a rejection of epistemic relativism and pluralism about medicine that encourages conversations between medical traditions. From this standpoint, Broadbent opens the way to embracing alternative medicine. An accessible and user-friendly guide, Philosophy of Medicine puts these different debates into perspective and identifies areas that demand further exploration.

### The Social Transformation of American Medicine

#### Fathers and Sons (Translated by Constance Garnett with a Foreword by Avrahm Yarmolinsky)

Winner of the 1983 Pulitzer Prize and the Bancroft Prize in American History, this is a landmark history of how the entire American health care system of doctors, hospitals, health plans, and government programs has evolved over the last two centuries. "The definitive social history of the medical profession in America. A monumental achievement."—H. Jack Geiger, M.D., New York Times Book Review

## Geriatric Neuropsychology

This is the first book that analyzes and systematizes all the general ideas of medicine, in particular the philosophical ones, which are usually tacit. Instead of focusing on one or two points — typically disease and clinical trial — this book examines all the salient aspects of biomedical research and practice: the nature of disease; the logic of diagnosis; the discovery and design of drugs; the design of lab and clinical trials; the crafting of therapies and design of protocols; the moral duties and rights of physicians and patients; the distinctive features of scientific medicine and of medical quackery; the unique combination of basic and translational research; the place of physicians and nurses in society; the task of medical sociology; and the need for universal medical coverage. Health care workers, medicine buffs, and philosophers will find this thought-provoking book highly useful in their line of work and research.

## Rights Come to Mind

How is medical knowledge made? New methods for research and clinical care have reshaped the practices of medical knowledge production over the last forty years. Consensus conferences, evidence-based medicine, translational medicine, and narrative medicine are among the most prominent new methods. *Making Medical Knowledge* explores their origins and aims, their epistemic strengths, and their epistemic weaknesses. Miriam Solomon argues that the familiar dichotomy between the art and the science of medicine is not adequate for understanding this plurality of methods. The book begins by tracing the development of medical consensus conferences, from their beginning at the United States' National Institutes of Health in 1977, to their widespread adoption in national and international contexts. It discusses consensus conferences as social epistemic institutions designed to embody democracy and achieve objectivity. Evidence-based medicine, which developed next, ranks expert consensus at the bottom of the evidence hierarchy, thus challenging the authority of consensus conferences. Evidence-based medicine has transformed both medical research and clinical medicine in many positive ways, but it has also been accused of creating an intellectual hegemony that has marginalized crucial stages of scientific research, particularly scientific discovery. Translational medicine is understood as a response to the shortfalls of both consensus conferences and evidence-based medicine. Narrative medicine is the most prominent recent development in the medical humanities. Its central claim is that attention to narrative is essential for patient care. Solomon argues that the differences between narrative medicine and the other methods have been exaggerated, and offers a pluralistic account of how all the methods interact and sometimes conflict. The result is both practical and theoretical suggestions for how to improve medical knowledge and understand medical controversies.

## The Medical World

The discussion of whether psychopaths are morally responsible for their behaviour has long taken place in philosophy. In recent years this has moved into scientific and psychiatric investigation. *Responsibility and Psychopathy* discusses this subject from both the philosophical and scientific disciplines, as well as a legal perspective.

### Transactions

### The American Journal of Clinical Medicine

In this original and compelling book, Jeffrey P. Bishop, a philosopher, ethicist, and physician, argues that something has gone sadly amiss in the care of the dying by contemporary medicine and in our social and political views of death, as shaped by our scientific successes and ongoing debates about euthanasia and the “right to die”—or to live. *The Anticipatory Corpse: Medicine, Power, and the Care of the Dying*, informed by Foucault’s genealogy of medicine and power as well as by a thorough grasp of current medical practices and medical ethics, argues that a view of people as machines in motion—people as, in effect, temporarily animated corpses with interchangeable parts—has become epistemologically normative for medicine. The dead body is subtly anticipated in our practices of exercising control over the suffering person, whether through technological mastery in the intensive care unit or through the impersonal, quasi-scientific assessments of psychological and spiritual “medicine.” The result is a kind of nihilistic attitude toward the dying, and troubling contradictions and absurdities in our practices. Wide-ranging in its examples, from organ donation rules in the United States, to ICU medicine, to “spiritual surveys,” to presidential bioethics commissions attempting to define death, and to high-profile cases such as Terri Schiavo’s, *The Anticipatory Corpse* explores the historical, political, and philosophical underpinnings of our care of the dying and, finally, the possibilities of change. This book is a ground-breaking work in bioethics. It will provoke thought and argument for all those engaged in medicine, philosophy, theology, and health policy.

### Medical Nihilism

Through the sobering story of Maggie Worthen and her mother, Nancy, this book tells of one family's struggle with severe brain injury and how developments in neuroscience call for a reconsideration of what society owes patients at the edge of consciousness. Drawing upon over fifty in-depth family interviews, the history of severe brain injury from Quinlan to Schiavo, and his participation in landmark clinical trials, such as the first use of deep brain stimulation in the minimally conscious state, Joseph J. Fins captures the paradox of medical and societal neglect even as advances in neuroscience suggest new ways to mend the broken brain. Responding to the dire care provided to these marginalized patients, after heroically being saved, Fins places society's obligations to patients with severe injury within the historical legacy of the civil and disability rights

movements, offering a stirring synthesis of public policy and physician advocacy.

### The Price We Pay

### The Laws of Medicine

### Philosophy of Medicine

An account of the experiment conducted by the U.S. Public Health Service describes how medical treatment was withheld from Black sharecroppers infected with syphilis

### Responsibility and Psychopathy

This major clinical reference and text is the first volume to systematically address the entire process of neuropsychological assessment and intervention with older adults. The expert editors and contributors detail the current state of knowledge about frequently encountered conditions ranging from mild cognitive impairment to progressive, stable, and reversible dementias. Evidence-based assessment and intervention strategies are described, and specific guidance is provided for linking neuropsychological evaluation to individualized treatment planning. Demonstrating an array of cognitive training, compensatory, and psychotherapeutic approaches, the volume shows how these can successfully be used to improve patients' functioning and quality of life.

### Medical Nihilism

Over the course of a single generation, without significant discussion or debate, a key practice of traditional medicine was almost completely abandoned in mid-nineteenth-century Europe. K. Codell Carter ' s book describes how and why bloodletting was abandoned, noting that it was part of a process in which innovation was required so that modern scientific medicine could begin. This book is a masterful study on the collapse of a traditional medical practice. Bloodletting had been a prominent medical therapy in early nineteenth-century Europe and can be traced back to Greek and Roman physicians. The Hippocratic corpus contains several discussions of bloodletting. Galen, the most famous physician in classical antiquity, wrote tracts explaining and defending the practice. It was employed in ancient Egypt and is the most commonly mentioned therapy in the Babylonian Talmud. Indeed, it was practiced in virtually every part of the ancient world. Even though the practice abruptly

ceased, there was little argument against it or reason to believe it ineffective. In reality, bloodletting actually worked. However, the rise of modern medicine required not just a change in how disease and causation were conceived, but also a change in the role of medicine in society. It has been claimed that the collapse of traditional medicine was a precondition for the rise of modern medicine, but there has been little support for this assertion before now. Carter provides this missing support. The result is a fascinating study in the history of medical practice and social expectations.

### The Decline of Therapeutic Bloodletting and the Collapse of Traditional Medicine

### Transactions of the Joint Session of the Oklahoma State Medical Association with the Indian Territory Medical Association

### Para-States and Medical Science

"When Charles Miller Fisher was born in 1913 there was little scientific knowledge about brain diseases and their treatment. Stroke, one of the most common and most feared among brain conditions, did an almost complete flip/flop during the 20th century. At the midpoint of the century, when Fisher began his career, there was little public or medical interest in stroke. By the end of the century stroke care and research was among the most intensely active areas within all of medicine. This book is the story of that change and of one physician, Dr. C. Miller Fisher, a main architect and driver of that change"--

### Bad Blood

### The Eclectic Medical Journal

When a young graduate returns home he is accompanied, much to his father and uncle's discomfort, by a strange friend "who doesn't acknowledge any authorities, who doesn't accept a single principle on faith." Turgenev's masterpiece of generational conflict shocked Russian society when it was published in 1862 and continues today to seem as fresh and outspoken as it did to those who first encountered its nihilistic hero.

### The Anticipatory Corpse

Edited by R.H. Andrews.

### C. Miller Fisher

Business Book of the Year--Association of Business Journalists From the New York Times bestselling author of Unaccountable comes an eye-opening, urgent look at America's broken health care system--and the people who are saving it. "A must-read for every American." --Steve Forbes, editor-in-chief, FORBES One in five Americans now has medical debt in collections and rising health care costs today threaten every small business in America. Dr. Makary, one of the nation's leading health care experts, travels across America and details why health care has become a bubble. Drawing from on-the-ground stories, his research, and his own experience, *The Price We Pay* paints a vivid picture of price-gouging, middlemen, and a series of elusive money games in need of a serious shake-up. Dr. Makary shows how so much of health care spending goes to things that have nothing to do with health and what you can do about it. Dr. Makary challenges the medical establishment to remember medicine's noble heritage of caring for people when they are vulnerable. *The Price We Pay* offers a roadmap for everyday Americans and business leaders to get a better deal on their health care, and profiles the disruptors who are innovating medical care. The movement to restore medicine to its mission, Makary argues, is alive and well--a mission that can rebuild the public trust and save our country from the crushing cost of health care.

### The New England Medical Gazette

### Making Medical Knowledge

### The Medical News

This book argues that if we consider the ubiquity of small effect sizes in medicine, the extent of misleading evidence in medical research, the thin theoretical basis of many interventions, and the malleability of empirical methods, and if we employ our best inductive framework, then our confidence in medical interventions ought to be low.

### Care and Cure

### Medical Nihilism

Essential, required reading for doctors and patients alike: A Pulitzer Prize-winning author and one of the world's premiere cancer researchers reveals an urgent philosophy on the little-known principles that govern medicine—and how understanding these principles can empower us all. Over a decade ago, when Siddhartha Mukherjee was a young, exhausted, and isolated medical resident, he discovered a book that would forever change the way he understood the medical profession. The book, *The Youngest Science*, forced Dr. Mukherjee to ask himself an urgent, fundamental question: Is medicine a “science”? Sciences must have laws—statements of truth based on repeated experiments that describe some universal attribute of nature. But does medicine have laws like other sciences? Dr. Mukherjee has spent his career pondering this question—a question that would ultimately produce some of most serious thinking he would do around the tenets of his discipline—culminating in *The Laws of Medicine*. In this important treatise, he investigates the most perplexing and illuminating cases of his career that ultimately led him to identify the three key principles that govern medicine. Brimming with fascinating historical details and modern medical wonders, this important book is a fascinating glimpse into the struggles and Eureka! moments that people outside of the medical profession rarely see. Written with Dr. Mukherjee's signature eloquence and passionate prose, *The Laws of Medicine* is a critical read, not just for those in the medical profession, but for everyone who is moved to better understand how their health and well-being is being treated. Ultimately, this book lays the groundwork for a new way of understanding medicine, now and into the future.

### Psychology and Nihilism

### Eclectic Review

From Victorian India to near-future New York, *The Calcutta Chromosome* takes readers on a wondrous journey through time as a computer programmer trapped in a mind-numbing job hits upon a curious item that will forever change his life. When Antar discovers the battered I.D. card of a long-lost acquaintance, he is suddenly drawn into a spellbinding adventure across centuries and around the globe, into the strange life of L. Murugan, a man obsessed with the medical history of malaria, and into a magnificently complex world where conspiracy hangs in the air like mosquitoes on a summer night.

### Medical Arena

"Medical nihilism is the view that we should have little confidence in the effectiveness of medical interventions. This book argues that medical nihilism is a compelling view of modern medicine. If we consider the frequency of failed medical interventions, the extent of misleading evidence in medical research, the thin theoretical basis of many interventions, and the malleability of empirical methods in medicine, and if we employ our best inductive framework, then our confidence in the

effectiveness of medical interventions ought to be low" --

### The Medical Summary

This book shows how contemporary psychoanalytic thinking can be applied in the everyday practice of medicine to enhance the practice of family medicine and all clinical specialties. Dr. Steinberg analyzes his writings over the past 35 years—on psychiatry and family medicine, liaison psychiatry, and supervision and mentoring—based on developments in psychoanalytic thinking. Divided into sections based on different venues of medical practice, including family medicine clinics, inpatient medical and surgical units, and psychiatric inpatient units and outpatient programs, chapters illustrate how various concepts in psychoanalysis can enhance physicians' understanding and management of their patients. A concluding section contains applications of psychoanalytic thought in non-clinical areas pertinent to medicine, including preventing suicide among physicians, residents, and medical students, sexual abuse of patients by physicians, and oral examination anxiety in physicians. Readers will learn to apply psychoanalytic concepts with a rational approach that enhances their understanding and management of their patients and practice of medicine generally.

### Calcutta Chromosome: A Novel (PB)

### Medical Brief

### Medical Summary

### Nihilism and Technology

This book argues that if we consider the ubiquity of small effect sizes in medicine, the extent of misleading evidence in medical research, the thin theoretical basis of many interventions, and the malleability of empirical methods, and if we employ our best inductive framework, then our confidence in medical interventions ought to be low.

### Ontological Terror

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