

engineering and regenerative medicine, while remaining critical, is more tempered and realistic. “[R]egenerative medicine is largely concerned with ensuring the body’s protection from the dangers of certain contingencies that threaten its well-being.” Thacker’s critique is that, like the genecentric, reductionist approaches found in biotechnology, the concentration on the capacity of the body to “regrow” itself de-emphasizes environment and context such that the body is viewed in a cellular vacuum. According to the author, the concept of human labour — the real-time labour of the physical body — is replaced by the archival “labour” of cell cultures, databases and plasmid libraries. Ten years ago, the fear was of the genetization of society, while now it is of the technical redesign of life, the realization of the fictional X-Men.

This book constitutes a critical analysis of the integration of information and biotechnology. The challenge is to rethink the vitalist ideology of the life sciences. It offers a framework for a futuristic examination of current “advances,” whether one agrees with the author’s conclusions or not. The challenge offered by Thacker is to question whether the “complex” properties of “biological life itself” will lead us to innovation in both our thinking on the relation between the human and the nonhuman and in the fashioning of prospective policies.

#### Bartha Maria Knoppers

Canada Research Chair in Law and Medicine  
Centre de recherche en droit public  
Université de Montréal  
Montréal, Que.



## Notes

### Any resident’s story

- 11:14 I can’t wait until I’m on staff. I’m gonna leave my watch at home every day. Maybe I’ll just forget how to tell time altogether.
- 11:20 Okay, he should be here any minute now. No apology, of course. Not even an explanation. Is there an explanation? Stuck in traffic? Attacked by badgers? Trapped under something heavy, like his ego? Maybe he’s looking after some really sick patient somewhere. *Really* sick, unlike his patients here, who are apparently only sorta sick and not really worth his time. Maybe someone’s dying somewhere.
- 11:27 There’d better be somebody dying. Only excuse I can think of for being 27 minutes late.
- 11:31 There’s nobody dying anywhere. Well, dying of iatrogenic boredom, maybe. I wonder who the victim is. Some poor patient? Another resident? Maybe it’s some other staff jerk, who’s seriously reconsidering ever asking for a curbside consult again.
- 11:36 I’d leave and try to get something useful done, but the second I do he’ll turn up and blow a gasket because I’m not here waiting for him with his slippers in my mouth. Should I page him? No, he hates being paged. Whenever I page him he’s in the middle of something important, like curing cancer or inventing oxygen or defibrillating the Pope.
- 11:41 Why am I even here? I’ve forgotten everything I was going to talk to him about. Dammit! Aww, it doesn’t matter, anyway. He never wants to hear anything I have to say. Vitals? Bah! Meds? Phooey! Has the patient recently eaten nectarines? *That’s* what he’ll want to know. Has the patient ever been in a marching band? Has the patient now, or has the patient ever been, in possession of a humidor?
- 11:43 Oh, here he comes now. You’d think he was on vacation, the way he’s meandering down the hall. Hey, wait a second ... he’s got a coffee! He’s been at Tim’s for God’s sake! That’s it. He’s really gonna get it now. I’m gonna take a piece outta him. Here I am waiting to talk to him about *his* patients, and he’s getting a double-double and a muffin! I’m gonna ...
- 11:46 I really shoulda let him have it.
- 12:02 Well, I guess I won’t be getting to that lunchtime teaching session. This is plenty educational, though. Listening to him go on about how residents today don’t know how to do a physical exam is certainly going to make me a better doctor. I bet he knows of a study that says so.
- 12:08 Shut up. Please shut up. I’ll pay you one hundred dollars to shut up. Seriously. Stop talking now.
- 12:14 Randomize *this*, you \$%&@!

**Paul Moorehead**  
Pediatrics Resident  
Memorial University of Newfoundland  
St. John’s, Nfld.

DOI:10.1503/cmaj.060017