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traffic between information and the flesh. Seattle:  
University of Washington Press.**

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**Rosengarten, M. 2009. HIV Interventions: biomedicine and the traffic between information and the flesh. Seattle: University of Washington Press.**

From the very early days of the HIV epidemic, its history has been told through multiple, parallel, narratives. The first, and best known, is the narrative that runs through the standard medical literature and is, in turn, translated for the layman through mainstream media. Key elements of this story include the by now familiar challenges and breakthroughs that have mapped our way through the epidemic: diagnosis of AIDS, discovery of HIV, tests (for HIV antibodies, CD4 counts, viral load etc), treatments, combination therapy etc.

At the same time, another narrative has been unfolding. This is the story of the epidemic as reflected in the work social and cultural theorists and activists, such as Cindy Patton, Paula Treichler, Douglas Crimp, Judith Butler and Simon Watney, to name but a few. Their critiques of the epidemic and responses to it challenge some taken-for-granted concepts and assumptions and distinctions that have influenced the scientific, medical, social and political responses to the epidemic such as: epidemiological categories and identities, safer sex, polarities between nature and culture, and distinctions between the biological and the social and between subjects and objects.

Rosengarten builds upon this literature by exploring what she describes as the *traffic* between HIV interventions and human bodies. This metaphor is particularly apt in conveying the notion of *agency*, of interventions and people acting upon each other. Consider, for example, what the course of the epidemic might have been without HIV activism?

The author focuses on the implications of the 'decoupling' of HIV and AIDS and considers interventions - such as viral load testing and ART (which she describes as an 'unsatisfactory privilege' that remains unavailable to the vast majority of those who may need it) - as more than medical procedures, but rather as *performative*, social and cultural events. Viewed thus, scientific intervention and human bodies are actually mutually constitutive.

In this way, the author challenges any simplistic conceptualisation of a passive human object acted upon in the name of science - categorised by risk factors, targeted, tested, diagnosed and treated (or not) by science - and reveals instead a relationships that is at once complex, dynamic and shifting.

At just over 100 pages (plus notes and references), this is a short book. Nonetheless it is a difficult read, especially for anyone unfamiliar with social and cultural theory. One cannot help feeling that there *are* practical implications of this kind of approach for

practitioners, but ultimately these are insufficiently articulated and the reader is left to speculate.

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