

**Mechanic D.** *Medical sociology: a selective view.*  
New York: Free Press, 1968. 504 p.  
[University of Wisconsin, Madison, WI]

The central issues in medical sociology are examined in relation to larger sociological concerns and to medical care. The book explores how medicine's principal responsibilities (understanding how illnesses arise, curing disease and minimizing disability, and promoting living conditions conducive to health and longevity) can be pursued more effectively if attention is given to social and psychological factors. [The *Social Sciences Citation Index*® (SSCI)® indicates that both editions of this book have been cited in over 475 publications since 1968.]

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I became interested in medical sociology as a student at Stanford in the late 1950s, with the encouragement of my mentor, Edmund H. Volkart. Although there were many interesting studies of behavioral factors in health and health care, the field did not truly exist as a coherent area of study and students at the time had to piece materials together as best they could. When I left Stanford in 1959, I began projects on stress and coping, illness behavior, social aspects of disability, and physician behavior, all relatively new concerns at the time. In 1961, I initiated a new teaching and research program in medical sociology at the University of Wisconsin.

In 1965, I went to England to study the National Health Service, in my first effort at cross-national comparative research. As I attended hospital rounds, talked with doctors and medical administrators, and accompanied GPs on home visits, I was impressed both by the common problems of medi-

cal care across nations and by how substantially their management was shaped by history, culture, social stratification, and professional assumptions. I also learned that many of my theoretical preconceptions about how a socialized system of medical care would work were way off the mark.

It was in this context that I decided to write a personal statement of what the field of medical sociology was all about, the theoretical and methodological challenges, and how understanding behavior and organization could vastly improve medical prediction and patient outcome. My intent was to emphasize contemporary issues without neglecting the influence of history or culture. There was no previous integrated effort to define the field, but there was a long history of relevant theoretical and research activity in epidemiology, social medicine, and medical history that embodied Rudolf Virchow's insight that medicine is in essence a social science. Fortunately, I could build on the prolific work of Sigerist<sup>1,2</sup> and Ackerknecht<sup>3</sup> and, within sociology, the influential analyses of Talcott Parsons and his students<sup>4,5</sup> on the sick role and the functions of medical care, Freidson's<sup>6,7</sup> work on client control, Hollingshead and Redlich's<sup>8</sup> study of social class and mental illness, and many other exciting efforts in this newly emerging enterprise. I guarded against my presumptuousness in trying to encompass such a vast range of intellectual activities by subtitling the book, *A Selective View*.

I believe the book has been frequently cited because it helped researchers relate their own efforts and concerns to theoretical, methodological, and substantive issues in the field as a whole. The book probably played no small part in my inclusion among the first group of health scientists and professionals elected to the Institute of Medicine of the National Academy of Sciences in 1971.

In 1978, I published a much expanded second edition that is broader in scope and, in my judgment, a better book.<sup>9</sup> The new edition included much more detail and theory about the medical marketplace, health-care organization, the rationing of medical care, and health-care policy, as well as development of such issues as stress and disease and coping. The 1968 edition continues to be commonly cited; let me suggest consulting the 1978 version.

1. Sigerist H E. *A history of medicine*. New York: Oxford University Press, 1951-1961. 2 vols.
2. ----- . *On the sociology of medicine*. New York: MD Publications, 1960. 397 p.
3. Ackerknecht E H. *Malaria in the upper Mississippi Valley 1760-1900*. Baltimore, MD: Johns Hopkins Press, 1945. 142 p.
4. Parsons T. *The social system*. Glencoe, IL: Free Press, 1951. 575 p.
5. Fox R C. *Experiment perilous: physicians and patients facing the unknown*. Glencoe, IL: Free Press, 1959. 262 p.
6. Freidson E. Client control in medical practice. *Amer. J. Sociol.* 65:374-82, 1960.
7. ----- . *Profession of medicine: a study of the sociology of applied knowledge*. New York: Dodd, Mead, 1970. 409 p.
8. Hollingshead A B & Redlich F C. *Social class and mental illness: a community study*. New York: Wiley, 1958. 442 p.
9. Mechanic D. *Medical sociology: a comprehensive text*. New York: Free Press, 1978. 597 p.