Emerging knowledge of epigenetics and the microbiome has garnered great interest in scientific, scholarly, and public imaginaries alike. Yet little work thus far traces how these relatively recent notions are—and are not—being adopted clinically. *Nested Ecologies: A Multilayered Ethnography of Functional Medicine* offers an early glimpse of how genetics, epigenetics, and the microbiome are being taken up within functional medicine, a medical community that blurs the already porous line between conventional and alternative medicine. The book examines functional medicine’s perspectives on the body, health, and illness.

In a method she aptly describes as digital autoethnography, medical anthropologist Rosalynn A. Vega narrates her own experience of healing from intensive chronic illness by gaining expertise in functional medicine and implementing its interventions. Approaching functional medicine as both ethnographer and patient-practitioner, she offers an in-depth discussion of its logics in five chapters, each addressing a different animating narrative of functional medicine. Introducing most chapters are autoethnographic interludes, which narrate aspects of Vega’s own experience of illness and healing as it intertwines with her professionalization as a medical anthropologist and research for this book.

Many of functional medicine’s practitioners and advocates are conventionally trained health practitioners who understand themselves as leaders in a Kuhnian paradigm shift. The first two chapters detail their approach by critical contrast to what they term “conventional medicine.” Functional medicine posits a mismatch between conventional medical approaches, which are aimed at acute disease and injury, and the chronic disorders that constitute a majority of contemporary illness in the United States. Practitioners and advocates argue that conventional medicine artificially divides bodies and symptoms into disparate organ systems and specialties, making it ill-equipped to deal with chronic disease beyond pharmaceutical symptom management. By contrast, they argue, functional medicine can heal
chronic disease by focusing on root causes and taking a holistic systems biology approach that sees all parts of the person as interconnected. In functional medicine, long, narrative health histories replace exclusive symptom histories, healing supplants chronic symptom management, and lived experience takes precedence over tests.

Where the first two chapters characterize functional medicine’s foundational tenets, chapters 3 and 4 explore the primary mechanisms by which functional medicine aims to improve health. Building on ideas from epigenetics and microbiome science, functional medicine takes a person’s environment as the primary mediator of health and illness, including such factors as nutrition, environmental toxicants, relationships, exercise, stress, thoughts and emotions, drugs, and ambient exposure to microbes. Chapter 5 elaborates on the microbiome as the key to intervening on health by promoting internal microbial diversity, primarily but not exclusively through food. Functional medicine understands environmental factors as epigenetic mechanisms: by affecting gut microbiomes and the metabolites they produce, environmental factors affect biochemical processes, such as brain chemistry and ultimately gene expression.

However, as Vega demonstrates, these environmental factors are often encoded as “lifestyle” in ways that emphasize individual behaviors and assume the privilege to change them, neglecting and reproducing the structural inequities that shape choice, risk, and health. Functional medicine’s interventions are often lifestyle-based changes—such as diet, sleep, and stress management—that are predicated upon numerous kinds of privilege. The book illuminates the multiple ways that functional medicine practitioners suffer from what she calls “structural myopia,” including overlooking the privilege required to access functional medicine and its interventions, essentializing culture and romanticizing tradition, and over-emphasizing individual choice. With clarity and precision, Vega argues that functional medicine fails to contend with social inequality, unintentionally reproducing structural inequities and neoliberal logics of individual responsibility and consumption.

*Nested Ecologies* offers a deep and thorough synthesis of functional medicine perspectives, a depth achieved because the author herself became something of a functional medicine practitioner for her own illness. However, this deeply internal lens occasionally sacrifices ethnographic context and perspective. Both functional and conventional medicine can come across as homogenous, and readers do not get a strong sense of what is contested, unsettled, or uncertain about or within functional medicine. Because the book’s sources are primarily educational and promotional materials, the book often bypasses how functional medicine practitioners and advocates arrive at their claims and assertions, rendering invisible how some of these—such as epigenetic inheritance—are actually the subject of contestation and lively debate. Nevertheless, while further reflection on context and methodological limitations would be welcome, the author provides an engaging and detailed discussion of her methods, including several captivating graphics mapping concepts, source materials, and the social networks of the functional medicine community.

This book contributes to both conversation and praxis of destigmatizing illness in academia and beyond. Vega’s open and carefully reflective discussion of her illnesses, experiences with various medical approaches, support network, and healing, as well as how these inform and intertwine with her career as a medical anthropologist, are among the best parts of the book. Poignant and compelling, they provide thematic grounding to the analytic discussion while standing firmly on their own. In keeping with her aim for the book to be accessible to undergraduates and nonacademic readers, Vega introduces most theoretical concepts. The introduction and autoethnographic in-
terludes meet this aim, even as the primary chapters adopt more technical language.

_Nested Ecologies_ joins a stimulating scholarly conversation about interdisciplinarity between the social, biological, and medical sciences, contributing timely ethnographic data on the clinical uptake of epigenetics and the microbiome. With the concept of nested ecologies, the author offers an interdisciplinary framework for thinking about the interconnectedness of our internal and external ecologies, one that foregrounds the ways that social and structural inequality shape human health and disease.

_Nested Ecologies_ is an important read for functional medicine practitioners and advocates, along with other medical practitioners who are interested in learning more about functional medicine, structural competency, and the social and structural determinants of health. Additionally, medical anthropologists interested in alternative medicine, postgenomics, chronic illness, and the politics of access will find rich material here, as will food studies scholars interested in clinical approaches to food systems, nutrition, and health.

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