first clinical trial. True to form it is reprinted in the turgid prose of the New English Bible. However, the modern interest in the ethics of human experimentation dates from the Nazi concentration camps, and the legacy of Nuremberg permeates this volume. Robert Massey puts the history of experimentation in cultural context and cautions us against the use of the retrospectoscope in judgement. Engelhardt argues fairly cogently that randomised clinical trials are not intrinsically unethical, comparing the patient who consents to enter one with the man who joins a poker school and thereby agrees to have his fellow players attempt to deceive him. Unfortunately, this essay like many in the volume assumes a familiarity with the work of Hans Jonas. I would strongly advise anyone who is unfamiliar with it not to bother with this book.

Spicker argues against randomised trials before pilot trials have set out the ground rules – all very sensible. The essay by Michael Ruse on interrupting clinical trials is the first statistical paper in the volume and the first one I really warmed to.

Is there an obligation to participate in biomedical research? Arthur Copplan makes the (theological) point that to be the recipients of the benefits of someone else’s sacrifice does not make us debtors. We are only obliged to be grateful, not to sacrifice ourselves. The Dagens caution us against autoexperimentation, and Lademir reduces the harm done by experiments to mere money.

This really is the sort of book that you only read because you’ve been asked to review it.

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The Nazi Doctors


This long and important book is divided into three parts. Part I, Life Unworthy of Life, is basically about eugenic euthanasia, and recounts how in this field, before proceeding to the next step – the Nazi extermination of Jews and other groups such as gypsies – doctors were involved at all stages of the euthanasia project.

Part II, entitled Auschwitz, the Racial Cure, consists of detailed accounts of interviews with many of the doctors who themselves were Nazis, and who, often by means of slow induction into the lethal system, became adapted to it. They did so in various ways, some being totally involved in an almost religiously fanatical way with the aim of cleansing and perfecting the German people. This was completely in line with Hitler’s dream as stated in Mein Kampf and repeated many times thereafter. Some doctors carried out their tasks, which led to the deaths of innumerable humans with less than relish, while others were able to relatively kind and overtly healing but always within the general ambience of ‘licensed mass murder’ on a mega-scale. The author calls this duality, this polarisation, ‘doubling’ by the doctors into twin selves, a sort of Dr Jekyll and Mr Hyde effect. Dissociation or splitting was responsible for this. Seriously disturbing though all the book is, one of the most worrying parts is the way in which some of the prisoner-doctors called upon – or ‘privileged’ – to help in the camp, were drawn into the vortex of the Racial Cure, which consisted of the most massive genocidal organisation the world has ever known.

Thus, some of the prisoner-doctors, while remaining concerned with being healers in one way, suffered from doubling too, so that they could co-operate in the lethal project with their ‘other selves’. This had an element of self-preservation in it, but the situation was more complicated than that. It shows the power of the group, and the institutional dynamics of an extermination camp.

Part III, The Psychology of Genocide, is much shorter than Part II, but is the most interesting part of the book. A part of each doctor who eventually became adapted to the Auschwitz ethos did so at the cost of part, or in some cases nearly all, of his basic humanity. This involved a breakdown of the balance of life and death instincts within him, with a massive bias towards death. Identification with the aggressor in the interests of self-preservation was the general reaction. When these medical staff members were so reacting, preserving the self was accomplished for the time being by a massive putting of death into the concentration camp inmates; it was they, the inmates, who were killed, not the doctor’s own ‘self’, and the process was repeated many, many times upon a succession of victims.

In order to make this abattoir of humanity efficient in carrying out the most grisly of work, the inmates were herded, de-humanised by brutal treatment, including hard physical work and gross starvation, so that they were helped to be less than human before they were killed. This facilitated the killing of them so that it could be fitted loosely into the euthanasia project. The doctors tried to make their role have some compatibility with their Hippocratic oath, some conformity with it, but it was an unconvincing and dishonest self-protecting edifice of confused rationalisation. In order to carry on, the phenomenon labelled by the author as ‘doubling’ took place. Thus, the doctor was split and polarised into a reasonably compassionate and genial self, the Dr Jekyll self, and the Nazi officer caught in the machine of mass murder, became the Mr Hyde character. The whole rationale of The Final Solution, and prior to that of the ‘this person is not fit to live’ of the euthanasia campaign, appears to be based on the projection of all the disowned hated aspects of the Nazis themselves, into victims labelled Jews, gypsies, mentally subnormals or psychotics, and there and then was the slaughter: they were killed. I am reminded of the factors that I and others have found in the minds of multiple murderers. In Auschwitz the situation was highly organised on a colossal scale. The most horrendous feature of it was a combination of a confused racial self-idealisation, with a massive denigration of categories of people designated as suitable only for extermination, and the efficient carrying out of the programme of annihilation.

Everyone should read this book and face the painful question: ‘How would I have behaved as a doctor in Auschwitz, and how would I have behaved as a prisoner-doctor?’.

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Health and Medicine in the Islamic Tradition


There are six major religions in the