Conference report

The Council of Europe’s first Symposium on Bioethics: Strasbourg, December 5-7 1989

Kenneth Boyd  Edinburgh

Author’s abstract

This symposium discussed bioethics teaching, research and documentation and also research ethics committees. An international convention for the protection of the integrity of the human body was called for, as was a new European Committee on Ethics. ‘The genetic impact’ was a major preoccupation of the symposium.

The Council of Europe’s first Symposium on Bioethics was strong on realism as well as rhetoric. The Council of Europe has been issuing reports and recommendations on biomedical law and ethics since the early 1970s. The body responsible for preparing these documents, CAHBI (the ad-hoc committee of experts on progress in biomedical sciences), now wanted to discuss its current concerns with a wider group of representatives from universities and research institutes. Several hundred of the latter attended the symposium and listened, politely, to a variety of open and hidden agendas being declaimed, both by one another and by CAHBI and council members. But then, after the rhetoric, they got down to serious and informed talk among themselves.

The major part of the symposium was spent in workshops, discussing four topics: training and teaching; research in bioethics; documentation and information; and ethics committees and commissions of inquiry.

Bioethics teaching, as a report prepared in advance of the symposium indicated, is very unevenly developed in the member States of the Council of Europe. The workshop thus provided a useful opportunity for exchanging information about how theoretical, practical, personal and social objectives were being implemented in different teaching centres. Bioethics courses for health professional students, it was agreed, should include (a) an introduction to general and applied ethics; (b) some presentation of methods of ethical decision-making; (c) teaching on the history and philosophy of medicine; and (d) discussion of specific classical medico-moral problems from the beginning to the end of life. Medical humanities and law were useful adjuncts to this, as was knowledge of problem-solving techniques. Teaching, the representatives agreed, should be multidisciplinary, involving those with both analytical and practical experience.

Research in bioethics, the workshop on that topic thought, was still in its infancy. But those with most experience of this activity agreed with the tentative definition that research in bioethics is ‘typically an interdisciplinary, co-operative and dialogical inquiry in the context of biomedical research and/or clinical practice’. Its aim is ‘not primarily to reach definitive solutions and answers but to make broader and deeper the moral consciousness of health professions and the communities they serve’. Research in bioethics again was seen as essentially a multidisciplinary activity, involving both theoreticians and practitioners. It also, members of the workshop believed, had to be international and cross-cultural. Agreement on what to do in specific cases sometimes was reached by individuals who began from ethical principles conflicting with those of each other. But bioethics needed to look for roots in shared values deeper than those of minimalistic procedural ethics.

Multidisciplinary and international forms of cooperation were also called for by members of two other workshops. The need for documentation and information in bioethics was acknowledged with particular reference to case material for teaching and in connection with research ethics committees. The deliberations of the latter, it was argued, should be made more public, and information about research projects turned down by them, together with the reasons for this, should be provided. From a variety of sources moreover, the case was pressed for national research ethics committees in those countries which had not set these up. An international convention for the protection of the integrity of the human body ought to be drawn up in the Council of Europe, according to Bartha Maria Knoppers of the University of Montreal, General Rapporteur of the symposium.

Summing up the three-day discussions between scientists and practitioners on the new ethical and legal prospects and the dilemmas with which medicine is confronted by scientific progress, she said that such a
Conference report: The Council of Europe's first Symposium on Bioethics

The Council of Europe's first Symposium on Bioethics convention should lay down the basic rules of bioethics, including bans on trade in everything human, single cells to whole organs.

The convention, covering the States of Western and Eastern Europe as well as other countries (Canada, United States, Japan, Australia, etc), should be binding on those States not only as between themselves, but also in relation to the rest of the world, especially the developing countries, so as to prevent abuse.

A proposal was made by the Secretary General of the Council of Europe, Catherine Lalumiere, at the opening of the symposium, to set up within the council a 'European Committee on Ethics as an offshoot of the corresponding existing or future national committees and as a place where scientists, lawyers, politicians and "wise men" could share ideas'. While it was acknowledged that much of the ethically most important behaviour in this area could not be described in detail, let alone legislated for, nonetheless the danger of 'biomedical havens' springing up as a result of different standards of regulation in different parts of the world was mentioned by a number of participants and by the French Minister attached to the Minister for Foreign Affairs, Edwige Avice, in her closing address.

This last point was typical of the realism against which proposals for bioethics teaching, research, legislation and practice were continually being tested in the deliberations of the symposium. Legislation, and ethics committees, local, national and international, had an important contribution to make, not yet fully explored. But equally important, with a view to everyday practice, was co-operative exploration of the details of our common and individual heritage, cultural, moral and now genetic. The theme of 'the genetic impact' indeed, hung over the symposium like the overarching branching pillars of the Palais de l'Europe in which it was held, or like the metaphor of exploration and map-making introduced at its beginning by the Portuguese Minister of Justice, recalling Vasco da Gama.

To be a bioethics 'expert' participant in the symposium sometimes felt like being chaplain on a pilot galleon. But perhaps this time round – the genome rather than the globe – we may be wiser. The Council of Europe, it certainly must be said, has directed its best efforts to that end.

Kenneth Boyd is Scottish Director and Research Director of the Institute of Medical Ethics.
Kenneth Boyd

J Med Ethics 1990 16: 97-98
doi: 10.1136/jme.16.2.97

Updated information and services can be found at:
http://jme.bmj.com/content/16/2/97

These include:

Email alerting service
Receive free email alerts when new articles cite this article. Sign up in the box at the top right corner of the online article.

Notes

To request permissions go to:
http://group.bmj.com/group/rights-licensing/permissions

To order reprints go to:
http://journals.bmj.com/cgi/reprintform

To subscribe to BMJ go to:
http://group.bmj.com/subscribe/