detailed contractual theory of professional relationships in which the patient has definite duties as well as rights. This is not a new idea. The author quotes the American Medical Association's first code of ethics which included no less than eight positive obligations on the patient. Modern medical ethics, though, is largely doctor-centred, emphasising his or her duties – of veracity, confidentiality, justice and so forth – and the corresponding rights of the patient. In the author's contractual model, on the other hand, equal importance is attached to the duties of the patient – many of which indeed mirror the doctor's duties – and the corresponding rights of the doctor.

There is also an interesting sub-theme. The author is among those who have emphasised the way in which value judgements are woven into the very heart of clinical decision-making. Most doctors, notwithstanding the insights of philosophers and sociologists, still hold an essentially scientific view of medicine, believing that a large majority of clinical decisions are based on purely technical considerations. But *all* decisions issuing in action involve values as well as facts. And this leads directly to the contractual model, the values relevant to clinical decisions being at least as much those of the patient as the doctor. It also leads to the author's vision of the future of medicine. Recent work in the philosophy of science has shown that science itself is embedded in a complex nexus of personal and social values. In his concluding chapter the author indicates how this post-modern understanding of science could transform every aspect of the traditional relationship between doctor and patient.

This sub-theme is important. The author claims, rightly, that his contractual model is a counter-balance to the arrogance of technological medicine. But it could be said of his book that it illustrates one of the pitfalls of bioethics – the danger as Priscilla Alderson has put it, that patients will be 'recreated doubly as lay people' (1), originally by technical experts, and now by a new breed of ethical experts. The language of contract reinforces this. The author's recommendations on resuscitation orders, for example, although pithy and practical, read like a legal textbook. And in the section on patients' duties, was it really necessary to put the obligation to pay the doctor's fees in top position? The issues here are well illustrated by psychiatric ethics. Along with much of the bioethics

literature, this is the one glaring gap in the book's coverage. It is there by implication, of course. But in psychiatry, above all, the evaluative element in clinical decision-making is transparent. And in psychiatry, above all, while legal safeguards on autonomy are essential, we need a return to caring, to that nurturing engagement with the patient's experience and values for which Priscilla Alderson argues.

But these cavils are mainly against bioethics in general. This book is vigorous, detailed, well-argued and original. It is a timely contribution to scholarly debate on the relationship between doctor and patient.

Reference

- (1) Alderson P. *Choosing for children: parents' consent to surgery*. Oxford: Oxford University Press, 1990.

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Global Responsibility: in Search of a New World Ethic

Hans Küng, xix + 158 pages, London, 1991, SCM Press, £12.95.

Why should this book be reviewed in the JME? Something needs to be said about its author and contents before facing this question. Hans Küng is fundamentally a systematic theologian who has established a formidable reputation for learning and liveliness of mind. His books have been widely read, and he was a consultant at the Second Vatican Council (1962-5). In 1963, at the age of 35, he had already been appointed Professor of Dogmatic and Ecumenical Research and Director of the Institute for Ecumenical Research at the University of Tübingen. Subsequently the Vatican withdrew his credentials as an 'official' teacher of Roman Catholic theology, and from 1980 he has held an independent chair in Ecumenical Theology at Tübingen, whilst continuing as a Director of the Institute.

Since then his interests have widened beyond the internal concerns of the Christian Churches, though not excluding them. In this book, which is the herald of a trilogy on Judaism, Christianity and Islam, he produces a

manifesto on the following three themes: (1) No human life together without a world ethic for the nations; (2) No peace among the nations without peace among the religions; (3) No peace among the religions without dialogue among the religions. His sense of urgency is as great as that behind *The Communist Manifesto* in 1848, and better founded. It has led to a great effort to write clearly and untechnically in a way that any educated person can understand. He breaks down the argument with many summaries and signposts. Technical support for them comes in the footnotes.

He presents the need in our post-modern and plural world for a minimum of common values, norms and attitudes, and for an ethic of responsibility, in the double sense of accountability and concern for the truly human. He argues that an ethical relativity in understanding the details of human life does not mean a total relativism. In particular the *humanum* is not just a 'Western' invention. He finds the seeds of it in all the great religions, but a good deal more besides; and if they are to promote it they need much self-criticism before they can be true to their best. (He does not advocate syncretism.) They will need to exhibit a middle way between legalism and libertinism. To do this they must be in dialogue. Küng explores the basis on which such dialogue can be undertaken.

But why bother about religion? One aim of the book is to argue that ethics does need religion, that the Unconditioned can best sustain the changing and conditioned features of human life. But why should those who are indifferent to religion, or 'cultured despisers' of it, bother with it? Because they should not shut their eyes to the sheer amount of it in the world, and its possibilities for good or evil.

Küng ends by calling for dialogue of many kinds. These include dialogue among and within the professions. Medicine is a profession; it, too, needs a common, human, ethical basis. A purely technological medicine is inhuman and a moral disaster. Medicine cannot afford to assume a common, basic, ethical foundation. Such a foundation has continually to be explored and worked for. Whether or not one agrees with Küng in every detail, he presents a case which needs to be heard. That is why his book is reviewed in the JME.

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