NHS in its current form.) Finally, the fourth principle, that of keeping costs as low as possible, provokes a savaging of the QALY (Quality Adjusted Life Year), with some related and telling points along the way. As he says, we should be wary of accepting the economists' simplifying assumptions when the problems are more than just academic exercises. He also shows that, as measures of disability and distress, QALYs are only arbitrarily restricted to illness.

The aim of the book is admirable and anyone seriously interested in the future of the NHS needs some familiarity with the issues that it covers. Whether they acquire it via this book, or try elsewhere, may well depend on their reaction to its rather busy presentation. Sub-headings, numberings, lists, italics, emboldening, italicised emboldening, indenting, dialogue, diagrams and boxes all rush to help us. Ungrateful readers may soon be longing for a stretch of quiet, open country, disturbed only by the warble of a distant chapter, or the rustle of a new paragraph.

HUGH UPTON

*Centre for Philosophy and Health Care,
University College of Swansea*

Genes and human self-knowledge

Edited by Robert F Weir, Susan C Lawrence and Evan Fales, Iowa City, University of Iowa Press, 1994, 248 pages, \$14.95 sc, \$29.95 hc

Advances in molecular biology have allowed the identification of genes involved in an escalating number of diseases. Not only have the genes for monogenic conditions such as Cystic Fibrosis, Huntington's disease and Muscular Dystrophy been identified, but also the genetic components of common diseases such as heart disease, cancer and diabetes mellitus are now being characterised. This rapidly changing state of genetic 'knowledge' has profound social, ethical, practical and health economic implications. Individuals can discover whether they are at risk of, or likely to develop, a disease at some point in their lives, many years before the onset of actual symptoms. This is likely to change how people are viewed by themselves and by others, such as, for example, insurance companies and employers.

One of the problems with this

rapidly expanding state of scientific knowledge is that it may outstrip understanding of the impact of such testing on individuals. Scientists may have an insufficient knowledge or interest in ethics, philosophy or psychosocial issues, and vice versa, yet this is an area that clearly requires an interdisciplinary approach. *Genes and Human Self Knowledge* is the publication of the proceedings of a four-day symposium held at the University of Iowa in 1992, which attempts to provide this interdisciplinary approach. The symposium gathered together experts from several different areas; philosophers, historians, biomedical ethicists, molecular genetic scientists, clinical geneticists and members of the general public to address various aspects of human genetics with special reference to the impact of the Human Genome Project (HGP) on these aspects. The book is organised into three sections, containing the symposium papers in revised essay form. Each essay is followed by one or more shorter sections representing responses or comments by panellists.

Essays in the first section address 'Genetic identity and self-knowledge' and suggest that the HGP may affect views on equality, normality and personal responsibility for conduct. Another essay, by a psychologist, uses personal and very moving statements by people at risk of developing Huntington's disease. Section two addresses possible uses and misuses of genetic knowledge. This includes an essay on the different understandings and implications of the term eugenics, both now and historically. Other essays discuss the teaching of molecular biology in schools and colleges and the role of the media in shaping the public's opinions and understanding of genetics. Discrimination based on the results of genetic tests (diagnostic or prognostic) by employers and insurers is also covered. The last section considers the theme 'Genders, races and future generations' and discusses the basis for beliefs of racial and sexual differences as well as the importance of genetic variation.

Although this book describes many of the facts in relation to genetic information from an American point of view, the fundamental issues raised are universal. There is some repetition of issues between different essays, but they are all very readable and it is good to see essays on philosophical discussions intermingled with personal accounts of a genetic condition and with essays considering the biology of

genetics. I would recommend this book to those interested in the special ethical issues surrounding genetic testing.

ANNEKE LUCASSEN
*Department of Clinical Genetics,
Churchill Hospital, Oxford*

Reports from the Holocaust: the making of an AIDS activist

Larry Kramer, London, Penguin, 1990, 290 pages, £5.99

A book such as this emerges from the deepest sense of indignation against a society that struggles acrimoniously with the acceptance of homosexuality. Larry Kramer has raised his voice of protest for over a decade, directing his rage at American politicians and members of the medical establishment who allegedly have been too slow in responding to the AIDS crisis. Kramer uses every expletive available – and then some – in these collected speeches and editorials, many published previously in journalistic protest. A large number of these seething diatribes are directed at the American Food and Drug Administration (FDA) for moving too conservatively on new interventions into the HIV-AIDS continuum. Countless times, Kramer compares what 'they' are doing to homosexuals with the Nazi Holocaust. Critically-minded readers will find much to be critical of in Kramer's assertions, but this is protest literature intended to provoke a response rather than scholarly praise.

While there may have been a tardiness in the American political and medical response to AIDS, the fact remains that as of yet this is an epidemic for which medical science offers no cure. It is most interesting to read Kramer's essays as furthering a life-conserving tie between sex and love. Kramer rejects the libertarian image of casual sex unrestrained by the absence of love. He offers a romantic notion of love that provides sex with a necessary and essential context. The stereotype that homosexuals are more promiscuous than heterosexuals is repudiated, although Kramer allows that promiscuity can arise in response to societal scorn.

This is an extremely controversial book, full of rough language and heavy indictments, rooted in the deep pain of the destruction of loved ones.

It provides an understandable jolt, and probably a useful one at that. Yet it is also ideological in the sense that large amounts of empirical fact are ignored, albeit this is part of the genre. It is a book about which reviewers will want to say little, except to recommend it to readers for their own judgment.

Now, AIDS is as much a heterosexual issue as a homosexual one. The activism of Kramer, who is now HIV-positive himself, will probably have saved human lives in the long run. For courage, he is to be commended. The organization he founded, AIDS Coalition to Unleash Power (ACT UP) continues to thrive. This book is a period piece, not a classic, and should be read as a manifesto of AIDS activism in an era when evidence does suggest more attention might have been devoted to this epidemic more quickly.

STEPHEN G POST

Center for Biomedical Ethics,
School of Medicine,
Cerse Western Reserve University,
Cleveland, Ohio 44120, USA

Principles of health care ethics

Edited by Raanan Gillon and Ann Lloyd, Chichester, Wiley, 1994, 1,118 pages, £125.

In the first sentence of the preface Raanan Gillon describes this as an 'enormous book'; it certainly is, with its 1,118 pages including the index and weighing at least 5 lb. Reviewing such a book poses itself an ethical dilemma as it takes approximately 50 hours of steady and careful reading which has to be fitted into six weeks of a busy, professional life! In the case of this book, however, it will certainly be time well spent, whether one attempts to read sections of it in full or merely to focus on one of the multi-faceted chapters, written by over 100 contributors. The book is divided into five parts covering health care ethics from international, multi-cultural and multidisciplinary perspectives. Gillon invites these contributions to reflect and consider a common theme of the four 'prima-facie' principles of health care ethics proposed by Beauchamp and Childress *viz* respect for autonomy, beneficence and non-maleficence, and justice and their scope of application. In Part I, 'Approaches to Applied Health Care Ethics', reviews

from various philosophical and religious perspectives are lucidly and often trenchantly given, encompassing, for example, two Roman Catholic views, one traditional and the other more liberal, through Judaism, Islam, Buddhism and Humanism, as well as reflections from more classical deontological (Furness) and utilitarian (Hare) viewpoints, and other eclectic approaches, namely African, feminist and rights-based and ideals-based perspectives. Many acknowledge the utility of the four-principles-plus-scope approach, deriving this support from these very different cultural and philosophical backgrounds, but, unsurprisingly, not all are supportive of what Nicholson and others refer to disparagingly as the 'Georgetown mantra'. Clouser and Gert refer to the four principles as a 'mere checklist of moral concerns', others to their 'shallow and eclectic' philosophical justification. These various views are admirably discussed in the 'reappraisal' chapter by Gillon, acknowledging the concerns (especially of Clouser, Gert and Botros) that the four principles do not provide a coherent moral theory but contending they make no such claims, merely aiming to be compatible with many, if not most, moral theories and thereby providing a trans-cultural, trans-national, trans-religious and trans-philosophical framework for ethical analysis, which has inherent flexibility and wide applicability.

In Part II, 'Relationships and Health Care ethics', problems between health care workers and their patients are discussed, recognising the core commitment towards benefit of patients while simultaneously respecting their autonomy. Contributions derive from medical and nursing sources and from patients and the issues of paternalism, consent in clinical and research contexts, confidentiality, truth-telling and rights are all covered. Typically, effects of the business culture and market-orientated approaches on the practice of medicine are discussed. Patients' views are lucidly supported by Julia Neuberger, both as 'true' patients and as research subjects and there are chapters both for and against paternalism. Legal aspects of consent issues are lucidly explored, especially in clinical research and randomised control trials. Medical confidentiality is debated in two chapters with contributions on promises, truth-telling and lying and their relationship to the doctor/patient relationship.

The third section covers Moral Problems in Particular Health Care

Contexts from the beginnings of life (abortion, fertility treatment and handicapped neonates), via psychiatry and psychotherapy, health care in the elderly to dementia and dying, including euthanasia. Many contributors provide opposing views, thus Davis requires 'Maximising the life chances of all babies who are not actually irremediably dying' while Harris states: 'There is no justification for thinking of the human zygote, or embryo, or fetus, or neonate as in any way morally equivalent to full human persons'.

In Part IV, 'Health Care Ethics and Society', such contemporary themes as management in health service, allocation of scarce resources, Quality Adjusted Life Years (QALYs) health promotion, public health, epidemiology and occupational health care are covered in detail and even drug addiction, AIDS and research ethics in modern society are debated. An anomalous chapter by sociologists disparaging respect for autonomy ends this section.

The final section on Ethical Problems of Scientific Advance concentrates on genetics (genetic counselling and genetic manipulation), *in vitro* fertilisation and organ transplantation, persistent vegetative state and finally on ethical issues of animal research. Chapters are included on genetic counselling, gene therapy, with clinical and philosophical contributors on brainstem death where, like Gillon in his introduction, most clinicians will find the philosophical arguments against the concept of brainstem death unconvincing. Controversial to the last, the final two chapters respectively support and reject the use of animals in medical research.

This book is encyclopaedic in its approach. The various arguments are, in general, lucid and cogently presented. It is well referenced, up to date and has an excellent index. I suspect it will find its place predominantly as a work of reference but it will amply reward some long dips into various sections and the general quality of the writing is such that when attempting to consult merely one or two chapters the temptation to read on to the end of the section may be overwhelming. I strongly recommend this book, which, I am sure, will become a classic in health care ethics.

PETER BECK

Department of Medicine,
Llandough Hospital NHS Trust,
Cardiff