

dichotomies like natural/unnatural as being 'subjective and vague' (p 110). The style becomes at times somewhat pleonastic, as when respect for 'personality and dignity of emerging life' is demanded in relation to the discussion of artificial insemination, or in the statement that getting an organ transplant means a chance to live but also the necessity of 'keeping one's identity with one's I'.

Illhardt omits certain topics and allows a few factual mistakes to mar the text. Among the neglected topics are health-care policies, medical strikes, sexual problems, confidentiality, whistle-blowing, and medical documentation. Errors include misspelling Patau, confusing P Singer with M G Singer and mislabelling the Austrian writer J Amery as a French philosopher. Wrongful life is misdefined as parents' claim against medical or social institutions. *Ars moriendi*, an unsettling medieval forerunner of macabre themes, is mentioned as consolation literature for the dying. And the London Medical Group is not an ethics commission (p 161), but a study group which happened to be founded in the same year as the first British Research Ethics Committees.

Shortcomings aside, the book is an adequately structured and broadly focused introduction to modern medical ethics. It should prove useful to beginners in the field, provided they are not misled by the author's apparent eclecticism and the somewhat erratic selection of references. Incidentally, for a text that carried the sub-title 'a work book', this paperback seems grossly over-priced.

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A code of Ethics for Social Work – the Second Step

David Watson, editor, London, 180 pages, £5.95, BASW and Routledge and Kegan Paul, 1985.

This thoughtful and thought-provoking book deserves a wide readership because it demonstrates an attempt to redefine and review steps taken by social workers in their search for professional ethics. The nine authors contribute generously from their own experiences and thinking since the *First*

Step was taken ten years ago by the adoption by the British Association of Social Workers (BASW) of a ten-point ethical code. That code is reproduced in this book.

Social work in its various forms must constitute one of the oldest bodies of worthwhile work known to civilised societies but only during the last few years have serious attempts been made to weld social workers into a profession. The ninth contributor, a doctor, draws helpful parallels between medical and social-work practice and I would have welcomed other comparative contributions from members of yet other professions, especially those where it is implicit that the practitioner is an employee and therefore, as the vast majority of social workers are, less than autonomous. Some of the writers have made their contributions clear to readers of any background by giving a few precise examples. Others have not given examples thus at times leaving the non-social-work reader, such as myself, seriously disadvantaged.

In particular I was pleased that several of the contributors had addressed the issue of whose interests social workers should pursue: the client's, or those of the social worker's employing authority. I would have liked to have seen more discussion about the possible confusion between personal values and professional objectives. Members of older professions, such as doctors and lawyers, sometimes do not realise how much their own personal or cultural values may influence how they behave towards their patients or clients. Early in my training as a psychiatrist, before abortion law reform, a senior psychiatrist pointed out to me that by ascertaining the religious persuasion of gynaecological colleagues the psychiatrist engineered whether or not his patient would be likely to be offered a termination of pregnancy!

Some readers may be disappointed that the money ethics behind some social-work decisions are not sufficiently addressed. For instance I found no mention of how it is decided in a social-work department when a child in a problem family will be removed; when work *with* that family is to be switched to work *against* that family; when efforts to rehabilitate a child will be switched to severing that child's connections with his family so that he may be fostered with a view to adoption thereby ending social work intervention in that case.

This is a readable, concise, well-produced paperback, it is indexed and

the bibliography extends over five pages. It should be of value to all professionals who take an interest in the ethics of their own or any other profession, especially those professions that operate within the gap between a perpetually demanding client group and an eagle-eyed management structure. For social workers that management structure changes its top layer, the voted members of the social services committees, every four years.

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A Primer of Medicine

M H Pappworth, London, 378 pages, £19.50, Butterworth, 1984.

Modern medical textbooks are worthy tomes; sombre in style, redolent with science and written, very often, in the passive voice. Dr Pappworth is a highly individualistic practitioner and teacher of medicine, and his textbook comes as a refreshing change. The opinions and experience of the author are unambiguously stated for the student in this the fifth edition of a book first published in 1960.

The first five chapters are of particular interest for readers of this journal, covering the following topics: ethical precepts, learning and teaching clinical medicine, medical vocabulary, the art and science of diagnosis, and history-taking.

In the first chapter he summarises the various ethical codes that have been used in the last few thousand years and proposes a new code of his own with 15 main points, which range from fairly universal principles such as the need to treat patients with sympathy and care regardless of race, colour or religion, to a less common one – that the doctor should 'treat doctors' wives or husbands and their children without any payment in money or kind'. Whether one agrees or disagrees with his principles, it is refreshing to see that the student will be plunged into these issues in the first chapter.

The second chapter attacks such sacred cows as basic science, research, and specialisation and Dr Pappworth argues that these activities and trends have been unduly influential in the last two decades. In his chapter on medical vocabulary he justifiably attacks neologisms, jargon, and abbreviations,