

the patient'. Better that, perhaps, than our new idolatries, of making gods out of slogans.

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## Ethical Issues in Preventive Medicine

S Doxiadis, editor, 108 pages, Dordrecht/Boston/Lancaster, £33.25, Martinus Nijhoff Publishers, 1985

This book is a transcript of 16 working papers (with edited discussions) of an interdisciplinary workshop, sponsored by the NATO Scientific Council, and held in Athens in January 1985. The topics included confidentiality, informed consent, intervention trials, screening, resource allocation, occupational medicine, and the conflict between the individual and the State, between personal freedom and 'the common good'.

As the first book on the ethics of preventive medicine it should be welcome; it is about 30 years overdue. Still, it has all the shortcomings of a fledgling: it stumbles around, struggles with language, asks questions to which there are no answers. Regrettably, the book has no references and no suggestions for further reading.

Preventive medicine is nowhere defined and some issues discussed are scarcely 'medical', for example, crash-helmet and seat-belt legislation. Also it would stretch the term 'medicine' too much if it were to include the problems of 'improving individual behaviour', 'manipulation of behaviour by controlling the contingencies of reinforcement', and the whole gamut of stick-and-carrot methods used by the State to make the people abandon their erring ways.

The language of rights permeates the book. What does 'No one has a right to happiness but rather a right to the pursuit of happiness' mean? Is there a meaningful answer to the question: 'Has the individual the right to take a voluntary health risk'? The interrogator has mastered Newspeak. One participant even advocated the right of a sick fetus not to live (*sic*). Did not Jeremy Bentham once say that to talk about rights is nonsense and to talk about natural rights is nonsense upon stilts?

Many important problems surfaced at the workshop, such as the lack of evidence for the benefit of health

promotion, which is taken for granted; the paradox that preventive measures may lead to an increase in the health budget and to medicalisation of the healthy; and the opportunity cost foregone in cancer screening programmes (£300 million was spent in the UK on cervical smears for a dubious benefit, while the money might have been spent more wisely on something else). Some platitudes got a hearing, too: 'An ounce of prevention is worth a pound of cure'. As H L Mencken observed, a platitude is a statement which a) everyone believes, and which b) is not true. Is not ten pence of prevention a day more expensive than a £10 cure a year?

Other important problems were left out, such as Rose's prevention paradox (how to persuade the population to participate in activities which may be good for society but which offer little benefit to participating individuals – if they were told the truth they would not bother); the metastasising health-promotion industry searching for its *raison d'être*; and the ethics of the criminalisation of addictive behaviour. The two opposing ideologies in preventive medicine, corresponding to the open and closed societies of Popper, were not explicitly spelt out, although they were discernible in the discussions and ultimately this is what the book is about.

The disappointing input of theologians was hinted at by Professor Dunstan (himself a priest and an exception to his own rule): 'Modern Christianity seems to be trying to apply the brakes rather than to offer positive guidance for the future evolution of the use of new knowledge'.

One American speaker accused the British Government of suppressing a commissioned report on alcoholism, which had to be 'smuggled out of the UK and published in Sweden' (?!), presumably because it showed what everyone knew, *viz* 'the government has an interest in the production, distribution and consumption of alcohol'. It did not occur to the speaker that so do the people who elected the government. The same speaker insisted on his right to be protected from the person who smokes. As a matter of symmetry, smokers and drinkers should have the right to be protected from such zealots. Understandably, this issue was not raised at the workshop.

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## The End of Life: Euthanasia and Morality

James Rachels, 204 pages, Oxford, £12.95, paperback £3.95, Oxford University Press, 1986

For two reasons I found this book difficult to review. First, I became personally extremely involved, which reflects, of course, the interest generated by the author's arguments. However, I had to guard against the temptation of offering the readers of this journal my own views on the topic rather than my assessment of Professor Rachels's book.

Secondly, I am not a philosopher and, therefore, recognised my inability to make a scientific appraisal of the author's philosophical arguments. I also lack a thorough knowledge of the great philosophers whose theories are invoked.

It is claimed for the book, that it is 'for anyone who cares about the way we treat other human beings; . . . for anyone who has stopped to consider what we really mean by respect for human life'. Having spent some 40 years in the nursing profession, I feel justified in counting myself as such an 'anyone' and my review is, therefore, based on this, rather than on a philosophical, background.

In order to convey the approach to the topic adopted by the author, it is necessary to list the chapter headings. There are ten chapters, each of which is rich in information and food for deep thought: The Western tradition; The sanctity of life; Death and evil; 'Innocent humans'; Suicide and euthanasia; Debunking irrelevant distinctions; Active and passive euthanasia; Further reflections on killing and letting die; The morality of euthanasia; Legalising euthanasia.

In the first three chapters the author takes us through some of the major tenets of the great philosophers and traditions of thought, both in the Western and the Eastern cultures, showing the striking contrasts between them.

From the 17th century onwards, morality was no longer considered to require a religious foundation and was opened up to a wider debate. Professor Rachels rightly brings the debate into the end of the 20th century using the distinction between 'having a life' and 'merely being alive' as a springboard, a distinction which he illustrates with some telling case studies.