The Journal of the Institute of Medical Ethics

The Journal of Medical Ethics was established in 1975, with a multidisciplinary editorial board, to promote the study of contemporary medico-moral problems. The editorial board has as its aims the encouragement of a high academic standard for this developing subject and the influencing of the quality of both professional and public discussion. The journal is published quarterly and includes papers on all aspects of medical ethics, analyses ethical concepts and theories and features case conferences and comment on clinical practice. It also contains book reviews.

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Submitting manuscripts for publication

Papers submitted for publication should be sent in quadruplicate to: The Editor, Journal of Medical Ethics, 151 Great Portland Street, London W1N 5PB. Rejected manuscripts are not returned unless accompanied by a stamped addressed envelope, or international reply coupon. Papers should be in double-spaced typewriting on one side of the paper only. A total word count is appreciated. On a separate sheet some brief biographical details should be supplied, including the title of the author's present post, degrees and/or professional qualifications, (if any) and any other relevant information.

Four copies of the journal will be sent to authors free of charge after their papers are published. Offprints of individual papers may be bought from Professional and Scientific Publications, Tavistock House East, Tavistock Square, London WC1H 9JR.

In March 1981 the $\mathcal{J}ME$ adopted a simplified 'Vancouver style' for references: details are given in various issues, including December 1986. They are also available from the editorial office. The full text of the 'Vancouver Agreement' was published in the *British Medical Journal* in 1982; volume 284; 1766-70. As the 'Vancouver style' is incompatible with the long established style of references for legal articles, lawyers should use their own standard style, but avoid abbreviations so as to facilitate reference by others. The journal is multidisciplinary and papers should be in clear jargon-free English, accessible to any intelligent reader.

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Thematic review and index

The thematic review of past issues appears in the June issue each year and an index to each volume appears in the December issue.

neonatal units: difficulties which keep them away such as expensive fares, or that inside the hospital there may be no space to sit near their baby. And there are invisible barriers such as their anxiety, or their reluctance to talk to busy staff, besides the many extra difficulties for the staff, of working with distressed parents. All these factors affect the quality and results of discussions shared between parents and staff, and key ethical issues are how the inherent barriers may be overcome and unnecessary barriers discarded. Involving parents may then not only serve their own child, but also other children by changing the character of the neonatal unit and of those working in it. This reverts to the original meaning of the word 'ethics' as having to do with character, before it dwindled down to a concern with morals and manners, until now it seems only to relate to the habit of turning to detached experts to prescribe answers to isolated dilemmas.

Medical ethics can help to illuminate the main considerations of a dilemma and how they are related within the work of the neonatal unit and the life of the patient and family. Ethics can be a valuable aid if it does not confuse issues with esoteric argument or summarise complexities with false simplicity, if it helps the staff and parents to see each other's view more clearly, and if it is informed by an understanding of attachment thinking as well as detached reasoning. Acknowledging the emotional contours during discussion can serve the further purpose of bringing those concerned together towards an agreement. It can help to reconcile them to the final decision and its consequences and can often help them to change during this time. One effect is to alter practice in neonatal units in order to promote harmonious family relationships which are beneficial whether the baby lives or dies.

Acknowledgement

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Priscilla Alderson is a postgraduate research student at the Sociology Department, Goldsmith's College, London University. She is funded by the Economic and Social Research Council.

References

- (1) Kant I. Groundwork of the metaphysic of morals. In: Paton H J. The moral law. London: Hutchinson, 1948: 84.
- (2) See reference (1): 68.
- (3) See reference (1): 89.
- (4) See reference (1): 96.
- (5) See reference (1): 95.
- (6) Blum L A. Friendship, altruism and morality. London: Routledge and Kegan Paul, 1980: 57.
- (7) Gilligan C. In a different voice. Cambridge, Massachusetts: Harvard University Press, 1982: 25-63.
- (8) Kennedy I. Commentary 4. Journal of medical ethics 1984; 10: 206.
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News and notes

Philosophical Ethics in Reproductive Medicine

An international conference on Philosophical Ethics in Reproductive Medicine will be held at the University of Leeds from 18-22 April, 1988.

Guest speakers include Professor G R Dunstan, Professor of Theology, University of Exeter, Professor C Grobstein, Department of Biological Science and Public Policy, University of California, USA, Dr R Gillon, Editor, Journal of Medical Ethics, Mr R Snowden, Director of the Institute of Population Studies, University of Exeter, Mr S Lee, Lecturer in Law, King's College, London, Dr

Ann Fagot-Largeault, Department of Philosophy, University of Paris.

Topics will include: Moral position/status of embryo; randomised trials; withholding neonatal care; resource allocation; termination on grounds of preferred sex, and sterilisation of the mentally retarded.

For further information please contact: Director of Continuing Education, Department of Adult and Continuing Education, The University, Leeds LS2 9JT, UK.

irrational and as important as our respect for the dead and our horror of cannibalism.

Once a human being no longer participates in the world of persons it would seem that his legal interests are as void as his intentional and ethical engagement and that his affairs should be settled in the prescribed wavs.

I would therefore stick by my contention that a human organism that has been irrevocably stripped of personal being is no longer 'in any ethically interesting sense, alive'. The former person's body is however alive and has a definite but distinct ethical status.

Grant Gillett is a Fellow of the Royal Australasian College of Surgeons (Neurosurgery), a Research Associate of the Ian Ramsey Centre, St Cross College, Oxford and Fellow in Philosophy, Magdalen College, Oxford.

References

- (1) On this point see my Reasoning about persons. In: Peacocke A R, Gillett G R, eds. Persons and personality. Oxford: Blackwell, 1987.
- (2) Wittgenstein L. In: Anscombe GEM, Von Wright GH, eds. Zettel 221. Oxford: Blackwell, 1967.
- (3) For the relation between content and consciousness see my paper, The generality constraint and conscious thought. Analysis 1987; 46: 20-24.

News and notes

Second International Congress on Ethics in Medicine

The Second International Congress on Ethics in Medicine will be held from June 9-12, 1987 in New York. The congress is sponsored by Beth Israel Medical Center, New York City, Ben-Gurion University of the Negev, Beersheva, Israel and the Karolinska Institute, Stockholm, Sweden.

There will be sessions on The boundaries of life; Political and social pressures and the doctor-patient relationship - physician responsibility to whom?; Genetic manipulation; Ethics in research; Making a profit from illness, and Allocation of health resources and delivery of health care.

Fees are \$350.00 per person (scientific sessions functions) and social and \$100.00 accompanying person (social functions only).

For further information contact: Beth Israel Medical Center, Public Affairs Dept, First Avenue at 16th Street, New York, New York 10003, USA.

Michael E Daly MA MDiv is currently Visiting Assistant Professor at The Robert O Anderson Schools of Management at The University of New Mexico, where he teaches courses in Social Issues and Values. Prior to his current position, he worked in a variety of consultant roles, ranging from American Native reservation agencies to executive career counselling to programmes in milieu therapy and community education. His original professional experience was as a Roman Catholic priest and University Chaplain.

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- (1) Adler M. The time of our lives, the ethics of common sense. New York: Holt, Rinehart, Winston, 1970: 34-36.
- (2) Thomas L. Late night thoughts on listening to Mahler's Ninth Symphony. New York: Viking Press, 1983.
- (3) May R. The discovery of being, writings in existential psychology. New York: W W Norton and Co, 1983: 10.
- (4) Maguire D. The moral choice. Garden City: Doubleday and Co, 1978: 39.
- (5) Menninger K. Whatever became of sin? New York: Hawthorn Books, Bantam ed. 1984: 267.

News and notes

Second Annual World Congress of Law and Medicine

The Second Annual World Congress of Law and Medicine is to take place at the QE II Centre, London during the week beginning July 18, 1988. The two journals, the American Journal of Law and Medicine and Law, Medicine and Health Care will be

running concurrent activities at the congress. At present a European Planning Committee is being gathered. Further details will be published in the journal as they become available.

Medical groups

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Medical groups associated with the Institute of Medical Ethics have been established in British university teaching hospitals. Each academic year they arrange programmes of lectures and symposia on issues raised by the practice of medicine which concern other disciplines. Although these programmes are addressed primarily to medical, nursing and other hospital students they are open to all members of the medical, nursing and allied professions. There is no fee for attendance. Lecture lists are available by direct application to the appropriate co-ordinating secretary named above. A stamped addressed A4 envelope would be appreciated.

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