

## Ethical Dimensions of Geriatric Care

Edited by S F Spicker, S R Ingman and I R Lawson, 298 pages, Dordrecht, £37.00, hbk, Reidel Publishing Co, 1987

Make new friends but don't forget the old – new are silver, old are gold. This is the key message of this ethical book. Its contributors represent the disciplines of geriatric medicine, psychiatry, public health, nursing, medical sociology, political science, health law, journalism, and moral philosophy. The book is developed from a symposium entitled *Geriatrics: Ethical and Economic Conflicts for the 21st Century*, which was held at the University of Connecticut Health Centre in Farmington, on 20-22 September 1984. The authors do not claim that this volume encompasses all the relevant or central issues at stake.

The four sections of this book deal with: understanding the biology and epidemiology of aging; philosophical reflections on medical care provision for the aged; self-determination in late-life dependency, and justice in the provision of medical care for the aged. The epilogue is devoted to the prosthetic era of human life – the last scene of all. The text is readable, supported by figures and references, and deals with the population of the United States. Americans of 65 plus, who accounted for only four per cent of the population in 1900, represented more than 11 per cent of the US population by 1980 and this trend of aging is expected to continue well into the 21st century. This multi-author book explores: the value conflicts likely to surround the continued aging of the US population; the health and social status of the elderly in the future; the potential of the elderly for self-determination in later life, and the health requirements with regards to limited (or unlimited) national resources. It is a serious book but makes good armchair reading.

In their contributions Molly Gavin, Gayle Kataja, Nancy Dubler, and Margaret Battin explore health care decision-making with four critical questions in mind: how should such decisions be made? Who should make such decisions? What range of options should be available? And when (and on what basis) should these decisions be subject to third-party control or review? They consider how the elderly,

especially the dependent elderly, fare in our society. They plead for balance and fairness in caring for the elderly. A desirable public policy, in their opinion, must include three key elements: firstly, a realistic understanding of aging and of the perspective of the elderly person; secondly, a candid assessment of the criteria and procedures for societal intervention in the lives of the dependent elderly, and thirdly, an honest acknowledgement of our ability and willingness to provide resources for the care of the elderly.

One chapter is devoted to revival, resuscitation and resurrection – the right of passage – and it examines whether resuscitation should be carried out automatically whenever death threatens or whether, in certain situations, the obligation to resuscitate is suspended. It questions whether the patient's or the family's wishes or beliefs enable or compel the modification of this obligation in any way, and whether there is a distinct obligation to respect, elicit, or even to make advance directives such as a living will. There are no simple answers. While biological age may predispose to illness and disease, chronological age can predispose to well-intentioned medical neglect. Restricting the resuscitation of the elderly is neither an isolated nor a simple decision and it should be considered objectively in detail.

I recommend this book to all decision-makers including health professionals and health service planners who have responsibility for the care of the elderly. I need hardly remind readers that maybe growing old is a question of mind over matter – if you don't mind, it doesn't matter – and it should be remembered that everybody is in a queue to grow old one day. Care of the elderly should concern everyone.

BASHIR QURESHI, FRCPG  
GP in Hounslow, London  
and author of  
*Transcultural Medicine*

## Ethics and Psychiatry: toward Professional Definition

Allen R Dyer, 176 pages, Washington, USA, £35, American Psychiatric Press Inc, 1988.

Dr Dyer asserts that medical practice has largely become divorced from its ethical traditions so that it is now possible to view medicine as technology and physicians as merely technicians. This development has led to an uncoupling of ethics and expertise, thought from action, such that much discussion of issues in medical ethics fails to take sufficient account of the ongoing relationship between doctor and patient. This is particularly relevant in psychiatry. The author explores this view in a series of essays considering the Hippocratic tradition, ethical theories, confidentiality, informed consent and the place of virtue and character in ethics. Dr Dyer observes that debates in medical ethics often take the Cartesian epistemological outlook for granted and in relation to this he includes a critique of Szasz's approach to mental illness.

The quality of the various essays is somewhat uneven and the extent of coverage of certain topics appears unbalanced. British readers will find the extensive discussion on the ethics of professional advertising of limited relevance. While the goal of idealism and the place of virtue and character in professional ethics occupy complete chapters the chapter on confidentiality could usefully have been expanded and the discussion of ethical aspects of involuntary admission to hospital is extremely brief. There is a helpful outline of various theories of ethics although more practical examples would enhance the reader's grasp of the methods in relation to psychiatry. Dr Dyer emphasises that in his view, the concept of the person should be central to discussions of treatment rather than ethics debated in a manner detached from the person. Informed consent, autonomy and paternalism are explored in more detail. Dr Dyer laments the fact that whereas paternalism might once have been seen as a manifestation of the physician's responsibility it is now largely seen as a measure of the profession's control over patients. He makes a case for the principles of autonomy and paternalism not being mutually exclusive attitudes in the setting of an appropriate doctor-patient relationship. Another useful point made in this chapter concerns the recognition of the dimension of time in the decision-making process. Informed consent in psychiatry is often an ongoing process and there is a certain artificiality in considering it at one particular moment in a legalistic framework.

The book is well presented although

the use of American trade names for drugs means that one example outlined is not understandable to a wider readership. Those with some knowledge of the field will find some points of interest in Dr Dyer's exploration of the underlying theme. It is not a suitable book on its own as an introduction to ethics for trainee psychiatrists.

The book is published only in hardback at £35 and is worthwhile for a library purchase.

J M PARROTT

*Consultant Forensic Psychiatrist,  
Bexley Hospital*

## Biomedicine Examined

Edited by Margaret Lock and Deborah Gordon, 558 pages, Dordrecht, £56.00, hbk, Kluwer Academic Publishers, 1988

In the last decade biomedicine has attracted a good deal of critical attention, not least because of its cost implications. Commentators have become reluctant to accept on trust claims made in its name. This is partly a function of the growing realisation that biomedical knowledge and practices are social accomplishments, rather than 'natural' or 'given' phenomena, and as such open to analysis and critique. As one of the editors of *Biomedicine Examined*, Deborah Gordon, puts it: 'We may increasingly speak of a social scientific/historic gaze turned on medicine, describing hidden cultural scaffolding and social processes that shape practice and knowledge' (page 20).

In this volume the editors have put together a collection of papers from anthropologists, sociologists and physicians on the interdependence of biomedicine, society and culture. More specifically, the emphasis is on a largely ethnographic approach to 'the meanings and values implicit in biomedical knowledge and practice'. Margaret Lock and Deborah Gordon have done their job admirably, and the eighteen varied and challenging papers assembled will constitute a rich resource for health academics and practitioners.

The papers cover aspects of the reproduction of medical knowledge, changes and recent extensions in the jurisdiction of physicians, the 'routinisation' of medical technology,

the relevance of social and cultural context to biomedical practice, and modes of legitimisation of biomedicine. They are of a uniformly high standard and there should be something in this volume for everyone with a critical interest in issues of health and health care. Perhaps one theme, which recurs in a number of papers, will be of particular interest to readers of this journal. This is the notion that the consolidation of biomedicine in Western health care has led to a situation in which its practitioners, claiming expertise through science, have come to proffer scientific solutions to problems which are essentially moral or political, and hence the province of us all.

It would be invidious to pick out papers for special mention here for two reasons: first, the overall quality of this 'large' and heterogeneous collection is high; and second, what individual readers find useful and helpful will be contingent on their own theoretical and practical interests. I have no hesitation, however, in recommending this impressive text to all those with a genuine concern for the future of 'healing'.

GRAHAM SCAMBLER,

*Senior Lecturer in Sociology  
Academic Department of Psychiatry  
University College  
and Middlesex School of Medicine,  
London.*

## The Genetics of Mental Retardation

Edited by E K Hicks and J M Berg, 207 pages, Dordrecht, \$69.00, hbk, Kluwer Academic Publishers, 1988

This book comprises the papers and brief discussion summaries of an international workshop which convened in 1986. The title is somewhat misleading. The book is divided into three sections: Prenatal Diagnosis, Postnatal diagnosis and Genetic counselling. Each section is a combination of purely scientific or medical accounts, such as the chromosomal findings in first trimester chorionic villus biopsy, and the use of the computer in the diagnosis of dysmorphic syndromes, and papers on moral and psychosocial aspects: for example, ethical questions in the prenatal chromosomal diagnosis of mental retardation and psychosocial developments in the field of genetic

counselling. Each paper is of high quality, as would be expected from the distinguished body of contributors. There are particular gems from R W Smithells, reflecting sensitively on the management of both child and parents when handicap is diagnosed immediately after birth, and from G R Dunstan on ethical issues in the field of choice in treating the severely handicapped newborn child, drawing out that the final arbiter in management is the physician as the 'authorised moral agent'. J C Fletcher explores how ethical issues evolve in different societies in the practice of prenatal diagnosis, using data derived from his multi-nation, multi-culture survey of medical geneticists.

Prenatal diagnosis and genetic counselling have long been topics of ethical discussion, and much has been written on the subject. This was why it was a disappointment in a way to open a book entitled *The Genetics of Mental Retardation* and find it was, in fact, this well-worked field. Further, Genetics is a rapidly advancing subject, and today *in vitro* fertilisation and genetic manipulation of embryos have superseded, although not eliminated, prenatal diagnosis and genetic counselling as prime areas of moral concern at the beginning of life, while still leading to discussions on the sanctity and quality of life. Yet they are scarcely mentioned. Nevertheless, this is a useful and authoritative collection of papers which are a pleasure to read.

MARY J SELLER

*Reader in Developmental Genetics  
Division of Medical and  
Molecular Genetics  
Guy's Hospital*

## Manuale di Bioetica (2nd Edition)

Elio Sgreccia, 542 pages, Milan, L 44,000, Vita e Pensiero, 1988 (Published in Italian)

Bioethics as a discipline has become more and more topical and interesting in the last few years, because of new problems, and today it is at a significant turning point. It has now passed from the universities to political and parliamentary sessions, although actually this is more a return to the political environment. We know, in fact, that bioethics was born partly as a result of the Nuremberg trial, which brought to light the terrible crimes of