

(4) Lewis P A, Charny M. Which of two individuals do you treat when only their ages are different and you can’t treat both? *Journal of medical ethics* 1989; 15: 28–32.


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DR LEONIE V KATEKAR MBBS, BSc(Med),
a Concerned Provider,
a Concerned Decider,
1a Cumberland Avenue,
Chilwell,
Nottingham NG9 4DH

Unprincipled QALYs: a response to Harris

SIR

I should like to reply briefly to Professor Harris’s response to my article on QALY maximisation (1,2).

Harris writes that it is an article of faith among QALY advocates that resources are scarce. That is the wrong way of putting it: the scarcity of resources is an inescapable part of the human condition. Consequently in any distribution of health services, there will be winners and losers; and if the distribution is rational, it will normally be possible to identify, at least by a description, those whose needs will not be completely met.

The word ‘Utilitarianism’ does not appear once in Harris’s response. Yet my article was a fairly straightforward application of a mainstream version of that ethical standpoint (plus a few factual assumptions) to the problems of health care resource allocation. Arguably Utilitarianism is a product of the Industrial Revolution; but Utilitarian arguments are as old as Plato’s *Republic* (3). Therefore I cannot believe that the essence of the approach for which I was arguing can be satisfactorily attacked with ephemeral slogans such as ‘ageism’, ‘sexism’ and ‘Thatcherism’.

References


JOHN CUBBON
135a Ashley Gardens
Thirleby Road
Victoria
London SW1P 1HN

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