

## Book reviews

### Ethical practice in clinical medicine

William J Ellos, 190 pages, London/New York, 1990, Routledge, £35.00 hb, £8.99 pb

This is a book which sets out to bring together, on the one hand, a number of the key philosophical/ethical theories which have shaped western moral thinking, and on the other, a selection of case studies with which to ground the theories. It is not entirely clear why the attempt is less than satisfactory for the reader, given the undoubted strengths of the book but this reviewer was left with a sense of frustration at what might have been achieved in this book, and was not.

William Ellos notes that 'Too many massive texts in medical ethics remain unread and unused'. In dealing with the contributions of Platonic and Aristotelian thought, tracing through the role of Thomism and the Scots and American moral philosophers, and touching on contemporary developments, he has linked each of these areas with illustrative case studies, ranging in their points of focus from the communication of potentially devastating prognoses to the decisions involved in responding to a 'living will'. The concise discussions of the various theoretical approaches to ethical thought are clear, and the case studies are apposite. To have both within one book promises very well.

But the move from theory to case-study is not always smooth, and gives the impression on occasion of a text on theory into which case-studies have been inserted. Given that the book is directed at 'the busy health practitioner', this impression is likely to overshadow the real advantages of bringing together in this way accounts of the theoretical basis of much medical-ethical decision-making and 'samples'

of such decision-making in practice.

This is a book which demands of its readers a considerable level of attention – but which repays careful study. It could form the basis for a course or seminar in health-care ethics, in which context its oddly intrusive switches into question-setting and discussion-starting mode would be more at home than when read by an individual.

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### Child abuse

Christina Lyon and Peter de Cruz, 207 pages, Bristol, 1990, Jordans and Sons Ltd, £14.95 pb

Child abuse – sexual or non-sexual – is one of the most unpleasant features of our society. For some, child sexual abuse is so unpleasant as to be almost inconceivable. That adults can systematically and over a considerable period sexually exploit children, sometimes as young as three (occasionally even younger), defies the imagination. And yet it is not uncommon, as evidenced by the daily stream of cases which come to the attention of social workers or the courts, or which are reported anonymously by children to the telephone lines which are dedicated to the receipt of such complaints.

How we should respond to the problem is a matter of some difficulty. Excessive zeal on the part of social workers and doctors may be seen as unduly interventionist (as happened in Cleveland); inadequate attention to the problem may bring accusations of neglect of duty (as in the case of the seven-year-old Maria Colwill, killed by her violent stepfather in 1973). Somewhere in between these two

extremes lies a mean response which demonstrates real and effective concern for the protection of those at risk while at the same time not allowing an intrusive State to trample over parental rights. After all, many of the concerns which have been voiced at the various public inquiries into individual cases of alleged abuse have their origin in a parental sense of outrage over what may be seen as high-handed and unjustified intrusions into the family – intrusions based on flimsy and disputed medical evidence and the unsubstantiated allegations of young children.

*Child Abuse* by Lyon and de Cruz is a wideranging and quite detailed survey of the legal response to the issue. It is unfortunate that the authors wrote their book at a time of significant change in the law in England and Wales, but this was perhaps unavoidable. The legislative timetable of the Children Act of 1989 took many by surprise and the legal changes it embodied are being implemented slowly. The authors have taken account of this in their survey of the new law, but inevitably the reader will have to proceed with caution and check up that what he or she reads has not been overtaken by the implementation of provisions in the recent legislation. This does not detract unduly, however, from the very real value of the book, which contains a great deal of legal material which survives the changes. Indeed, there is nothing else which matches this book for its collection of all the law relating to the various forms of abuse and neglect to which children may be subjected by adults.

For those with an interest in medical ethics, *Child Abuse* may seem somewhat technical, but is still worth consulting for the light which it sheds on procedures regarding child welfare. For example, there is discussion of the medical examination and treatment of children who have been removed from parents suspected of abusing them, and

there is a useful account of the various inquiries into the case of individual abused children whose cases ended on a tragic note. Moreover, this book prompts both legal and non-legal readers to focus on one of the major questions in the whole debate: to what extent can we control this particularly repulsive evil within our society? At the end of the day one suspects that re-designing of legal responses is not much more than a palliative measure, important, of course, but unlikely to reduce the incidence of abuse. No matter how much we may whip ourselves up into a moral panic over particular allegations (such as those discussed in the Orkney inquiry) or over child abuse as a whole, this does not resolve the basic contradiction: we have created a legal ethic directed towards the protection of children at precisely the same juncture in our social evolution that we have allowed the wholesale destruction of the fragile concept of protected childhood. In the same breath as we say that children are increasingly autonomous young adults and should be allowed to behave as such and be treated (and commercially exploited) as such, we protest at the harm which is done to children. The law's role in resolving this issue is marginal; the roots of the problem go too deep.

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## Drawing the line: life, death and ethical choices in an American hospital

Samuel Gorovitz, 195 pages, New York, 1991, Oxford University Press, £15.00

This is a book rich in pickings for both the medic and the ethicist, but it provides no easy solutions. It is none the poorer for this, however, and remains highly readable to the end. Gorovitz's observations and experiences over seven weeks in Boston's Beth Israel hospital, where he was referred to as 'the ethics guy', unfold in a series of self-contained chapters. These address a fairly standard range of ethical issues, from abortion and fetal research to those at the other end of life, including DNR orders and living wills, and the

quality of care of the very old. Ethical problems arising from economic constraints are considered in the various contexts, rather than taken as a separate issue. Two additional chapters on marketing health care and medical education are particularly pertinent to the American context, but may well be those from which the UK reader has the most to learn.

Gorovitz has used the case study approach, made tolerable by the snappy and often humorous descriptions being interspersed with facts, medical explanation, historical note, political and legal comment, and ethical analysis.

It is this last to which I turn with some disappointment, made greater by the high standard set on other fronts – readability, quality of factual information, and the portrayal of very human characters. Readers who are seeking direction and perspective on how the ethical questions raised should best be approached will find themselves guided surely and soundly in a liberal direction, and one embedded unquestioningly in the legal and political *status quo* in the US (with, however, notable exceptions when the author tends to disagree). On the subject of fetal research Gorovitz asks: 'Can there be any respectable argument against the further medical use of fetal tissue?'. Opponents are characterised as 'driven by a naive passion for simplicity' or those 'whose capacity to reason shuts down when they hear the word "fetus"'. His own position seems grounded in the (highly contestable) statement: 'To prevent the doing of good is as wrong as to do harm; indeed it is to do a kind of harm'.

Nevertheless, the book's approach enables the practical difficulties and constraints on these ethical issues to be considered in a manner which may be precluded by a more theoretical analysis. The question of why fundamental ethical tensions arise and are not resolvable in any straightforward way is explained. 'Ethical' decisions may, in fact, have a large political component and where to draw the line is not always clear; indeed, the line to which the title refers is not confined to the moral domain. Gorovitz's ethical choices are set in the US context of political life, laws, funding, the threat of government intervention in monitoring hospital practices, and particular patient care decisions.

It is as well to remember that more philosophically satisfying analyses do not provide better – if any – answers

than emerge from Gorovitz's approach. If the ethical analysis is taken as his personal (but informed) comment on his experiences at Beth Israel hospital, they stand above the criticisms made, but remain relative to the US health care system. This need not make them less useful to the person seeking a more rigorous approach, as the discussions (especially on abortion, fetal research, organ transplantation and care of the very old) make some worthwhile contributions to the debates.

This book contains a wealth of information for all interested in health care ethics and is not patronising to the medically trained. The approach is clear and understandable without relying on philosophical explanations of moral theories (there is merely a passing reference to Kant and utilitarianism, and Rawls is described as 'rough going all the way'). It is ordinary morality at work here, with a preference for common-sense examples coupled with analogies; yet there is much to occupy the serious ethicist, even if this results in some criticism. Books which speak to, and more importantly can be heard by, a wide audience including lay persons, medical personnel, administrators and ethicists, must be taken seriously, as the solutions to the ethical choices in hospitals on both sides of the Atlantic do not rest with any one group alone. As Gorovitz says: 'If you are dying, remember that your doctor needs all the help you can provide'.

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## Human dignity and animal well-being

Mats G Hansson, 210 pages, Uppsala, 1991, Almqvist and Wiksell International, SEK 150 (£14)

Dr Hansson correctly observes that recent work in biomedical ethics has been dominated by various forms of utilitarian calculation. Nurses, doctors, hospital managers and government ministers are all encouraged to believe, as a matter of course, that that act is *right* that does the most *good*. The good such acts do, of course, cannot be determined even in part by whether the chosen act was rightly, justly, faithfully or decently performed. To do right must simply be to increase pleasure and decrease pain, or to satisfy as many