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 naïve 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 these 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