

British Postgraduate Medical Federation  
(University of London)

## **RANDOMISED CONTROLLED TRIALS: ETHICAL AND LEGAL ISSUES**

3rd and 4th November 1993

A two-day course for doctors, nurses and members of Research Ethics Committees to consider the ethical and legal implications of undertaking randomised controlled trials.

Sessions will cover the rationale and needs for controlled trials, how they impinge on the doctor/patient relationship, and the ethical and legal considerations which result.

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## **Research Assistant— Ethics of Biotechnology**

The Commission of the European Community has an advisory group of six international experts which meets four times a year in Brussels to identify and define ethical questions raised by biotechnology. It evaluates ethical aspects of EC activities in this field and studies their potential impact on society and individuals. It advises the Commission on its jurisdiction over ethical aspects of biotechnology.

The Group needs an assistant with a legal/scientific background to research into matters under study, to help compile technical reports, to liaise with the Commission and to provide general assistance.

The working language is English, but French is also required. Fees (to include all expenses) will be 1800 ECU per month, with an initial contract for 12 months. The work can be undertaken anywhere in the EC, but the researcher must be willing to travel at least once a month to Brussels.

If you are interested in this post, please send a C.V. with two references before the end of September to the Director, European Human Rights Foundation, 13 rue Van Campenhout, 1040 Brussels: Tel: 02/734 9424 Fax: 02/734 6831.

## **FRAUD AND MISCONDUCT IN MEDICAL RESEARCH**

*Edited by Stephen Lock and Frank Wells*

Fraud exists, both in academic medical research and in drug trials in general practice. This book sets out the evidence, reviewing events since 1975 when the first notorious case of fraud became public knowledge. The problem is viewed from many perspectives, with contributions from a general practitioner, head of an academic unit, contract research company director, statistician, editor and lawyer. Together, their information provides a compelling account of the extent to which fraud and misconduct have been and continue to be practised in medicine. *Fraud and Misconduct in Medical Research* is a valuable practical text for all researchers – and ultimately anyone who practises medicine.

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# 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 ever-developing subject and the enhancement of professional and public discussion. The journal is published quarterly and includes papers on all aspects of health care ethics, analyses ethical concepts and theories and features case conferences and comment on clinical practice. Intermittent series focus on the **Teaching of medical ethics**; on the medico-moral problems directly experienced by health care workers (**At the coalface**); on the pursuit of arguments prompted by papers in the journal (**Debate**); on medical ethics in literature (**Medical ethics and literature**); and on briefly argued often unorthodox opinions related to medical ethics (**Point of view**). The journal also contains book reviews and letters.

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## Submitting manuscripts for publication

Papers submitted for publication should be sent **in quadruplicate** to: The Editor, *Journal of Medical Ethics*, c/o Imperial College of Science, Technology and Medicine, 14 Prince's Gardens, London SW7 1NA. Rejected manuscripts are not returned. Papers should be in double-spaced typewriting on one side of the paper only. **The preferred maximum length of papers is 3,500 words – absolute maximum 5,500** (including references). A total word count (including references) is requested. 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.

**Two** 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 *Journal of Medical Ethics*, BMA House, Tavistock Square, London WC1H 9JR.

In March 1981 the *JME* adopted a simplified 'Vancouver style' for references: details are given in various issues, including December 1990. They are also available from the editorial office. The full text of the 'Vancouver Agreement' was published in the *British Medical Journal* in 1988; volume 296; 401–405. As the 'Vancouver style' is incompatible with the long established style of references for legal articles, lawyers should use their own standard style, but try to facilitate reference by others. The journal is multidisciplinary and **papers should be in clear jargon-free English, accessible to any intelligent reader.**

## Notice to subscribers

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- (4) Hare R M. Could Kant have been a utilitarian? *Utilitas* 1993; 5: 1–16.
- (5) Hare R M. *Freedom and reason*. Oxford: Oxford University Press, 1963.
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## News and notes

### Call for papers

The third annual meeting of the Association for Practical and Professional Ethics will be held 24–26 February, 1994, in Cleveland, Ohio. The hosts for the meeting will be Case Western Reserve University's Center for Biomedical Ethics and Center for Professional Ethics.

If you wish to submit a paper write to the Association for Practical and Professional Ethics, 410 North Park Avenue, Bloomington, IN 47405; or write via e-mail to APPE@INDIANA.BITNET or APPE@INDIANA.EDU (Internet); or call (812) 855-0261.

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*Dr Jonathan Rosalki BSc, MB BS, is a Senior House Officer and Medical Audit Trainee at Southend General Hospital. He was a final-year medical student at the Royal Free Hospital School of Medicine at the time this essay was written. Correspondence should be sent to 78, Loudoun Road, London NW8 0NA.*

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**News and notes**

**Ethical Review of Clinical Research**

A conference entitled Ethical Review of Clinical Research will be held at Lancaster University from 15–17 September 1993. The conference is the latest in a series run over several years for members of NHS and private research ethics committees, and for others involved in clinical research.

Topics will include: The process of ethical review in the UK; Legal aspects of ethical review; Informed consent and the rights of research subjects, and Future directions of ethical review.

For further information please phone: 0443 690977, ext 242 or fax: 0443 692494.

New York: Basic Books, 1986, in particular, but also on Elias Canetti, *Crowds and power*, New York: Viking, 1962. When I first decided that an antidote to the Great Argument was long overdue, I thought that the decisive step would be to point out the existence of subtle, modest, detailed and cautious analyses of the aetiology of genocide and to *contrast* these with the sloppy and unscholarly fear-mongering of those who rely on the Great Argument. Dream on. The quote

from Reichel and Dyck with which we began actually contains a footnote to Lifton. The point stressed by Lifton that even after one has made a detailed study of the Nazi period, there is something about social groups and the darker side of the human psyche which makes that period, and other such episodes, *deeply mysterious* – perhaps ultimately inexplicable – seems completely to have passed those authors by.

(9) See reference (8): 46.

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## News and notes

### Quality '93: Raising Quality in the NHS: What Progress?

Quality '93, to be held on 11 November at The Brewery, London EC1, follows the success of Raising Quality in the NHS in March 1992.

Quality '93 is being organised by the BMA, the BMJ, the Kings Fund, the College of Health and *Quality in Health Care*. The meeting will review progress with raising quality in the NHS and also look at what's new in raising quality. A

particular focus will be on involving patients in raising quality.

The meeting is open to doctors, nurses, all health professionals, managers, politicians, researchers, policy makers and members of the public.

For further details contact: Pru Walters, BMA House, Tavistock Square, London WC1H 9JP, Telephone: 071 383 6518.

not very reflective) outbursts about 'the whole disease-ridden edifice of capitalism' (page 137), which totally ignore the even greater prevalence of poor health in the non-capitalist world. The argument that there is great inequality in health, and that much of this flows from unequal access to material resources, and unequal exposure to health hazards of one kind or another, does not require such intemperate polemics. What it requires is a careful analysis of conflicting interests, within individuals as well as between individuals, and a consequent focus on how such conflicts should be adjudicated and the resulting priorities translated into action. Private profit-seeking activity is certainly one of the mechanisms which can be demonstrated to have had (and still to be having) adverse effects upon people's health (for example the production and distribution of cigarettes), but it is misleading to portray this activity as if it were the root of all evil, and to imply that if it were swept away

all would be well. Conflicts of interest between individuals, each seeking to meet their own varying needs in their own varying ways, would remain.

If we are to engage in 'conscious planning' to find an efficient and equitable resolution of these conflicting interests, we cannot proceed from the assertion that everyone's needs are equally strong. I think it is this step in her argument which blinds the author to the fundamental problem, which is that of priority-setting. The market solves that problem one way. Like the author, I would like to see it solved a different way, especially with respect to health and health care. What she offers is the suggestion (page 207) that we 'develop a theoretical model of democratically centralised and collective planning where conscious resource allocation renders the satisfaction of fundamental needs for all without imposition.' That could take quite a while, and may even require the end of scarcity. The principles on which we are to base priority-setting

in the health field in the meantime are not clear. It is a disappointing book.

ALAN WILLIAMS,  
*Centre for Health Economics,  
University of York.*

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**Books: information and orders**

If you wish to order or require further information regarding the titles reviewed here, please write to or telephone the BMJ Bookshop, PO Box 295, London WC1H 9JR. Tel: 071 383 6244. Fax: 071 383 6662. Books are supplied post free in the UK and for BFPO addresses. Overseas customers should add 15 per cent for postage and packing. Payment can be made by cheque in sterling drawn on a UK bank or by credit card (Mastercard, Visa, or American Express), stating card number, expiry date, and full name. (The price and availability are occasionally subject to revision by the publishers).

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# The Institute of Medical Ethics: working parties and medical groups

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## Working parties

The institute currently has two working parties, one on the ethics of prolonging life and assisting death and the other on the ethical implications of AIDS. The working party on the ethics of prolonging life and assisting death has produced two discussion papers: Assisted death, *Lancet* 1990; 336: 610-613; and Withdrawal of life support from patients in a persistent vegetative state, *Lancet* 1991; 337: 96-98.

The working party on the ethical implications of AIDS has produced four discussion papers: HIV infection: the ethics of anonymised testing and testing pregnant women, *Journal of medical ethics* 1990; 16: 173-178; AIDS and the ethics of clinical care and treatment, *Quarterly journal of medicine* 1992; 302: 419-426; AIDS, ethics and clinical trials, *British medical journal* 1992; 305: 699-701, and

AIDS and the ethics of medical confidentiality, *Journal of medical ethics* 1992; 18: 173-179.

Each discussion paper was written on behalf of the relevant working party by the institute's Research Director, Kenneth Boyd.

## Medical groups

### ABERDEEN MEDICAL GROUP

Dr M D McArthur, Department of Medicine for the Elderly, Wood End Hospital, Aberdeen AB9 2YS

### BIRMINGHAM MEDICAL GROUP

Mr R Sawers, Birmingham Maternity Hospital, Queen Elizabeth Medical Centre, Edgbaston, Birmingham B15 2TG

### BRISTOL MEDICAL GROUP

Dr Oliver Russell, Reader in Mental Health, Bristol University, Department of Mental Health, 41 St Michael's Hill, Bristol BS2 8DZ

### DUNDEE MEDICAL GROUP

Dr David B Walsh, Consultant in Biochemical Medicine, Ninewells Hospital, Dundee DD1 9SY

### EDINBURGH MEDICAL GROUP

Dr Brian Chapman, Royal Infirmary of Edinburgh, Lauviston Place, Edinburgh EH3 9YW

### GLASGOW MEDICAL GROUP

Dr E Hillan, Department of Nursing Studies, Glasgow University, Glasgow G12 8QQ

### LEEDS MEDICAL GROUP

Mr Brian Bentley, Principal of the School of Radiography, General Infirmary, Belmont Grove, Leeds LS2 9NS

### LEICESTER MEDICAL GROUP

Dr R K McKinley, Department of General Practice, University of Leicester, Leicester General Hospital, Gwendolen Road, Leicester LE5 4PW

### LIVERPOOL MEDICAL GROUP

Dr Heather Draper, Lecturer in Health Promotion, Department of General Practice, Liverpool University, PO Box 147, Liverpool L69 3BX

### LONDON

#### THE UNITED MEDICAL ETHICS GROUP (GUY'S AND ST THOMAS'S HOSPITALS)

Dr Graham Clayden, Reader in Paediatrics, St Thomas's Hospital, Lambeth Palace Road, London SE1 7EH

#### THE ROYAL FREE ETHICS GROUPS

Dr Margaret Lloyd, Department of Public Health and Primary Care, The Royal Free Hospital School of Medicine, Pond Street, London NW3 2PF

#### ST GEORGE'S MEDICAL GROUP

Dr N Eastman, St George's Hospital Medical School, London SW17 0RE

#### ST MARY'S HOSPITAL ETHICS FORUM

Jane Tessier-Denham, St Mary's Hospital Ethics Forum, St Mary's Hospital Medical School, Praed Street, London W2

### MANCHESTER MEDICAL GROUP

Dr Geoffrey Jessup, 27 Oakwood Lane, Bowden, Altrincham, Cheshire WA14 3DL

### NEWCASTLE MEDICAL GROUP

The Revd Bryan Vernon, Anglican Chaplain, Newcastle University, Department of Primary Health Care, School of Health Care Sciences, The Medical School, Framlington Place, Newcastle upon Tyne NE2 4HH

### NOTTINGHAM MEDICAL ETHICS GROUP

Dr T C O'Dowd, Department of General Practice, University Hospital and Medical School, Clifton Boulevard, Nottingham NG7 2UH

### SOUTHAMPTON MEDICAL GROUP

The Revd T Pinner, 8 Bassett Close, Southampton SO2 3FP

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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The Institute of Medical Ethics is an organisation for research, education and information in the broad area of health care ethics. It is financed by grants from charitable bodies, government sources and members' subscriptions.

It was established as the Society for the Study of Medical Ethics, and is an independent, non-partisan organisation for the dispassionate multidisciplinary study of medico-moral issues raised by the practice of medicine.

The institute aims to help improve the quality of both professional and public discussion of medico-moral questions; to promote the study of medical ethics; to promote high academic standards for this ever developing subject; to encourage a multidisciplinary approach to discussion of the consequences of clinical practice; to stimulate research into specific problems, and to remain non-partisan and independent of all interest groups and lobbies.

Institute reports include: *The Ethics of Resource Allocation in Health Care* by Kenneth Boyd, on ethical issues arising from scarcity of health care resources; *Dilemmas of Dying* by Ian Thompson, on ethical issues arising in the care of the dying, both published by the Edinburgh University Press; *Medical Research with Children: Ethics, Law and Practice* by Richard Nicholson, an analysis of the ethics of clinical research investigations on children, published by the Oxford University Press; *Life Before Birth* by Kenneth Boyd, Brendan Callaghan and Edward Shotter, published by SPCK; *Lives in the Balance: the Ethics of Using Animals in Biomedical Research*, edited by Jane Smith and Kenneth Boyd, published by Oxford University Press; *Teaching and Learning Nursing Ethics*, edited by Ursula Gallagher and Kenneth Boyd, published by Scutari, and *The Pond Report on the Teaching of Medical Ethics*, which was published directly for the institute.

Among shorter recent institute reports are: Assisted Death, *Lancet*, 1990; HIV infection: the ethics of anonymised testing and of testing pregnant women, *Journal of Medical Ethics*, 1990; and HIV infection and AIDS: the ethics of medical confidentiality, *Journal of Medical Ethics*, 1992, each written by the institute's Research Director, Kenneth Boyd, on behalf of institute working parties.

The institute derives from the London Medical Group, a student group for the study of ethical issues raised by the practice of medicine which, beginning in 1963, arranged a comprehensive programme of lectures and symposia on such issues. Similar groups associated with the institute are now established in university teaching hospitals at Aberdeen, Birmingham, Bristol, Cambridge, Dundee, Edinburgh, Glasgow, Leeds, Leicester, Liverpool, London, Manchester, Newcastle and Southampton.

**Professor Richard West**  
General Secretary, IME  
Medical Postgraduate Department  
University of Bristol  
Canyng Hall  
Whiteladies Road, Bristol BS8 2PR

**Dr Kenneth Boyd**  
Director of Research and  
Scottish Director, IME  
Department of Medicine  
Royal Infirmary of Edinburgh  
Lauriston Place, Edinburgh EH3 9YW

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