

and luck in the undetermined willing of the good will. Dickenson herself claims that a modified Nagelian Kantianism is the best approach to issues of moral luck in a chapter in which she finds problems of moral luck in consequentialism, whether it is based on actual or probable consequences.

A chapter is devoted to each of four practical issues.

The political questions discussed are those of secrecy and nuclear deterrence, and Dickenson argues against both. The first medical ethical issue covered is that of the allocation of scarce health care resources. Here Dickenson suggests that a lottery is required in allocation, except where the autonomy of nurses prevents their time being treated in the same way as other resources or where dependants are involved. Dickenson rejects the 'fair-innings' principle on the ground that there is no non-arbitrary view on what counts as a fair innings. A revamped argument from fairness, however, which centred purely on the relative lengths of life of candidates for treatment would not be vulnerable to this objection.

The second medical question discussed is that of informed consent. Here Dickenson runs the plausible line that a non-negligent doctor cannot be held responsible for a treatment's turning out badly if she had obtained informed consent from the patient beforehand.

A short review such as this cannot do justice to the richness and complexity of Dickenson's arguments. These issues – both theoretical and practical – are difficult, and she has perforce written a difficult book which will demand some knowledge of the literature in its readers.

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Doctors, patients and the law

Edited by Clare Dyer, Oxford,
Blackwell Scientific Publications,
1992, 216 pages, £15.99

The last ten years have seen significant development in the burgeoning field of medical law. Such growth has been unrestrained by the traditional boundary of medical malpractice and has extended into laws regulating such

activities as human fertility and patient access to records. This book is a timely summary of some of the more important issues arising in medical law.

Ms Dyer has assembled an impressive array of experts to contribute to *Doctors, Patients and the Law*. The book itself commemorates the centenary of the Medical Protection Society. The authors manage to outline the relevant issues in a way which is not only scholarly and lucid, but also interesting.

In the first chapter, Michael Jones examines the field of medical negligence and establishes the pattern for the rest of the book by using case law to focus on problems which may arise in everyday medical practice. Chapter two (written by Robert Lee) examines the areas of confidentiality and patient access to medical records. Chapters three and four examine consent to treatment by a capable patient (written by Ian Kennedy) and an incapable patient (written by Larry Gostin). In chapter five Sheila McClean examines the area of reproductive technology and includes in the discussion an interesting section on the effect that the various pieces of legislation have on maternal and fetal rights. Alexander McCall Smith tackles the difficult area of euthanasia in chapter six and J K Mason examines the law relating to organ transplants in chapter seven. Chapter eight (by Ian Dodds-Smith) examines rules regulating clinical research. Chapter nine (by Michael Spencer) looks at product liability. The last two chapters focus on the accountability of doctors (Roy Palmer) and employment rights (Brian Raymond).

The book is not simply a dry account of what the law is. The authors are quick to point out problems with existing law and to suggest new solutions. The book is remarkably up to date and references abound. It is a first-class source book.

The work has a couple of minor deficiencies. On occasion there are contradictions in the work (compare the differing definitions of competency offered on pages 58 and 76). The chapter on accountability and discipline, while being a good summary of the issues, suffers from a lack of footnotes referring to sections of the relevant acts. Finally, I believe the book would have benefited from an introductory chapter which explained in broad terms the contents and principal arguments of the authors. It would have been interesting to see a chapter on the NHS reforms and their

effect on the delivery of medical practice (though, admittedly, some of these issues are explored tangentially in other chapters). Similarly, a chapter on legal responses to the AIDS problem might have been interesting.

Overall, this book provides a fertile source of information on the myriad legal regulations affecting medical practice.

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Ethics in nursing - third edition

Martin Benjamin and Joy Curtis,
New York, Oxford University Press,
1992, 248 pages, £15.00 pb

This volume is a valuable further addition to the health care ethics literature. Were it not for the American setting and language it would be possible to recommend it wholeheartedly. As it stands, if readers are equipped with a willingness to exercise some mental agility in recognising the many parallels within their own country then they will be richly rewarded with some treasures in vivid case-studies and careful analysis.

The first two chapters introduce the reader to ethical analysis and ethical frameworks. These are both lucid and accessible. The impression is of a well-grounded text for the novice and a useful though not wholly predictable review for the more experienced. Subsequent chapters centre upon ethical issues between nurses and clients, nurse-physician relationships and dilemmas among nurses. In these the reader's imagination is captured with thoughtfully selected scenarios which are then subjected to rigorous analysis. The familiar issues of confidentiality, deception, autonomy and respect for persons are given due weight. This interpersonal focus is replaced in the final two chapters by a concern with broader questions of firstly institutional and public policy and secondly macroallocation of health care resources and justice. This last chapter constitutes the main new material for this third edition and considerably strengthens the volume by immersing the discussion of health care ethics in collective concerns which are assuming ever greater urgency in the latter part of the twentieth century.

Primarily directed to a nursing audience, the book has much to offer any reader with an interest in health care ethics. A brief imaginative step will enable the reader to recognise the commonalities between nurse-client ethical concerns and those of any health care worker. Similarly the discussion of the context of ethical issues between nurses and physicians would prove a useful resource for both parties. The position of 'whistle-blowers' and the background to the Oregon proposal regarding a rationing system for health care are of pertinence to many health care systems today. Whilst of general utility the book does not ignore the unique constellation of factors affecting nurses and the ethical dilemmas this may pose, nor does it fail to recognise, for example, nurses' care-work. These and other special concerns of nursing are seriously addressed.

It was somewhat disappointing to see that although broader non-individual ethical concerns were addressed at the end of the book in examining policy and resource issues, the thorny issues raised by health promotion or the new public health movement received only a cursory mention. Only one scenario explicitly addresses health promotion and the readers are invited to analyse this for themselves. Given the international concern with health promotion and the emergence of the new public health movement, together with the fervour with which many health professionals are encouraged to participate, this treatment can only be described as wanting. The focus of health promotion and public health on the population as a whole, and the concern with probable outcomes make the area difficult to assess morally and worthy of far greater attention.

Though erudite, the book is also practical. Thus the reader is directed to a rich seam of further reading. In the body of the text, for example, practical responses to the scope of individual responsibility in situations of ethical uncertainty are to 'examine the most alterable possibilities first'. At times the American terminology is an advance, thus 'parentalism' is used in place of paternalism with its advantage of sexual neutrality.

The authors see a principal aim of their book as being to enable nurses to contribute more effectively to a wide-ranging debate about contemporary ethical issues. In large part they have

achieved their goal admirably whilst at the same time providing a potential resource for others with an interest in the field. One remaining confusion is what exactly is it to 'hang out shingles' (page 96)?

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The politics of psychiatry in revolutionary Cuba

Charle Brown and Armando M Lago, New Brunswick, USA, Transaction Publishers, 1991, 217 pages, \$16.20 sc or \$27.95 hc

This short book is an impressively detailed account of the use of psychiatry in Cuba as a means of political repression.

Published by Freedom House, an independent human rights organisation, it draws on a wide range of sources, including Amnesty International, to document the Castro regime's use of electro-shock, psychotropic drugs, isolation and physical beatings, against those it regards as dissidents.

The historical and political background to these practices are described in an introductory section; there is a useful appendix of relevant reports, articles and documents, and an introduction by the leading Soviet dissident, Vladimir Bukovsky. But the real heart of the book is a series of case-reports. These are presented in a direct, clinical style which contrasts sharply with the atrocities they describe. The cases speak for themselves...

Ariel Hidalgo Cuillen, History Professor: '... I had to stand - not only because of the lack of space, but also because the floor ... was covered with excrement, saliva, sperm, etc.'

Orestes Martinez Hayden, Medical Student: '... forced to accept a rubber bit in (his) mouth and held down on a wet floor covered with urine, vomit and excrement ... electrical current applied until (he) went into convulsions...'

Jose Martinez Hayden, Truck Driver: '... placed in a water tank and given electric shock...'

Juan Penate Fernandez, Historian: '... forced to watch three times per week while the orderly, Heriberto Moderos, gave electric-shocks to political dissidents strapped on a wet floor'...

As Bukovsky comments, this is not the political abuse of psychiatry as it was practised in the Soviet Union. There is little attempt to justify torture, to redefine it as treatment. 'Diagnoses' are sometimes indicated but they are largely redundant. It is enough that the accused is 'dangerous', a diagnostic concept under the control of State Security.

The outrages described in this book may seem remote from psychiatric practice in the western democracies. The problems are also closer to home, however. This is evident in the occasional *cause célèbre* which makes the headlines. But it is also apparent in the experiences of individual patients (poignantly described in *The Catch of Hands* (1), for example), and, more generally, in the inadequacies of community care provisions which abandon patients to the streets. It is thus not by contrast but by identification that this book comes as a timely reminder of the vulnerability of psychiatry to abuse.

Reference

Lee, B. *The catch of hands*. London: Virago, 1992.

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