

Book reviews

Life and Morality: Contemporary Moral Issues

David Smith, Dublin, Gill and Macmillan, 1996, xii+301 pages, £12.99 hb.

The literature of medical ethics is now formidable. There is first that describing practice and the science supporting it – a study necessary to serious moral analysis. Contentious issues about practice, whether these be ideological, ecclesiastical, or religious; tend to be sensationalised in the media and polarised into slogans – “pro life” or “pro choice”, “quality of life” or “sanctity of life”, “patient autonomy” or “medical paternalism”, and so on. Issues are thus simplified, and so distorted. Then comes philosophical speculation, in which the goal of moral reasoning, which is the right ordering of *techné*, the art of practice, is often lost in semantic exercise. Pity then the teacher preparing a sixth form for A-level modules in bioethics or an undergraduate class for a paper in an *a la carte* degree: what reading can be prescribed which is neither labyrinthine, strident nor bland?

Dr Smith, as Head of the Department of Moral Theology and Canon Law at the Milltown Institute, Dublin, must have felt this need; his book seems designed to meet it. It addresses four controversial topics: abortion; medical assistance in fertility; the new genetics; and death, managed, accelerated or delayed. Each section is organised to a common pattern. The practice is described, with the indications advanced for it and objections levelled against it. Formal pronouncements of the main Christian Churches are cited, sometimes clarified and expounded: chiefly the Roman Catholic, Anglican, Church of Scotland and Methodist with, sometimes, the Baptist Union

and the British or World Council of Churches. Last, and most valuable, come the reflections of theologians and philosophers in these traditions, sometimes at reasoned variance with official statements. The writing is, in the reviewer's judgment, invariably balanced, just and fair. The book is written to facilitate moral decision, not to dictate it – itself the function of moral theology at a time of weakening religious authority in most places outside the Islamic world.

Sound learning can deliver from obsession. We are not the first generation to have to make up our minds about pregnancy and miscarriage. It is salutary to go back with Dr Smith to a working moral tradition already old when it came into the Hebrew Old Testament, and flexible enough to respond to a new speculative embryology when that Scripture was translated into the Greek of the Alexandrian Septuagint in the third century BC. The Greek reformulation of the law of Exodus 21: 22-3 graded the protection due to the human embryo *pari passu* with its morphological development; and from its acceptance in the Hellenised matrix of Western civilisation, that principle has moulded the moral, philosophical and legal traditions of the West down to this day. The Human Fertilisation and Embryology Act of 1990 embodies its latest adaptation to established embryology. Absolute protection from the moment of conception was not an established demand of the papacy until the late nineteenth century. The authorities, including recent Vatican pronouncements, are well treated here in adequate summary, and are subjected to theological scrutiny.

It should be recalled, however, that, the language of our moral discourse having been formulated in the Latin tongue, “innocent” does not mean “morally blameless” when applied to the life of the unborn, or, for that matter, to the combatant disabled or disarmed in war. It means not *nocens*, not

harmful, not threatening harm. The fetus, in this sense, is not always innocent. An informed moral theology enables the proper exercise of a pastoral casuistry; and, in the range of opinions cited, Roman Catholic and Reformed theologians are not always far apart.

The clinical narration of treatments for infertility range from early and simple IVF down to recent developments in gamete manipulation and the problematic use of oocytes and ovarian tissue taken from cadavers or aborted fetuses. The experimental culture of spermatids from infertile men would now be added. Somatic and germ line gene therapies are considered in the chapter on fertility, rather than in the chapter on genetics, because they involve experiment with pre-embryonic cells, and such research calls for a consideration of the moral status of the human embryo. Recent work is drawn upon, including that of N M Ford on the distinction between genetic and ontological identity in the pre-embryonic process, and the related moral choices are displayed. Paul Ramsey, the Protestant theologian deeply respected in the 1970s for his firm grounding of medical ethics in a sound covenant theology, was as absolute as the present-day Vatican in rejecting all embryo manipulation. But Ramsey wrote before early cellular indeterminacy was scientifically established and philosophically recognised; the papacy knows about it, but allows it no place in its dogmatic assertion. Other Churches vary in their acceptance. Since this book was written the Church of Scotland has published a new deliverance, in May 1996, which will call for a little revision in the next edition.

In the section on genetics and morality the empirical description follows closely the Nuffield Council on Bioethics Report on *Genetic Screening* (1993) and the copious literature on the Human Genome Project. On

sensitive issues, such as medical discretion to disclose a familial genetic pattern when secrecy might entail grave harm to another person, the author is balanced but conservative. Some theological comment here is at its best in the book. (Joseph Fletcher is polarised with Paul Ramsey, it must be supposed, because Ramsey blew Fletcher's situation ethics out of the water. Now we can recall thankfully a large-hearted man who excited a generation, without taking his short cuts into seductive blind alleys – and let him pass).

The chapter on euthanasia, though organised on the same pattern as the others, calls for the most careful critical scrutiny. It ranges over the clinical diagnoses of different ways and stages of dying and death, from coma to brain stem death and the persistent vegetative state. Clinical diagnoses are properly descriptive, according to objective criteria. Moral and philosophical evaluation, as of "personhood", pertains to the duties and permissions attending the condition described; it has no place in the description itself. It is a little surprising, therefore, to find that the authority referenced for brain stem death is the writing of a neurologist and a philosopher – both eminent – rather than the published reports of the Conference of the Royal Medical Colleges and their Faculties, the body which has now reported also on the diagnosis of the persistent vegetative state.

The treatment of euthanasia is comprehensive and fair. One may wonder about the "long history" claimed for it: the classical allusions cited may refer more to suicide than to medically-induced death as we now discuss it. Events outstrip description. The position in the USA can now be updated from Trudo Lemmens, and in the Netherlands from Stef Gevers, in *The British Medical Bulletin*, 52.2, 1996. Advance directives are, in the UK, less helpful to those who want their doctors to kill them than is sometimes imagined: patients may validly exercise in writing only those powers which they have when face to face, namely to refuse unwanted treatment; they cannot bind a doctor to any procedure, particularly if that would conflict with good practice, conscience or the law. And euthanasia, in the UK, still stands without the law.

Here, then, is the material through which, in each subject, readers must think their way. It is a very satisfying book. The only grumble is against a new generation of publishers' editors

ideologically estranged from the facility of the common gender in the English language: to couple a plural pronoun with a singular subject (for example, "someone . . . themselves") is to compound unclarity with ugliness. Books worthy of the overseas market, as this one is, should carry authentic English with them.

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A Decent Proposal: Ethical Review of Clinical Research

Donald Evans and Martyn Evans,
Chichester, John Wiley and Sons,
1996, 210 pages, £24.95.

This volume would be a useful addition to the library of anyone interested in how ethical standards of health care research on people are maintained in the United Kingdom. It is particularly relevant to members of research ethics committees, whose task it is to review all research projects which are to use people as the subjects of their research.

The book begins with a discussion of the utilitarian tradition in the United Kingdom. In the context of research on humans, utilitarianism (to put it simplistically) justifies the action on the grounds that more people will benefit in the future than will be harmed for their sakes. The tradition is strong in this country; this has to be balanced by the careful protection of the research subject who may him/herself be willing to be used as a means to someone else's ends. Research ethics committees are supposed to help create this balance.

It is very important that members of research ethics committees understand why research is designed as it is designed: only if one is armed with such understanding can one go on to assess the ethical merits of any research project. The chapter on research design and method gives an excellent explanation of this. The authors go on to discuss the vexed question of the differences between innovative treatment and research.

Next up for discussion is the balance that has to be achieved between risks and benefits. There is consideration of minimal risk and the difficulties and

subjective interpretations of the concept. The authors explain the ethical requirement for minimising risk: not only do they explain it, they offer practical suggestions as to how to achieve it.

There is an excellent discussion of consent, which correctly identifies the shortfalls in the notion of respect for autonomy. Any research ethics committee member reading this should understand why his or her role is not just a matter of ensuring that consent procedures are correctly followed. Not only can one never be quite sure of the success of the venture of informing a research subject and allowing a voluntary decision to be made, it remains true that there are some things which it is simply not right to ask people to do in the name of research. There is a thorough discussion of the role of proxy and a wonderful quotation to precede it: "To you, Baldrick, the Renaissance was just something that happened to other people, wasn't it?" (*Blackadder*) The whole book, I should say, is peppered with delightful quotations which are both funny and relevant. I made the reading of it a great delight and was a useful reminder of the need for a sense of humour: too often people whose role is to ask other people to behave better are sadly lacking in this faculty.

Chapters seven and following look at the research ethics committee themselves. The tension between the need to remain in touch with the needs and sensibilities of the ordinary people who tend to end up as research subjects, and the need to be properly informed and educated about the research ethics committees is recognised. The key requirements for good ethical review practice are identified and explained as independence, comprehensiveness and thoroughness. The authors look at the need for providing resources and training to help research ethics committees maintain their own standards of practice.

There is practical advice on what an application form should look like: this is the form that the researcher seeking ethical approval has to complete and submit to the committee. The case for standardisation of application forms across the country is made. A chapter is then devoted to legal issues, including the question of whether members of research ethics committees are ever likely to have to defend their decisions in court.

The next two chapters consider the issue of multi-location research. The authors distinguish between reviewing