technique has become clinical practice, ethical discussions belatedly com-

mence and that is too late. This is what happened in Sweden when prenatal
diagnosis was introduced.

The author concludes by saying that “it must be considered to be a
main core of the work-ethics of any scientific or technological specialty
that specialists have a strong responsi-
bility to lay ground for, initiate and
participate in such discussions”.

My conclusion is that the author has written an important work which
describes and analyses the implicit moral values of medical specialists in
Sweden during the introduction of prenatal diagnosis. I believe his find-
ings can be generalised to other coun-
tries and that they show the importance of discussing ethical issues
at an early stage in the introduction of a new technique or technology.

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Christian Virtues in
Medical Practice

Edmund D Pellegrino and David C
Thomasina, Washington DC,
Georgetown University Press, 1996,
164+xii pages, £21.75, $27.95.

The authors say of this book that it
“attempts to define the Christian virtues of faith, hope and charity and to
show how they modify the practice of medicine and the healing profes-
sions and the ethical principles of benevo-

lence, autonomy and justice”. These,

together with non-maleficence (which
the authors regard as too minimal to
warrant consideration) have been much
discussed in recent years in medical
ethics, notably in what has become a standard book, Principles of
Bioethics by Beauchamp and Childress.

The authors of Christian Virtues in
Medical Practice are two American
Roman Catholics: Pellegrino is a well-
known medical specialist and ethicist,
and Thomasina a philosopher with
clinical interests. This is the latest of a
series of collaborations by them. They
say that medical ethics has expanded
more rapidly in the last 20 years than in
the whole of the previous 2,500 years,
and also that the golden age of specific
medicine has just begun.

In this dynamic situation the prac-
tice of medicine is carried on in the
“West” in plural societies, hence the
effort to arrive at some agreed basic
principles. The authors are con-
vinced that the many Christians
involved in the practice of medicine
must be engaged in serious ethical
discussion with those of other faiths
and philosophies engaged in medical
practice. They must show courtesy
and respect for them; dogmatism and
proselytising with respect to col-
leagues or patients must be ruled out,
for it does not respect them as per-
sons. At the same time the preoccus-
pation of the authors is with what
Christianity can contribute to ethical
issues in medical practice. What can
it add to the natural virtues of benev-
oleence, autonomy and justice and the
concomitant truth-telling, promise-
keeping and confidentiality which follow from them? How can faith,
hope and charity inform the ethical
discernment of Christians? The rela-
tion is bound to be subtle. However,
charity can rule out things which are
not subtle; rudeness, inaccountabil-
ity, abruptness, refusal to treat for
economic reasons, discrimination
because of social class or ethnicity,
medical practice regarded as a busi-

ness, or as an exercise in entrepre-
neurship, applied biology, politics, or
social convenience. These and other
radical remarks would appear to call
into question much public policy in
the USA (and, of course, the UK),
but the authors do not directly address
these, confining their few remarks to
Christian hospitals.

In the middle chapters of the book
they write cogently on the greater
depth which the three theological
virtues of faith, hope and charity add
to the natural virtues of benevolence,
autonomy and justice. They make
full allowance for the fact that these
virtues can be expressed by non-
believers and that believers by no
means always embody them, whilst
maintaining their radicality and their
call to a perfection which cannot be
fully achieved but which nevertheless
challenges and inspires. The book is
not for the most part concerned with
the substance of ethical decisions,
but with the manner of arriving at
them. The aim of the moral life is
indeed to make the right decisions,
but also to be a person of discern-
ment and right motivation, for moral
judgment is an art. This book is
certainly concerned with the latter,
with an ethic of virtue, with a
Christian moral philosophy looking
back in particular to St Augustine
and St Thomas Aquinas. An ethic of
virtue can never be neglected, and
there has been considerable recent
discussion of it both in moral philo-
sophy and moral theology; and the
latter must not ignore the former, as
this book recognises. However, its
discussion of moral philosophy will
be too condensed for those unfamil-

iar with it. The basis of the book is
the Christian understanding of the
dignity of the person, of which the
writings of Pope John Paul II are sur-
prisingly taken as the key example,
rather than some notable twentieth-
century personilist philosophers and
theologians.

This brings me to a weakness in the
book. It accepts without discussion
the teaching of the Roman Catholic
magisterium. It is one thing to accept
it, but another not to deal with criti-
cisms made of it by other Christians
and by many Roman Catholic moral
theologians. The encyclical Veritatis
Splendor (1993) is taken for granted.
An absolute position is assumed on
abortion, euthanasia and several other
issues regarded as intrinsically evil
acts, a conception which itself requires examination. No notice is
taken of the position of Christians
who would be grateful for large parts
of the book but who disagree with
these absolute positions. Is it not
unwise to assume that once the magis-
terium has spoken critical moral
reason is suspended? Reception by the
faithful must in the long run be deci-
sive with respect to the teaching of the
church, as the example of Humanae
Vitae on contraception has shown.

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The Moral Maze of
Practice: a Stimulus
for Reflection and
Discussion

N Kohner, London, King’s Fund

This concise, affordable text, accu-
rately reflects its title. Amongst its
intended readership of health care
professionals it will be of immense
value to clinically based nurses,