

duty of professionals to treat their patients, clients, and customers with reasonable skill and prudence.

In conclusion, if on the basis of its merits, one is inclined to endorse a “wrongful life” compensation action initiated by a handicapped newborn against a negligent genetic counsellor, one need not be deterred by such speculative and highly irrelevant “slippery slope” apprehensions.

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## References

- 1 For an expanded version of this essay see: Shapira A. The human right not to be born impaired: issues of logic, value and policy. In: Immenga U *et al*, eds. *Festschrift fur Ernst-Joachim Mestmacker*. Baden-Baden, Germany: Nomos, 1996: 293; and Shapira A. “Wrongful life” lawsuits for faulty genetic counselling: the impaired newborn as plaintiff. *Tel Aviv University Studies in Law* 1997;13:97-114.
- 2 CA 518, 540/82, Zeitzoff v Katz, [1986] 40(2) PD 85 (Supreme Court of Israel).
- 3 For a discussion supporting the view that the fundamental problems in dealing with the “wrongful life” concept relate to the physician’s alleged duty to the fetus and the notion of life as a harm, see Botkin JR. The legal concept of wrongful life. *Journal of the American Medical Association* 1988;259:1541.
- 4 For a position favouring parental responsibility to avoid a “wrongful life”, see Steinbock B, McClamrock R. When is birth unfair to the child? *Hastings Center Report* 1994;24:15. For a skeptical view as to parental obligations in this regard, see Dworkin RB. The new genetics. In: Childress JF *et al*, eds. *Bio law (resource manual)* 1986;1:89, 100-1.

### Correction

*Bioethics of the refusal of blood by Jehovah’s Witnesses: part 1. Should bioethical deliberation consider dissidents’ views?* There was a mistake in this paper by Dr Osamu Muramoto, which was published in the August issue of the journal. Dr Muramoto has written to the journal apologising for his mistake and asking that an erratum note be published.

The sentence containing the mistake was published thus: The governing body teaches that the “prohibited” blood components are “major”, whereas acceptable components are “minor” or “small fractions”, stating that the major components are limited to only those that pass through the placental barrier during pregnancy, and that on this basis a JW may accept them in good conscience.

It should have read (changed word in **bold**): The governing body teaches that the “prohibited” blood components are “major”, whereas acceptable components are “minor” or “small fractions”, stating that the **minor** components are limited to only those that pass through the placental barrier during pregnancy, and that on this basis a JW may accept them in good conscience.