

References

- 1 Hope T. Ethics and law for medical students: the core curriculum [editorial]. *Journal of Medical Ethics* 1998;**24**:147-8.
- 2 Gillon R. Clinical ethics committees—pros and cons [editorial]. *Journal of Medical Ethics* 1997;**23**:203-4.
- 3 Consensus statement by teachers of medical ethics and law in UK medical schools. Teaching medical ethics and law within medical education: a model for the UK core curriculum. *Journal of Medical Ethics* 1998;**24**:188-92.

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Guest editorial: Imperialism, research ethics and global health

SIR

I found the above editorial in your August issue¹ very interesting. Comparing the ethical implications of global research from the perspective of the “Western” researchers is a topic of personal interest. In attempting to gain a perspective of the “Western” influences on ethics in general I found the following:

Table Using MEDLINE for the search and articles published since 1966

	Keyword “Ethics”	Keyword “Truth”
Total number of articles	50 868	3467
Articles in English	40 895 (80.4%)	2831 (81.7%)
Non-English articles	9973 (19.6%)	636 (18.3%)

Not only are Western values the most frequently applied, but as the literature grows the reinforcement of these values continues. Is this another example of ethical imperialism? Are those interested in the cultural variations in ethical values reading about them as referenced to Western standards, in journals refereed by those schooled in Western ethics?

Reference

- 1 Benatar SR. Imperialism, research ethics and global health. *Journal of Medical Ethics* 1998;**24**:221-2.

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Medical research needs lay involvement

SIR

In his editorial on why medical research needs lay involvement,¹ Tony Hope cites only publications written in professional, mostly medical journals. For many years now, some patient-consumer groups have been pressing researchers and research funders to allow them to contribute to the research process. Not citing patient-consumer groups’ publications represses their views and underplays the extent to which lay people are ready to be involved in the research process. Dr Hope also mentions the NHS standing advisory committee on consumer involvement is seeking “constructive” ways in which lay people can be involved. There is no shortage of issues that patient-consumer groups would like to see better researched, nor of lay people who would be delighted to sit on research committees.

Reference

- 1 Hope T. Medical research needs lay involvement. *Journal of Medical Ethics* 1998;**24**:291-2.

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