BOOK REVIEW

Methods in Medical Ethics


The editors of this book set out to provide an overview of the various disciplines and methods of inquiry that contribute to medical ethics. The question “what is medical ethics?” is an important and topical one, especially in countries such as the UK where medical ethics has become established as a subject of academic inquiry relatively recently compared to the United States. Sugarman and Sulmasy argue that medical ethics is a single field of inquiry which is shared by several disciplines, each of which brings its own disciplinary methods to the subject of the normative aspects of health care. The first chapter is used to explain this definition of medical ethics and to consider the interplay between normative and descriptive (or empirical) ethical inquiry, the need for both forms of inquiry to enhance ethical reflection, and thus the need for multidisciplinary and interdisciplinary contributions to the field of medical ethics.

The second, and largest part of the book, is entitled Methods. It was therefore disconcerting to glance through chapter headings such as Philosophy, Religion and Theology, and History. Using the editors’ own definitions from chapter one these would seem to be disciplines and not methods. Other chapters in this section do, however, appear to relate specifically to methods—for example, those entitled Qualitative Methods, Quantitative Surveys, and Experimental Methods. There are other inconsistencies in this section, for instance casuistry is cited as a method of philosophical medical ethics in the chapter on philosophy, but it is also given a chapter to itself, implying that it is a separate discipline (sandwiched between legal methods and history). Similarly, ethnography is mentioned as one of the methods of qualitative research in the chapter dealing with these methods, and is also the subject of a separate chapter. Much more attention is given to specific methods of empirical research than methods of normative research, but the perspectives of the disciplines using the empirical methods (anthropology, sociology, medicine, nursing etc) are not explored in the same way as the perspectives of other disciplines such as philosophy, theology, history, and law.

Despite the confusion, and slight irritation caused by the presentation of section two, the individual chapters are all interesting and illuminating discourses on different approaches to medical ethics. As a clinician and empirical researcher I welcomed the clear descriptions of both qualitative and quantitative research methods, in particular the emphasis placed on identifying the appropriate method for the research question. But all chapters contributed to my knowledge of, and stimulated my interest in, the field of medical ethics. From a non US perspective, the chapter on legal methods is the least helpful, as it concentrated specifically on the US legal system.

The third section provides two examples of areas of ethical inquiry that have benefited from a multidisciplinary approach: physician assisted suicide and euthanasia, and genetic diagnosis. These examples help to clarify the editors’ arguments for such an approach to this field and include examples of specific research studies to illustrate their points. The final chapter provides a helpful aid to critical analysis of different types of research in ethics. Here the editors again cause some confusion by introducing a new classification of humanities research and descriptive research.

This book is a useful overview of the multidisciplinary nature of medical ethics and a helpful introduction to some of the various disciplines and methods that contribute to it. The reader may be frustrated by the inconsistencies of definitions of methods and disciplines, and some empirical researchers would not be happy with the implication that the terms empirical research and descriptive research are synonymous. It provides a significant contribution, however, to discussion of the nature and purpose of medical ethics research.

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