

medicine to a compassionate regard and respect for the 'whole-person' and his relationship to God. The reader delves into these papers to find convincing compelling evidence and argument to lay before his unconvinced colleagues who, though dedicated to high standard traditional professional care yet claim no allegiance to Christ; colleagues who regard 'holism' as none of their concern or so 'unscientific' and without foundation or proof as to be unworthy of further attention.

In this respect the book disappoints. It will encourage those who share the editors' concept of health and wholeness, and their views of doctors as God's agents in reconciliation rather than removers of disease. I feel it may not convince sceptics nor answer the doubters in spite of the transparent sincerity and faith of its authors.

Like so many collectives of papers it suffers from repetition and imbalance of contents. Expectedly good as it is, Balfour Mount's contribution on 'Terminal care' contains a disproportionate amount of therapeutic and pharmacological material in a book otherwise devoted to ethical and philosophical detail. He does, however, demonstrate that good terminal care must always be holistic and, as many are coming to appreciate, the hospice movement is an unavoidable challenge to the medical profession at all times to look beyond its record of achievement to the deepest needs of every patient, whatever his affliction or prognosis.

This is a book likely to be of interest to many doctors, health educators and ethicists, and to all who strive to define 'health' as a relationship with God.

DEREK DOYLE
St Columba's Hospice
Edinburgh

Ethics in Human Experimentation

Medical Research Council of Canada.
Report No 6 (1978) Ottawa, KLA
OW9 6app, \$2.00 (Canada) and \$2.40
(elsewhere).

This report is impressively concise,

clear and well written. It is also refreshingly free from traditional dogmas, presenting (as well as arguing for) a clearly reasoned case at almost every point. What is more, there is a courageous willingness to grasp some well known nettles, or honestly to admit defeat before them. Nettles grasped include the fact that man is and must be a necessary research subject, that scientific value must be a part of ethical discussion, that 'invasive' techniques may invade mind as well as body, and that the categories of 'therapeutic' and 'non-therapeutic' research are dangerously ambiguous. Honest defeat comes with research upon children, but even there the group seem too modest, for they reached impressive agreement over a large part of the field, and lucidly expounded the rest. There are also sensitive discussions about the anticipation of risk, and of risk subgroups. There is a lot of really useful advice about ethics committee procedures and sharing information.

There are, of course, a few controversial statements. There seems to be one contradiction, in that the document begins with the rather stiff (and quite unacceptable) suggestion that ethical responsibility is shared among the researcher, the local institution, and the research council, but goes on to argue in several places what was omitted at first, *ie* that the general public must share this responsibility, even if large parts of it are delegated to institutions. This important topic might better have been rounded off near the start. The uneven load of suffering upon the research subject is stressed, but is not balanced by consideration of who, and how many, suffer if research is *not* done. Again there is contradiction, for researchers are later urged to spread this burden equally, a task well known to be impossible and admitted to be such in the document. The reader was tantalised to learn that Jenner's work was unacceptable by modern standards, and that placebos are not medication, without finding the reasons for these statements. There seems to be some elision of legal and

popularly accepted 'rights'. The reader is exhorted to select the membership of an ethics committee 'as widely as possible'; were he unsympathetic he might wonder whether this includes a recidivist offender to present prison volunteers? The comments on research prior to abortion seem unconvincing, and the literature review is largely confined to the respectable and well trodden. It is useful to have Nuremberg as well as Helsinki in the appendix.

The only point where the reader found serious discord was on information given to volunteers about risk. This seems to centre around a judgment given in a Canadian court; there is failure to grasp the sting. Risk information can be partitioned; there is information about the *suffering* which may be incurred, there is information about the *numerical* (probabilistic) risk of a procedure to the subject. There is detailed information about everything that *could* happen to the subject. But there is also the *actual* risk to the individual which can never be anticipated or explained. There is what should be told, because it is in the subject's interest to know it, and there is what could be told but is better withheld. How should an ethics committee decide this balance? Hence, several pages of advice about giving 'full descriptions' of risks to subjects gain a hollow ring, because this essential problem seems to elude discussion. Sadly, there is a lack of communication between determinist law and biological science which seems to infest most writings on the ethics of research; the fact that probably most citizens do not understand risk also makes the lot of their informants most difficult.

Finally, it was good to see a healthy insistence upon considering each case upon merit, rather than laying down rules to cover all known exigencies. This sort of practical wisdom characterises the document, which represents a real advance in scholarly writing on ethics from the standpoint of a public institution.

D W VERE
London Hospital Medical College
London