

The Linacre Quarterly

Volume 48 | Number 1


Article 19

2-1-1981

Current Literature

Catholic Physicians' Guild

Follow this and additional works at: <http://epublications.marquette.edu/lnq>

 Part of the [Ethics and Political Philosophy Commons](#), and the [Medicine and Health Sciences Commons](#)

Recommended Citation

Catholic Physicians' Guild (1981) "Current Literature," *The Linacre Quarterly*: Vol. 48: No. 1, Article 19.
Available at: <http://epublications.marquette.edu/lnq/vol48/iss1/19>

Current Literature

Material appearing below is thought to be of particular interest to Linacre Quarterly readers because of its moral, religious, or philosophic content. The medical literature constitutes the primary, but not the sole source of such material. In general, abstracts are intended to reflect the substance of the original article. Contributions and comments from readers are invited. (E. G. Laforet, M.D., 2000 Washington St., Newton Lower Falls, MA 02162)

Norberg A, Norberg B, Bexell G: Ethical problems in feeding patients with advanced dementia. *Brit Med J* 281:847-848 27 Sep 1980.

Eventually, aged patients with advanced dementia reach a terminal state at which spoon feeding is no longer feasible. In Sweden there has been increasing reluctance to institute tube feeding or infusion in this situation. This causes significant anxiety in the personnel who are caring for such patients. A double-binding condition results which may foster distancing and scape-goating. An effort should be made to reduce the pressure of such double-binding.

Weiss RJ: The use and abuse of deception. *Am J Public Health* 70:1097-1098 Oct 1980.

The use of deception in research raises two questions, one about the morality of such deception and another about the value of the information so obtained. In the author's view, "Deception in research may have serious consequences for the trust that is so essential to the relationship between patient and physician, while yielding little if anything in return."

Renaud M: The ethics of consumer protection research. *Am J Public Health* 70:1098-1099 Oct 1980.

Weiss's absolutist position rejecting the use of deception in research (*vide supra*) ignores the fact that ethical issues cannot be discussed in the abstract since they are inevitably linked to specific societal milieux. Consequently the use of deception in

research should not be rejected out of hand but should be permitted as part of the methodology of science, provided no one is harmed and valid answers to socially important questions can be obtained.

Curran WJ, Casscells W: The ethics of medical participation in capital punishment by intravenous drug injection. *New Engl J Med* 302:226-230 24 Jan 1980.

Some states have now legislated a method of execution that involves the injection of a lethal drug by medically trained personnel. Such state-ordered medical participation in capital punishment is a threat to the traditional ethic of the physician and "a corruption and exploitation of the healing profession's role in society." As such it should be formally condemned by the medical profession in the United States.

Kolata GB: Prenatal diagnosis of neural tube defects. *Science* 209:1216-1218 12 Sep 1980.

It is now medically feasible to diagnose neural tube defects prenatally. However, efforts to implement a screening program based on this technology raise questions about access to such testing, abortion, and the quality of life of affected children.

Bayley C, McCormick RA: Sterilization: the dilemma of Catholic hospitals. *America* 143:222-225 18 Oct 1980.

"If reputable theologians believe that direct sterilization cannot be absolutely excluded morally, then one

has to question whether the hospital is pursuing the true overall good of the patient if it adopts a policy that is based on an absolutist moral position. This is not to suggest that Catholic health care facilities ought to adopt a laissez-faire attitude or policy."

(Editorial): In cancer, honesty is here to stay. *Lancet* 2:245 2 Aug 1980.

Although the past two decades have witnessed a growing tendency for physicians to inform their patients of a diagnosis of cancer, questions remain about the extent of such disclosure. Societal expectations and pragmatic aspects of treatment both favor disclosure. "The change in attitude is

here to stay and we should start to train our students so that they will be able to help their patients without some of the anxieties still experienced by an older generation of doctors."

Paris JJ: Court intervention and the diminution of patients' rights: the case of Brother Joseph Fox. *New Engl J Med* 303:876-878 9 Oct 1980.

As evidenced by the case of Brother Fox, the intrusion of the judiciary in the area of medical decisions about prolongation of life for incompetent patients results in grave injustice for the patient and for the family and associates.

National Center Plans Forum

The National Center for Health Care Technology, in collaboration with the National Heart, Lung, and Blood Institute, is conducting a technical assessment forum to address the economic, ethical, legal, and social issues related to coronary artery bypass surgery on April 21-23, 1981 at the Sheraton Washington Hotel, Washington, D.C. Among the issues to be addressed are costs, organization and use of resources, ethical and legal considerations, and quality of life. This conference will draw upon information presented and conclusions reached at the previous consensus development conference on medical and scientific aspects held on December 3-5, 1980 by the National Heart, Lung, and Blood Institute in conjunction with the Center. Presentations and critiques will be given by cardiologists, cardiac surgeons, economists, ethicists, health planners, lawyers, and behavioral and social scientists.

The Center was authorized by Congress in 1978 to conduct and support assessments of medical technology; its mission is to evaluate the medical, economic, ethical, legal, and social implications of health care technologies.

This meeting is open to the public; there is no registration fee. The Center encourages attendance by health professionals and interested private citizens.

For technical information
please contact:

Michael Eliastam, M.D.
Special Assistant to the Director
National Center for Health Care Technology
Parklawn Building, Room 17A-29
5600 Fishers Lane
Rockville, MD 20857
(301) 443-4097

For administrative information,
please contact:

Elaine Kokiko
Executive Vice President
Moshman Associates, Inc.
6400 Goldsboro Road
Washington, D.C. 20034
(301) 229-3000