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A Philosophical Basis of Medical Practice: Toward a Philosophy and Ethic of the Healing Professions

Edmund D. Pellegrino and David C. Thomasma

Oxford University Press, Oxford and New York, 1981, xviii + 341 pp., \$19.95.

This is an ambitious and formidable book. In it, the authors undertake nothing less than a complete philosophy of medicine. The basis for this philosophy is not any philosophical system, but a careful analysis of medical practice itself. The central focus is on the clinical interaction between patient and physician. The conditions and implications of this interpersonal event define medicine and provide a perspective on the central personal and institutional issues which modern medicine faces. Thus, the book is divided into three parts: the first seeks an understanding of medicine; the second makes use of the first to develop the ethical standards which should govern the physician's dealings with his or her patients; and the third treats the implications of the first part for the social ethics of medical care.

The second and third parts of the book do not deal in detail with the casuistical problems on which much medical-moral literature has focused in recent years. Instead, they provide a frequently novel, practical perspective on the general normative and institutional issues which must be faced by physicians and by society at large. Thus, in Part II the authors provide an account of the need for discretionary space for the responsible practice of medicine, and of the contemporary tendencies to constrict this space. This concern is balanced by a thorough critique of the paternalism of Hippocratic medical ethics. In its place, the authors argue for an ethics which recognizes the autonomy of the patient. Insuring the moral agency of the patient is a moral requirement of good medical practice, based particularly on the vulnerable condition of the patient.

In Part II, the authors deal with (among other things) the moral obligations of institutions, and the moral responsibilities of medical teams and their members. These questions have been largely overlooked in recent literature. It is a merit of the systematic character of this work that it brings these issues to light and provides thoughtful, if not final, responses to them.

The foundation for these provocative and helpful ethical discussions is in the first part of the book. Unfortunately, this part is very difficult. The opening chapters are hampered by rather abstract and obscure discussions of the nature of philosophy and of the complex interrelations between philosophy and medicine. Moreover, the argumentation in this part is not as clear and precise as one expects in contemporary American ethical writing. The effect is that one is left — sometimes at crucial points — wondering exactly what the authors mean to assert.

However, the obscurities of the beginning of the book and the difficulties of philosophical style throughout much of Part I should not put the reader off. The former do not prevent understanding of the central claims of the book; the latter are gradually clarified, especially by useful summaries throughout the second and third parts.

The discussion of the nature of medicine begins with the old question whether medicine is an art or a science. The authors argue that, while it has features of both, it is a unitary discipline which is reducible to neither. Medicine incorporates knowledge of the biological sciences but has a practical goal — the healing of the

individual patient. Furthermore, it differs from other activities having restorative aims by the way it seeks to achieve this goal, namely, the clinical interaction. This interaction is fundamentally a healing relationship into which physician and patient enter. The character of this relationship reveals that medicine is both a moral enterprise and a form of craftsmanship that involves healing the body with the body. Health and disease are bodily realities which have an evaluative function. The clinical interaction begins with a patient's recognition of disease, and attempts to restore the former order and organic balance of good health. This restoration is effected with and through the body of the individual patient. On the basis of such considerations as these, the authors propose the following definition of medicine: "A relation of mutual consent to effect individualized well-being by working in, with, and through the body" (p. 80).

The remainder of Part I elaborates themes taken up here. The authors discuss the epistemological issues raised by the fact that medicine, while rooted in science, is concerned with understanding and curing the individual patient. This concern for the individual makes it impossible to understand medicine simply as a science. The objectification of the human body and its maladies, which the scientific character of medicine presupposes, can falsify one's understanding of medicine if not balanced by a recognition of the "wisdom of the body" of each unique patient. Thus, the authors believe: "Clinical judgments must be a complex process of perceiving individual uniqueness in the midst of common objectivities" (p. 110). In "The Anatomy of Clinical Judgments," perhaps the richest and most philosophically interesting chapter in the book, the authors make clear in a remarkably concrete way how the clinical judgments which are at the heart of medical practice are made and can be criticized. They show that concern for the uniqueness of each patient does not require that medicine be an art in the sense of an intuitive grasp of a situation which is non-rational and beyond logical criticism. The right clinical judgment is the result of a clinical reasoning process which, although it is complex and includes logically heterogeneous elements, can be logically evaluated in the light of appropriate norms of rationality. The final step in this process — the step from determining what *can* be done to what *should* be done for the individual patient — involves explicitly rhetorical and ethical considerations. At this stage the values and concerns of the patient have an important role and, therefore, the physician must be careful not to unduly influence the patient's decision.

The preceding summary of some of the central themes of this book cannot do justice to the richness of insight and balance of judgment it evinces. Thus, even though there are many specific points one might criticize, and even though one might desire greater clarity and rigor throughout, this book makes a significant contribution to the understanding of medicine. The focus on the actual practice of medicine, the unified perspective provided by this focus, and the richness of detail are likely to be instructive for anyone who wants to understand medicine as it is practiced today.

— Joseph M. Boyle, Jr.
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