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# [Book Review of] Prenatal Diagnosis and Selective Abortion, by Harry Harris

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and without them it would cease to exist as that object, then these are the properties that an object has essentially. With this basis established, Brody sets out to determine what properties are essential for being human and at what point does a fetus have these properties. He rejects the theory that the fetus is human at the moment of conception; for although the biological characteristics of the fetus have by then been determined, it does not follow that the fetus already has all these properties. "What the fetus has is the chromosomal mechanism by which the properties are finally produced. Therefore, it does not follow that the fetus out of which "A" will develop is identical with "A" and, like "A," is a human being."

Brody takes his stand concerning the beginning of human life from the opposite spectrum, through an analysis of death. Arguing from recent studies about the time of death, Brody says, "The traditional definition of death, we could all agree, needs to be modified one more time to read: a person is dead only if there has been an irreparable cessation of spontaneous and natural cardiac and respiratory functions and there has been an irreparable

cessation of brain function. But suppose we have the latter condition without the former one, wherein the brain has ceased to function but the heart and lungs have not . . . is the person dead if his brain has suffered irreparable and massive damage whatever the state of his heart and lungs?" To this question, Brody would say yes, and so he concludes that there is only one property which is essential to humanity and that is the possession of a brain that has not suffered an irreparable cessation of function.

He then maintains that the fetus acquires the potential of essential humanity when the fetus actuates the structures of a functioning brain, which comes at about six weeks. While traditional Catholic thought would push back the time of personhood even further, Brody's position is certainly more plausible than the Supreme Court's which has evaded the issue or put humanity at the time of viability; and Brody's chapter on "Abortion and the Supreme Court" is a lucid and logical critique on the Court's shoddy thinking in this area.

Patrick F. and Carol A. Berger, Ph.D.'s St. Louis University

# Prenatal Diagnosis and Selective Abortion

Harry Harris

101 pages. Harvard University Press, 1975. \$6.00

In a very few pages, Harry Harris, Galton Professor of Human Genetics, University of London at University College at the time the book was published, has compiled technical information which should be valuable to any generalist who has an interest in genetic defects. The writing style is clear, direct and easy to follow.

Professor Harris defines the framework of his position at the beginning in his Introduction. He recognizes that the introduction of precise techniques for the prenatal diagnosis of a variety of different genetic defects represents a new departure in medicine not because of the nature of the techniques but because of the objective at which making the diagnosis is simed.

Professor Harris attempts to choose neutral language. He uses the term "selective abortion" for that carried out specifically because the foetus has been shown to be either affected by or having a high probability of being affected by a particular abnormality. He also distinguishes between infants and children on one hand and foetuses on the other because of the desirability of differentiating clearly between the infant or child after birth and what it is at an earlier stage of development. It is strange that Professor Harris, renowned as one of the world's leading medical geneticists, ignores that the difference in time and place that the stages of development represent becomes a criterion for separating the affected foetus from the human family and from human concern. Thus, the terms he prefers are no less loaded than the ones that stress the humanity of an unborn child in the intrauterine

stages of development.

The book defines the scope of prenatal diagnosis describing techniques of amniocentesis and tissue culture as well as distributing pregnancies having the greatest risk of involving a severely abnormal foetus into four main diagnostic categories. These are (1) chromosome abnormalities diagnosed by cytogenetic techniques; (2) X-linked disorders where sex determination is the guide for action; (3) 'Inborn errors of metabolism' depending on specific enzyme assay or other biochemical characteristics: and (4) neural malformations such as anencephaly or spina bifida where estimation of alpha-foetoprotein in amniotic fluid is informative. Effects on the incidence of genetic disease of prenatal diagnosis and selective abortion of abnormal foetuses are discussed concisely but thoroughly.

On ethics, Professor Harris uses the forceful arguments of the human geneticist Leieune, discoverer of the chromosomal basis for mongolism, to expound the traditional view that abortion is morally indefensible. He fails to achieve balance because of the advocacy of "selective abortion" that permeates the book. The traditional position is characterized by words of vaguely negative connotation such as "absolutist" or "pat moralizing." Although acknowledging that Lejeune has been careful to avoid taking his stand on the basis of religious doctrine, Harris defines Lejeune's position as identical with the

orthodox Roman Catholic position, the party line of orthodox intellectual abortionism. He declares that moral attitudes toward abortion of the medical profession and other leading sections of established society in England and most parts of the U.S.A. have undergone almost complete reversal in one or two generations without stating the basis for his generalizations. His suggestion that those who would protect the lives of the genetically-defective unborn are less aware of the social

impact of such abnormal members is trite.

Prenatal Diagnosis and Selective Abortion can be a useful book but the effect of such a book on a generation of medical students and doctors trained in medicine without an ethic could be disastrous for an unsuspecting society.

> M. F. Jefferson, M.D. President, National Right-to-Life Committee

## Legal Challenges to Behavior Modification: Trends in Schools, Corrections and Mental Health

Reed Martin

Research Press, 2612 N. Mattis Ave., Champaign, III. 61820. 1975, VII + 179 p., \$5.95

Behavior modification has come under considerable legal attack in settings ranging from prisons to schools, and techniques ranging from psychosurgery to token economies. The issues are difficult and varied, and the disputes they have occasioned are not likely to be easily resolved. Books which attempt to summarize legal developments in this area for "the practitioners of behavior change and the administrators of such programs in public institutions" are therefore to be welcomed. The danger in any such book, however, is that complex issues will be made to appear simple, and that general statements of the "law" will sometimes be more misleading than informative.

While much of this book is insightful and of high quality, it is marred by its conceptual approach, its uncertain organization, its uneven organization, and its uneven documentation.

The major difficulty arises from the attempt to treat behavior modification problems generically, dealing with programs in "schools, corrections, and mental health" as if the legal issues involved did not vary significantly, depending upon the program's setting. This problem is especially troubling in the chapters on consent and records. What children, prisoners, and mental patients can consent to varies widely from state to state, yet this fact is not mentioned. The chapter on rec-