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Implications of History and Ethics to Medicine: Veterinary and Human

Laurence B. McCullough and James Polk Morris, III, Editors

Texas A & M University, College Station, Texas, 1978. xvi + 158 pp., \$5.00 (paper).

As the son of a small town general practitioner of medicine, I absorbed the subtle bias against others who claimed the title "Doctor." It was assumed that doctors of philosophy, dentists, osteopaths and others didn't quite have what it takes to be *medical* doctors. And as for veterinarians . . . did not the mistakes of "horse doctors" end up in the glue factory? Family loyalties were too strong, my world view too restricted for me to comprehend the endemic guild interests of *all* professions that engender identity, provincial bias, and elitism.

The fact that such professional defensiveness is now in retreat is symbolized by this volume, a symposium of the Veterinary and Human Medicine Centennial Academic Committee in 1976 at Texas A & M University. The 15 contributors represent three fields of academic and professional specialization, namely philosophy, human and veterinary medicine, with contributors numbering 5, 4 and 6 respectively. In their celebration of 100 years of service to the University and to the citizens of Texas and the nation, the participants placed a serious emphasis upon the integration of ethics, values and moral philosophy in the practice of their professions. Texas has long had the reputation for having the "biggest" of everything; now, with far greater pride, it can claim the first symposium that brought human and veterinary medicine together in a joint, comparative inquiry into the area of human values in medicine.

The first of the two sections of the volume deals with the histories of the two medical fields. As one-shot lectures, they are of necessity brief and superficial. Nevertheless, one is reminded once again that until fewer than 100 years ago, high mortality rates and disease were due more to improper diet, inadequate housing, poor sanitation, and the like rather than the lack of high technology medicine. Typhus, dysentery and pneumonia rather than Russian resistance were responsible for Napoleon's defeat in 1813, and even in our own Civil War, twice as many soldiers lost their lives through disease as from battlefield injuries. In our anti-septic era we easily forget that in former times bathing was uncommon, dry cleaning unknown and personal deodorants unavailable. When the murdered Archbishop Thomas a Becket lay in state in Canterbury Cathedral in 1170, swarms of lice left his body in search of warmer hosts!

The second group of essays treats ethical issues in medicine with special attention to experimentation on animal and human subjects. Several psychiatrists and veterinarians highlight the historic and emotional overtones that have always linked man and his animals. There is anthropological evidence that prehistoric man would frequently trade his wives but never his dog! By observing that feverish animals sought streams of cool water while those with stiff joints lay in the hot sun, man developed cold and hot packs for similar conditions.

There is a none too subtle defensiveness which some authors manifest in their testimonies of the psychosocial health-producing role of animals for humans. With the increase of urbanization, mobility, impersonalism, etc., people now seek the companionship of animals hitherto provided by the expanded family in a more tribal, organic culture. Fifty-five percent of American households have pets, 70 million are mammalian, and we spend over 4½ billion dollars per year for their

care. And while animal waste is a real problem for urban planners and environmentalists, the social value of companion animals is seldom appreciated. Utilitarian moralists often compute how many humans could be saved if dollars for pets put food in the bellies of the starving instead; but often they overlook the fact that a pet, especially for an elderly person, can be their only consistent relationship. Many times pets are used as an "admission ticket" to a veterinarian's office to seek personal help. Moreover, animals have a wide range of influence on child development by teaching biological functions such as urinating, defecating, copulating, eating, and drinking. Thus, children will raise questions and learn more about their own body processes through observation of their pet's behavior. Responsibility for grooming and feeding are established and pet "rite of passages" — birth, life and death — are emotional dress rehearsals for children in later life.

One of the more interesting papers delivered by a Texas "outsider," Edmund Pellegrino, M.D., then professor of medicine at Yale and now president of Catholic University, dealt with "The Fact of Illness and the Act of Pro-Fession." Pellegrino's thesis is that the time honored and dominant image of the physician derived from the Hippocratic Oath is now justifiably under attack and must be changed. That image was one of *noblesse oblige* with the physician as benign, hieratic, authoritarian, and paternalistic . . . one who took upon himself both moral and technical authority. Christianized during the Middle Ages, that model persisted through Percival's Code and is imbedded in the first A.M.A. code of ethics (1847). Now, through demystification, bureaucratization, patient autonomy and knowledge, and the fragmenting of power, moral and technical authority are separated in the physician-scientist-technician. A contemporary image, Pellegrino affirms, should unite the *fact* of illness and the *act* of pro-fession. The former discovers a fellow human diminished in freedom, body, choices, and in the power of others; the latter, a voluntary decision, is made by the healer to put art and science at the disposal of "wounded" humanity. Doctor and patient meet both as equals and unequals, but the humane dialectic of this relationship will be enhanced if medical schools increasingly include humanities in their curriculum.

Dr. Robert Veatch's article, "Issues of Informed Consent in Human Experimentation," nicely complements Dr. Pellegrino's theme. Veatch shows that neither the "patient-benefits" norm of the Hippocratic tradition nor the "society-benefits" calculus of 19th century utilitarianism is appropriate as an ethical basis for contemporary human subject experimentation. Today, we increasingly realize the rights and autonomy of the research subject. Thus, Veatch develops twin principles of "reasonableness" of disclosure of risks and "self-determination" of the subject, independent of social benefit. He ends his article by indicating that H.E.W. could expand its guidelines by mandating the disclosure of inconvenience as well as risks, whether placebos might be used, who is responsible for damages, purposes of experiment, and whether treatment will continue with the subject, if found to be effective.

The administration and the Centennial Academic Assembly Committee of Texas A & M should be congratulated for sponsoring the symposium and the subsequent publication of the addresses. They have provided a public forum whereby medical professions can articulate for themselves and for society what their professional ethics are. Without the engagement of our public institutions in such discussions, professional autonomy will diminish, external regulation increase, to the detriment of both professions and the public whom they attempt to serve.

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