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## [Book Review of] *Without Moral Limits*, by Debra Evans

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## BOOK REVIEWS

### *Without Moral Limits*

by Debra Evans

*Crossway Books, Westchester, Illinois, 164 pages plus appendices, paperback \$9.95.*

This new book by Debra Evans is a valuable source of information about the impact of new medical technology on women. It is well researched and written in a clear, popular style. The author is an evangelical Christian, but her criticisms of the medical establishment parallel those offered by feminists like Gena Corea (author of *The Mother Machine*) in many ways. She strongly criticizes the medical establishment for subjecting women to unnecessary surgeries, for their often exploitative treatment of women with fertility problems, for bringing about the decline of midwifery and breast feeding, and for their general prejudice in favor of high tech solutions to all problems. She favors respecting the natural functions, rhythms and cycles of the female body rather than manipulating them technologically—a belief which makes her sympathetic with natural family planning.

This book would be particularly useful for women who are trying to evaluate the recommendations of their gynecologists, particularly where these involve C-sections, hysterectomies or fertility problems. She warns against the new reproductive technology (which she calls gynotech) both because of dangers to women's health, and because of the way in which these new technologies depersonalize reproduction and strip it of its emotional, sexual and spiritual meaning.

Her discussion of Caesarean sections (C-sections) cites statistics to show that enormous numbers of unnecessary C-sections are performed (our current rate is five times that of six European countries), and that they are more risky than vaginal births for both baby and mother. The increase in C-sections is in part a result of doctors' fears of malpractice suits—a fear which has led to over-treatment in many other areas of medicine also. But there are also reasons for it built into the structures of obstetricians. A doctor receives more money for a C-section than for a vaginal delivery, it takes him less time to do, and does not require him to stay up all night waiting for delivery.

Her chapter on hysterectomies might be valuable for doctors, because in addition to strictly medical data about risks, complications and medical indications for the operation, she also goes into the emotional, psychological and sexual impact of hysterectomies. She documents from medical literature the growing influence of the idea that the female womb has no function but baby-making, and quotes a doctor as saying that "after the last planned pregnancy, the uterus becomes a useless, bleeding, symptom-producing, potentially cancer bearing organ and therefore should be removed." In true feminist style she points out the double standard at work in (male) gynecologists' treatment of the female womb (92% of OB/GYNs are male). The attitude expressed above would never be directed toward *male* sexual organs, and no man would consider removal of any of his sexual organs for any reason other than threat to his life. But such operations are routinely done on women. American women, she claims, currently have a 50% chance of having their uterus removed before they die, and only 20% of these operations are cancer-related.

Her treatment of abortion as a kind of rape—a kind of invasion of the heart or center of woman—is written with a passionate moral intensity which at times gets our of hand. As

much as I am sympathetic to her view of abortion as a deep violation of the woman, it is not only male doctors who perform them, and not *all* those who do are callous, profiteering monsters. Women can be quite as sinful as men, and if one wishes to win converts in the medical profession, one has to be careful to manifest a charitable attitude toward doctors. Certainly one should not suggest that doctors who do abortions are morally equivalent to rapists. But Evans says in describing an abortion: "In an obscene imitation of intercourse, the woman will her body to open itself to the gynecologist's dilators . . ." But her presentation of the often suppressed statistics concerning medical complications caused by abortions is useful, and her deep sympathy for the feelings of loss and violation experienced by aborted women is evident.

The rest of the book presents information about the research and experimentation which have been performed on infertile women and their ova and embryos. Her material on infertility is informative. She argues that the diagnosis of infertility after only one year of uncontracepted intercourse needlessly sends many people scurrying to doctors, since it often takes people longer to conceive. She also cites a major study which showed that, while 41% of infertile couples who were treated for their infertility succeeded in conceiving, 35% of the couples diagnosed as infertile who did *not* receive any treatment also conceived during the same period.

Much of the material she provides about in vitro fertilization experiments and research on early embryos is quite horrifying. The embryos were experimented on and then destroyed. The women were often misled about the risks they were undertaking and the likelihood of success of the procedures used on them, and totally uninformed about what was being done to their embryos. The callousness, profiteering and generally deplorably low level of professional ethics manifested by the researchers and medical practitioners whose work she documents provides strong evidence that legal controls on this sort of manipulation of human reproductive material is essential.

Evans's book is, however, very weak from a philosophical point of view. She does not have the sort of mind which makes fine distinctions; for example, she uses the term "utilitarian" as a general term of abuse without showing any awareness at all of what utilitarianism is. It would be desirable both from a theoretical point of view and from a practical point of view, to see the issues more carefully delineated, and her sense of righteous indignation, while quite frequently justifiable, seems to get in the way of this. She tends to come across as hostile toward all technology, and thus does not distinguish enough between: (1) cases involving the use of procedures which are inherently wrong, such as creating, experimenting and then destroying human embryos; (2) cases where the procedure itself is a perfectly legitimate one, but is being used in cases where it is not necessary, so that women are being subjected to unnecessary risks of physical damage and emotional distress (e.g., C-sections and hysterectomies); and (3) cases where medical technology appears quite benign, such as performing a D&C after a late miscarriage, or surgically removing blockages in a women's tubes.

There are certainly borderline cases, and articulating the relevant principles is not easy, but women making decisions need help making these sorts of distinctions. They need to know, for example, whether a particular procedure is one which they should always avoid, or whether it is simply a matter of weighing the likelihood and the seriousness of the harms which these procedures prevent against their probable consequences. And these consequences, in turn, may be evaluated from a number of points of view—health risk, aesthetic considerations, psychological considerations, moral considerations, or religiously based reasons. Again, these distinctions need to be drawn. She cites some useful passages from Paul Ramsey, and includes "The Vatican Instruction on the Respect for Human Life and Dignity of Procreation" as an appendix, and one could perhaps draw out some principles governing the use of some reproductive technologies from these. But she makes no attempt to do so.

Her emphasis on the importance of prayer for couples struggling with infertility is a moving testimony to her faith, and may well be helpful to Christian couples trying to cope with this painful problem. This is sensitive ground theologically, however, for God's providence frequently operates through human beings—perhaps even doctors. We cannot

refuse legitimate forms of medical treatment and then demand that God perform miracles. Unless we are going to turn Christianity into Christian Science, and rely only on faith healing, we must articulate some principles which enable us to make decisions in difficult cases.

The book would be quite useful for people who are, or wish to become, involved in the political struggle to place legal restrictions on the burgeoning new industries which deal in human reproductive materials. An appendix provides a state by state list of some of the organizations which are the worst offenders, so that they can be targeted for political purposes. I am somewhat concerned, however, that her lack of rhetorical control and her failure to draw clear distinctions among different sorts of technological interventions, may needlessly give offense to medical practitioners who might otherwise profit from her book, make it easier for opponents to dismiss the book as a kind of romantic "back to nature" tract, and generate more heat than light.

Yet I believe that much can be learned from her insightful treatment of these extremely important issues, and that her challenge to the medical establishment deserves a serious hearing.

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## *Doctors, Death and Doomsday*

by "Henry Cabot" (pseudonym)

*Excalibur Press, London*

The characters in this book, by a well-known New Zealand obstetrician, are priceless and recognizable. There is the pompous and self-righteous chairman of the obstetrics department trying to obscure his avarice under a cloak of feminism. There is Father Rex, the trendy and theologically illiterate cheerleader from pastoral care, and the physically well-endowed female staff member trying to disguise herself as one of the boys. The protagonist, Dr. Luke Downing, a slightly too intrepid obstetrician, nevertheless manages to proclaim the author's admirable medical philosophy on numerous occasions to a receptive house staff and colleagues who either groan with disdain or silently and covertly approve.

The plot of the novel often seems contrived, however, with Hollywood formulaic situations such as attempted murder by the sideswiping mystery automobile and elaborate kidnapping schemes by the evil agents of Debrit. The byplay between the hero and the heroine evolves into a believable relationship after a far-fetched beginning in which the obstetrician proposes to his patient on the first office visit.

One aspect of the story which deserves credence is the conspiracy on the part of an international organization to undermine a society by attempts to reduce its birth rate. The mindless promotion of abortion and contraception by foundations and federal agencies (augmented by press and media hoopla) has resulted in declining populations throughout Western Europe and the free world. It is obvious that the tragic mistakes of the last half of the 20th century are going to result in aging populations, stagnation and loss of vitality throughout the 21st century. To a large extent these trends are irreversible as cohorts of women in the reproductive age groups shrink dramatically. Since falling birth rates coincided with the cold war period, the notion of planned propaganda against the West is quite believable.

The plot development is entertaining, if not always to be taken seriously, and the reader