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Current Literature

Catholic Physicians' Guild

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Current Literature

Material appearing below is thought to be of particular interest to *Lancet* 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)

Motulsky AG: Impact of genetic manipulation on society and medicine. *Science* 219:135-140 14 Jan 1983.

Genetic manipulation of plants and animals has a long and generally uncontroversial history, and the indirect manipulation of human genes by public health measures is an acknowledged fact. The treatment of established genetic diseases with normal DNA poses no special ethical problems. However, the areas of antenatal diagnosis and of DNA manipulation in human fertilized ova raise ethical questions that require improved education of the public.

Stone AA: Sexual misconduct by psychiatrists: the ethical and clinical dilemma of confidentiality. *Am J Psychiat* 140:195-197 Feb 1983.

The ethical requirement that psychiatrists expose colleagues who sexually abuse their patients conflicts with the ethical requirement of confidentiality. This impasse may be resolved by the judicial use of consultation.

(Editorial): Crime as destiny. *Lancet* pp. 35-46 1-8 Jan 1983.

Although the earlier idea of antisocial behavior being determined genetically has been discounted in favor of environmental influences, the concept of a genetic predisposition has persisted. "It is now clear that genes do not confer a certainty of criminal behavior" but nevertheless "genetic influences are probably among those factors which confer a liability" to the more common transgressions of the law.

Kass LR: Professing ethically: on the place of ethics in defining medicine. *JAMA* 249:1305-1310 11 March 1983.

Despite forces seeking to define it as a trade, medicine remains a profession. As such, it is an inherently moral, special activity with its own special moral duties and postures. "As a professional, man bears witness to the being of something higher and more enduring, participation in which can only be called a blessing."

Lambert RD: Fecondation extracorporelle d'oocytes humains et transfert d'embryons: quelques considerations techniques et ethiques. *Canad Med Assoc J* 128:802-807 1 Apr 1983.

Successful human in vitro fertilization is a difficult undertaking. Current information favors the view that this procedure has no harmful effect on the offspring nor does it raise any ethical problem in this regard. As for ethical problems of a societal nature, however, these are difficult to identify at present.

Little JM: Human experimentation and the physician-patient relationship. *Surg* 93:600-602 Apr 1983.

The subject of human experimentation has evoked emotional responses that have resulted in inappropriately stringent controls. While many regulations have a valid basis, some threaten the conduct of clinical investigation problems. The present phase of excessive control will pass, however, and the profession should learn from this experience.

Russell W: Intimate body searches — for stiletos, explosive devices, et al. *Brit Med J* 286:733 26 Feb 1983; Havard JDJ: Doctors and the police. *Brit Med J* 286:742-743 5 March 1983.

Intimate body searches of individuals in police custody are a violation of medical ethics relating to the doctor-patient relationship unless performed with the full, free, and informed consent of the suspect, something that is at best difficult to obtain in these circumstances. Nevertheless, the Commons Committee considering the Police and Criminal Evidence Bill has rejected the objections voiced by the British Medical Association in this matter.

Black DW: Psychosurgery. *South Med J* 75:453-458 April 1982.

Psychosurgery continues to raise serious ethical and legal questions. Despite continuing study, there is still insufficient knowledge about brain function to permit unqualified approval of a surgical procedure that is irreversible.

Hilfiker D: Allowing the debilitated to die: facing our ethical choices. *New Engl J Med* 308:716-719 24 March 1983.

In the nursing home milieu, how vigorously to treat a sick patient raises difficult ethical problems that involve, *inter alia*, the wishes of the patient, societal resources, diagnostic and prognostic difficulties, and legal aspects. It is time that the medical profession arrived at a consensus on this subject.

Lothstein LM: Sex reassignment surgery: historical, bioethical, and theoretical issues. *Am J Psychiat* 139:417-426 April 1982.

Although sex reassignment surgery is gaining acceptability for the treatment of gender dysphoric patients, the high success rate that is customarily claimed for the operation should be critically reassessed. It is possible that there may be many patients for whom psychotherapy is a more appropriate approach than surgery.