
Although society has had a legitimate concern about aggression among XYY and XXY men, there is no evidence that such individuals are especially aggressive. The elevated crime rate may be related to low intelligence. Since this group does not contribute particularly to the problem of aggressive crime, identification would not ameliorate the situation.


The traditional role of family and physician in reaching a decision on the prolongation of life is threatened by the court decision in the Karen Ann Quinlan case. Law must remain open to the service of persons but overemphasis on its role in human affairs will produce grave imbalances. "The Quinlan case never should have gotten to the courts. Obsolete homicide laws and corrosive malpractice atmosphere got it..."
there; it is what got it there that must be attacked and corrected."


The use of torture as an instrument of political oppression is apparently increasing, and may directly or indirectly involve medical personnel. Physicians have a special opportunity and an ethical obligation to oppose this trend. Furthermore, codes of medical ethics must be strengthened to support and guide the physician who may become involved in these practices.


In an effort to resolve the ambiguities involved in caring for critically ill patients, the personnel of an intensive care unit established four levels of care and categorize their patients appropriately after extensive discussion in which all personnel participate. The categories are as follows:

I. all-out therapeutic effort
II. continuation of all-out effort, but with 24-hour re-evaluation of the patient's prognosis
III. conservative, passive care, with no heroic measures to prolong life
IV. all therapy and life-support assistance discontinued — for brain-dead patients


Recent proposals have been made that improved statistical techniques may obviate, or at least reduce the need for, randomized clinical trials. However, such innovations are not readily applicable to the large-scale, complex situation that usually obtains in clinical research. The randomized clinical trial continues to represent the most reliable means of evaluating therapy, and is more suitable than uncontrolled experimentation in protecting the interests of patients.


Largely through the efforts of Dr. Cicely Saunders, St. Christopher's Hospice has pioneered in the humane and efficient care of the dying patient. Medication is used appropriately, and the patients are treated in an atmosphere of warmth and understanding. "The Hospice teaches a new attitude toward dying and death, with the realization and conscious acceptance of dying and death as part of being born and part of the struggle of life."


Although the United States spends much money on clinical aspects of the cancer problem, little is allocated for the care of those patients whose disease cannot be controlled. In Britain the Hospice movement provides exceptional support for such individuals. However, some feel that the concept cannot be successfully transplanted to the United States, where the British concept of voluntarism and community are absent and where devoted leaders like Cicely Saunders are not available.

Of 15 schools of public health responding to a questionnaire, the majority (10) did not offer any studies on the ethical basis of public health practice. However, the area of biomedical ethics embraces many topics of concern to public health. Indeed, advances in public health have generated such topics. Nevertheless, schools of public health have tended to ignore this aspect in structuring their curricula. Such schools “have a responsibility to raise the consciousness and broaden the decisional horizons of young administrators who may be intent solely upon the efficient, economical, acceptable provision of quality health services.”


The laws of most states already require that licensing agencies determine what physical, mental, or visual conditions significantly affect driver performance, and the cooperation of physicians is required in this regard. Such cooperation in examining candidates for licensure has generally been forthcoming. However, this is a far cry from requiring a physician to report gratuitously a patient who is seen for reasons other than to be examined for a driver’s license. Such a requirement would be objectionable for many reasons, particularly those involving breach of confidence. On the other hand, the principles of medical ethics clearly allow physicians to report impairment when necessary to protect the welfare of the individual or the community. There is as yet no solution to this dilemma, and it remains one of those problems in which even a compromise proves controversial.

Dunphy JE: Annual Discourse — On caring for the patient with cancer.


The care of the patient with cancer poses many problems with which the medical profession continues to wrestle. Specific prognoses about length of life should be avoided, especially since they are apt to be inaccurate. Evidence of concern for the patient’s minor problems and the wise use of medication are important. Euthanasia is not “mercy killing” but “therapeutic murder.” “The care of the hopelessly ill or mentally incompetent ‘non-person’ is a trying but noble burden that society and the health professions . . . have assumed and must continue to bear.”


According to Catholic moral tradition, “there is first a duty to preserve one’s life, and following on that a right not to be interfered with in making moral decisions with regard to this duty. The right of privacy or self-determination is a necessary means because, given the personal or individual character of the considerations that limit this duty and given the personal character of the situations that activate this duty, it is the person himself or herself who is best situated to implement decisions.”


Measurement of amniotic fluid alpha fetoprotein levels can permit the antenatal diagnosis of spina bifida. The risks of amniocentesis in mid-pregnancy are not yet established, and “many of the practical and ethical problems associated with antenatal screening and selec-
tive abortion after amniocentesis are unsolved.” Nevertheless, it represents “a major advance to be able to identify and offer to terminate 800 pregnancies with spina bifida each year, 300 of which would result in children who grew up seriously handicapped.”


Since there are things we ought to do for others simply because we are members of the human community, it follows that proxy consent for experimentation on children (or on fetuses) as members of the human community is defensible, provided there is minimal risk, discomfort, and inconvenience and assuming there is hope of real benefit. In the case of adults it is desirable that informed consent accompany the fulfillment of such communal duty. However, should insufficient volunteers be available for low-risk, important research, “it would not be unjust of the government to recruit experimental subjects, for example, by lottery,” just as the government can draft soldiers for national defense.

Three special articles dealing with hopelessly ill patients have appeared in a recent issue of the New England Journal of Medicine, and warrant careful reading by all interested in the subject:


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