Book Reviews


The subject of this book is the tensions between the ethics of medicine and the principles of economics. These tensions were aired in 1986 at a conference held in Lisse at which economists, Mooney and McGuire, were joined by philosophers, doctors, sociologists, lawyers and medical ethicists. Mooney and McGuire circulated a discussion paper in which they explained how doctors committed primarily to individual patients might use resources in such a way as to neglect the wider social benefits. This issue is the concern of utilitarian economics.

The utilitarianism described is an adapted version which combats some frequent criticisms. Utility is seen to be derived not only from goods and services ("outcome utility") but also from the way in which services and goods are obtained ("process utility"). This approach incorporates some ideas of Mishan and Hahn. Utilitarians, concentrating on the maximisation of total utility, have been severely criticised for neglecting distributional aspects. Distribution, however, is a particularly important attribute of health care, for few would be willing to allow total utility to increase regardless of pain to some individuals. Mooney and McGuire include distribution as a particular form of process utility, and then assert that the economic task is to maximise the sum of output and process utility. The problem for society is how to implement such a policy.

They find both a potential answer and a dilemma in the agency relationship between doctor and patient. Because patients do not have enough information, they rely upon the doctor for advice and this usually includes prescription of treatment and direction of resources. The doctor is thus the allocator or distributor of resources, and is ideally placed to maximise use and distribution. But if the relationship between doctor and patient is to be maintained, patients must trust the agent/doctor to act in their best interests. Medical ethics, Mooney and McGuire believe, act to ensure that the interests of the patient are paramount and not affected by the agent's self-interest or the interest of other parties. Thus there is a conflict between the doctor's role as allocator and distributor, and as agent for the patient.

Despite this conflict, Mooney and McGuire are not happy about delegating to doctors the task of deciding what is best for society. They suggest an ethical code, based on cost-benefit analysis, for deciding resource allocation at all levels above that of management of the individual patient. No clear consensus about resolving this dilemma arises from other contributions to the volume. The major themes emerging are concerned with the interpretation and practical applications of medical ethics and the basic tenets of utilitarianism. In addition there are suggestions about the formulation of rules, guidelines and ethical codes and a cautionary note about their application. A welcome sense of balance is introduced by Patricia Sohl who places the debate in historical context and suggested monitoring to resolve some of the issues.

In discussing the interpretation of medical ethics as a representation of doctors' behaviour, many of the contributors feel that doctors already balance the needs of their patients with those of other patients and work within professional and resource constraints. Gillon, in a particularly forceful contribution, illuminates his arguments with vignettes of actual practice. Merely showing that doctors work within constraints, however, does not answer the question as to whether this behaviour maximises health benefits.

Have, Downie, Jennett and Abbing criticise the formulation of medical ethics which was offered for debate. Have considers that since the 1960s consensus about medical ethics has broken down because of the complexities of modern medicine, the issues raised by advances in medical care, the pluralistic values of today's society and the breakdown of medical paternalism. Downie disagrees with the description and current operation of medical ethics. He considers it to be too rigid, that it limits worthwhile cooperation with other disciplines and works to the disadvantage of patients. Gillon considers the absolute stereotypes given are too simplistic. Both Gillon and Jennett feel that, far from medical ethics and economics being in conflict, they could work together to improve the lot of patients by removing unsuccessful treatments.

Perhaps of more fundamental importance is the application of utilitarianism to medicine. Downie concentrates on the failure of utilitarianism to accommodate justice, which is concerned with the interests of each person equally. As Downie asserts, no version of utilitarianism can accommodate this problem, nor adequately deal with the problem of "true utility"—that which a perfectly informed individual would act upon. This is of key importance to the delivery of healthcare, where patients often do not have adequate information to make appropriate choices.

Gillon, quoting Warnock, raises another important issue: the reaction of patients to the knowledge that their doctor/agent was applying utilitarianism principles which might not operate in their best interests.

"Thus while he will not malevolently kill me off, I cannot be sure that he will always try to cure me of my afflictions."
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Rules to direct agents have been suggested to clarify patients' rights, but, if not absolute, they will need to be interpreted. An interpretation appealing to simple utilitarian principles will not solve the problem of uncertainty but a bad interpretation may preclude maximisation of utility. Thus a problem remains. Gillon suggests a reconciliation between rights of patients and societies' goals by incorporating into process utility the doctor's special concern for patients. All these modifications leave us with problems of measuring outcome and process utility and of weighting the different components, essential elements of any strategy of maximisation.

Mooney, McGuire, Have, and Abbing believe that by the adoption of ethical codes societies' goals can be achieved and within this framework individual doctors can operate in the best interests of patients. Abbing, whilst suggesting such codes, argues for flexibility in application to ensure that individual patients' legal rights to care are not infringed. He sees schemes to control costs in the USA as indicative of a new era of standardisation of medical procedures which limits doctors' and patients' choice. He is cautious about the adoption of crude cost-benefit analysis in decision making, in contrast to Jennett who is so enamoured by efficient use of resources as to recommend 'triage' before doctors and nurses are "caught in a cycle of commitment". Triage is dismissed by Gillon as more appropriate on the "battlefield", but he is also aware of the impossibility of separating macro and micro allocation because clinical decisions have implications for the allocation of resources. Other suggestions for the future include extensions of teaching of economics and moral philosophy to young doctors and of using computing technology and expert systems to expand choice.

What then of the book? It is essential reading for all those interested in developments in the management of health care. It does not offer solutions but it extends the area of debate, illuminates the issues, offers suggestions for future monitoring and adds cautionary notes about simplistic solutions. By placing it in an historical context we gain a sense of perspective. We are unlikely to find easy solutions to moral problems which have been debated since the fifth century BC.

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Twinning is a most interesting aspect of human biology. This new volume honours Professor Ian McGillivary, who recently retired from the Chair of Obstetrics and Gynaecology at the University of Aberdeen. The contributors all work or have worked with the Aberdeen group, and the text emphasises this school of work on twinning, which is traced back to James Matthews Duncan and Mary Slessor. It will be of interest to readers of this journal as the epidemiology of twinning and its relationships to congenital anomalies are discussed in detail, and provide one of the best reviews since M. G. Bulmer's book 'The biology of twinning in man', published in 1970. Other chapters deal with physiological changes during twin pregnancy, the management of twin pregnancies and their outcome, birthweight standards, and the relationship of birthweight in twins to later growth and intelligence. The contributions of twins to genetic research, and the psychological and sociological aspects of twin behaviour are not covered here. The book includes much unpublished data from the Aberdeen group and provides some historical and cultural insights. However, because of the Aberdeen concentration, it cannot be used uncritically as a full review of the epidemiology and biology of twinning, as the local emphasis often means that work from other centres is discussed superficially or omitted. Exceptions are the chapters on descriptive epidemiology and on congenital anomalies, which provide a very thorough and up to date review. There is some duplication; there are individual chapters on the aetiology of twinning, on descriptive epidemiology, and on the factors affecting twinning, which could more usefully have been combined.

The value of good population based clinical research is shown by the data from a system which has included all twin maternities to women resident in Aberdeen from 1951 to 1983, most of whom have attended a special research antenatal clinic. The discussion of determination zygosity is recent enough to mention genetic fingerprinting techniques, which will make some of the cumbersome methods obsolete. The style varies considerably. Many sections are written for the general reader. Some very detailed tables, such as those on international variation in twinning rates and on the frequency of congenital anomalies in twins are good reference sources. Some of the tables of data from the Aberdeen group are in a raw form, for example data are presented on twinning rates in Aberdeen by social class, but are not adjusted for age and parity differences. Results of a complex...