

From Hippocrates to Senate Res. 75

New medical capabilities raise new ethical problems. The Senate debates a national advisory commission to study the problem

by Robert J. Trotter

Ethics became an integral part of medicine when Hippocrates first gave his oath. Since then, however, medicine and ethics have both grown more complex. Every advance in science and technology has ethical implications for society. In the biomedical field, the new issues are increasingly becoming matters of public concern, as the recent Kennedy and Airlie House symposiums indicated (SN: 10/23/71, p. 275; 10/30/71, pp. 294 and 298). Some say the Government should become involved.

These questions came before the public eye in 1967 when Christiaan Barnard completed the first successful human heart transplant. At that time Sen. Walter F. Mondale (D-Minn.) proposed to Congress a resolution that would establish a national commission to study medical ethics. Extensive hearings were held before the Subcommittee on Government Research but nothing came of them. In 1968 Mondale proposed almost the same bill and again no action was taken. In March of this year he reintroduced his bill and this time it will probably get out of committee and onto the Senate floor for a vote where it seems to have a good chance of passing.

The bill (Senate Joint Resolution 75) has bipartisan co-sponsorship of 22 Senators, among them the ranking members of the Senate Health Subcommittee. In the House Rep. Thomas Foley (D-Wash.) has introduced a companion measure that has similar bipartisan support. "This reflects a welcome consensus on the need for action which has developed since 1968," says Mondale. The Senate Health Subcommittee held hearings on the proposed commission bill Nov. 9.

Joint Resolution 75 would establish a National Advisory Commission on Health Science and Society. The commission would be composed of 15 members appointed by the President from among the fields of medicine, law, theology, biological science, social science, philosophy, humanities, health administration, government and public affairs. Its job would be to undertake a comprehensive investigation and study of the ethical, social and legal implications

of advances in biomedical research and technology.

Seminars and public hearings would analyze and evaluate scientific and technological advances, current and projected, and implications for individuals and society. Investigations by public and private agencies would be commissioned and findings and recommendations would be reported to Congress and the President at interim periods and at the end of two years. The commission would terminate after two years and \$2 million.

Testimony—mostly favorable—given at last month's hearing centered on recent developments in science and specific areas where ethical guidelines are needed. Many of the questions that are recently finding their way into the public consciousness came up. Should carriers of hereditary diseases be allowed to have children? Should retarded persons be segregated from members of the opposite sex? Should they be sterilized? What are the ethical implications of test-tube babies? What will happen to society when men and women are free to determine the sex of their children? Which individuals should receive the benefits of artificial kidney facilities? How should society regulate the use of behavior modification drugs and other techniques to control human behavior? How can the controllers be controlled?

"The ethical over-kill has been tremendous" on these topics, says Henry K. Beecher of Harvard Medical School. He therefore emphasized some of the more discrete ethical problems of medical research that he believes need examination: invasion of privacy, trust and deception, and situation ethics were among the problems he believes need more attention.

These problems are "more portentous than any I have ever dealt with" says Abram Chayes of Harvard Law School. But, says Daniel Callahan of the Institute of Society, Ethics and the Life Sciences in Hastings-on-Hudson, N.Y., "I am optimistic enough to think that progress can be made." The issues have now surfaced and the public wants open discussion and debate.

The Administration, represented at the hearings by Merlin K. Duval, HEW

assistant secretary for health and scientific affairs, seems to feel that enough progress is being made without another commission being formed. The National Institutes of Health, the Public Health Service, the Department of Health, Education and Welfare and the National Science Foundation are all doing work in the field of medical ethics. For example, NSF recently awarded \$68,000 to the National Academy of Sciences to conduct a one-year technology assessment in biological and medical science developments. NSF has awarded a \$1.5 million grant to the Center for Advanced Studies in the Behavioral Sciences to establish an integrated program of technology assessment that will take into account the societal impacts of current and future developments in medical biology. "In the private sector," says Duval, "several distinguished groups already in existence have broad responsibilities in the areas outlined for the proposed Commission on Health Science and Society." He cites the American College of Surgeons, the National Academy of Engineering, the American Academy of Arts and Sciences, the American Philosophical Society, the IBM Co. and the World Council of Churches among others. "In the light of relevant activities already under way, and the number of existing institutions concerned on a continuing basis with issues raised by health research advances, is there a need for the National Commission proposed in Senate Joint Resolution 75?" asks Duval. He and the Administration think not, and therefore do not recommend that the resolution be enacted into law.

Mondale supporters, however, do not agree. They believe that the existing groups do not have enough public input and are not coordinated or staffed to handle all of the problems. Resolution 75 provides for public hearings, input from consumer groups and public reports to Congress and the President. The commission would make a blueprint of the problem and then contract with specific agencies to handle specific problems, instead of having many agencies each trying to cover all aspects of the same problem simultaneously. □

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