



## Doing the will of the people

Is it really what a doctor's for? asks Jon Garvey

I am glad that I am not a paediatrician at the moment. Recent events must have made them feel like the population of Moscow during one of Stalin's purges, waiting for the sound of car doors slamming in the night, for the fateful knock on the door. "If they can accuse Hugh Jolly," they must be pondering, "then who can be safe?" Somebody had better start budgeting for extra long-stay care facilities now, because in a few years time there is going to be an alarming bulge in the number of severely handicapped, surgically repaired, spina bifida children, and a super-abundance of orphaned, aggressively operated upon, Down's syndrome victims.

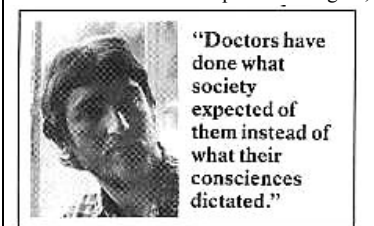
It would appear, from the newspaper correspondence pages, that one section of the public has judged the medical profession and found it to be callous and immoral. These criticisms may well be justified, but if it is true that those who should preserve life have become murderers, it is not, in my opinion, because they are operating an ethical code that counts itself above the rule of law and the common decency of society. It is because doctors have done what society expected of them, instead of what their conscience dictated; and it is society itself that has changed.

When I worked on a gynaecology unit, only a couple of years ago, I was continuously depressed by clerking the patients who had come in for termination of pregnancy (a term supposedly clinical, but in fact euphemistic). Some days there were more of them than there were deliveries on the maternity block. As a primarily obstetric SHO I didn't actually have to perform the things, but I was involved with evacuating uteri after incomplete miscarriages. I still remember my horror at scraping out a pregnancy that was a little more advanced than we had calculated; as I curetted perfectly formed little arms and legs, I knew that I would never have been able to live with myself if I had done this to a viable fetus.

But I thought I was the only one. To my surprise, when I discussed this with the rest of the team of two SHOs and two registrars, they all said that they found doing abortions abhorrent, that they Jon Garvey is a GP in Chelmsford.

felt the majority of them were unjustified, but that they did them because somebody had to, and because one should not impose one's beliefs on others, especially when the majority of people disagreed with them. Only one member of the team, a registrar, made a display of indifference, but then he was a Catholic. I have found the same feelings widespread among GPs.

I think this principle, that one should not impose one's views on others, especially patients, is the most potentially evil tenet of modern medical ethics. In the abortion issue, for example, having concluded on emotional, ethical and theological grounds that I don't like abortions one little bit, and having decided that the law supports my view except in certain instances with which I heartily concur, I still find myself referring people for abortions on social grounds. Why? Partly, I suppose, because the media keep bombarding me with the falsehood that it is the patient's "right",



on the basis of British law, the European Declaration of Human Rights, the Natural Order of the Universe and Divine Judgment. And partly because I care for my patients, and when they come to me with this attitude instilled in them, my refusal to help would not be consistent with my desire to continue looking after them, nor would my referring them away to some clinic in London.

But how does this compromise affect me? There is a whole library of evidence from social psychology that what you are forced to do, you end up agreeing with. This is self-protection; it would be hard for the concentration camp furnaceman to bear his conscience did he not believe his victims were enemies of humanity. I begin to see a softening of the edges of my convictions, until I am pulled up short by the uncompromising priority of the issues that formed my views in the first place. Life. Death. Clearly more fundamental than opinions and expediency, but

we are exposed to these all the time, and experience life and death only once.

It must be the same conflict for the paediatrician "playing God" (funny how both sides of these life/death de-bates use this phrase) over the continued survival of a handicapped infant. Quite obviously, society does not give a tinker's curse for these kids: they are provided with inadequate facilities for schooling, adoptive parents are hard to come by, and they are discharged at school-leaving age into a world unwilling to accommodate their needs. People pay lip-service to protecting the helpless, so long as it is not their income tax that is increased, or their spare time sacrificed. In this context, it is hardly surprising that doctors start to take on the colour of their surroundings.

I recently heard a case reported on the local radio of a girl who had, presumably in fear of her parents' wrath, delivered her baby head-down in a lavatory, panicked when it remained alive, and finished the job off with a series of blows to the head. Although her sentence was light, she received the full reprobation of the court, and of society through the press coverage.

Last year, I was called to a house where a "miscarriage" had occurred, to find a full term baby similarly head-down in the loo, and very dead. But in this case, no blows having been struck, there was no court case, no publicity, and only a few social workers became involved. Either of these two girls could have got her doctor to kill her baby months earlier, and they'd have been applauded for being socially responsible. Criminal act, social problem, therapeutic measure: quite why society draws such a sharp dividing line eludes me. Delinquent in ethical training, I clearly need guidance, or perhaps the truth is that society has so little idea of what it wants that it cannot pass judgment on its members and avoid the charge of hypocrisy. If it wishes to criticise doctors in the matter of ethics, I can only suggest that it has produced the doctors it deserves. ■