thinking and doing and their structure; but it is not obviously correct, as, for instance, Castañeda has argued at length in *Thinking and Doing* (1975). It is unfortunate that Aune did not discuss some of Castañeda’s arguments on this issue, explicitly and in detail. (Davis’ book suffers by his failure to consider any of *Thinking and Doing*.) In spite of my reservations on this score, Aune’s book is well worth careful study.

Readers will want to know how these books can be used in teaching. Clearly Davis’ book is intended as an introduction to theory of action. I have found it useful for this purpose, especially when supplemented by Aune’s Chapter 11. *Reason and Action* can be the basis for an excellent advanced or graduate course. It should be supplemented by parts I of Thalberg’s *Perception, Emotion, and Action* (Blackwell, 1977) in order to present a fuller account of one of the three main theories Aune considers (the “component” account of intentional action) and by some of Davidson’s essays and the essay by Romane Clark which Aune discusses. Finally, students should pursue Aune’s endorsement of Bayesian decision principles in Jeffrey or Luce and Raiffa. *Reason and Action* contains a short Bibliography in which these materials are entered.

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Purchasing a book on the basis of the title as an indication of the main focus of the book would be a mistake in the case of *Muted Consent*. One would expect a detailed discussion of the elements of consent and the kinds of cases in health care situations in which consent is required and when not. Instead, in the beginning of each chapter the reader is presented with three cases on a major topic in medical ethics which then go undiscussed. No issue is made of consent, muted or otherwise, to any extent as we are led to believe by the title of the book.

Wojcik did not intend to evaluate the cases nor the views he presents on various issues: “the book draws no conclusions of its own.” Rather he sees the book as “a primer in the language of medical ethics” (3) which presumably is intended to acquaint the novice in the field with the problem areas, and to stimulate discussion. But before it is possible to discuss the issues in a coherent and consistent manner, one must first be acquainted with possible bases for ethical decision-making, i.e., ethical theories. And in an area where consent is so crucial, even if that was not intended to be the main thrust of the book, it is nevertheless important to understand the elements involved in consent. However, none of this is included. Hence the beginner in the field has no substantial basis for discussing the problems without some guiding which the book does not provide. If *Muted Consent* is indeed a primer, the author should minimally provide some pertinent questions to consider, even though the author himself does not want to draw any conclusions.

Although the utilitarian model is alluded to in quotes from various authors, Wojcik does not commit himself to it. In fact, at one point he contrasts a utilitarian basis for a decision with an ethical one when he claims that a particular “Court’s decision is utilitarian rather than ethical...” (61). Since *Muted Consent* is intended to be a primer, that claim needs an explanation regarding what does and does not count as an ethical decision. But that is not discussed. If used in an introductory course, the book would have to be supplemented with background material before the issues presented in the book could be considered.

Some pages in Chapter 1, “Experimen-
of that concept. The closest he comes are remarks such as the following: "...true consent is devilishly hard to win;" "...the patient often does not or cannot fully understand the procedures to be tried, or the risks involved;" "the awed respect a patient has for a physician can cloud the assessment of whether the risk the physician asks the patient to take is worth it;" "The danger of manipulated consent increases even more in institutionalized settings;" and "...in non-therapeutic experiments with large numbers of subjects, the consent procedure often becomes routinized" (15). What Wojcik is apparently alluding to is that consent must be voluntary and informed, but this should be made explicit and analyzed to the degree that untutored readers can decide whether a person's consent in some particular case provides sufficient moral grounds for experimentation. Nor is the fact that a person must be competent to consent, the third element of the consent requirement, made explicit. This chapter on experimentation contains particular sections devoted to discussing fetal research. Why are there not similar sections on the problem of consent regarding prisoners, patients in mental institutions, and children as potential research subjects? A discussion of such populations would seem more pressing since those subjects are in a position to consent. Even though some reference is made to these potential subjects, one wonders why the issues in such cases are not developed to the extent that those involved in fetal research are.

While the chapters on genetic counseling and screening, behavior control, and death easily lend themselves to a discussion of consent, this is not so clearly the case regarding the chapters on abortion, allocation of scarce medical resources, and eugenic medicine of the future. The issue of consent in the chapter on abortion is clouded by the fact that Wojcik fails to distinguish between "human being" (a biological concept) and "person" (an ethical concept). Only persons—rational beings—can consent. Yet Wojcik claims that "with abortion, the problem of consent is central. The process un-therapeutically kills a form of human life incapable of consenting to its own destruction..." (51). This presupposes, and for which no argument is given, that a fetus has a right to life, a claim which Tooley has argued against in "Abortion and Infanticide" (Philosophy and Public Affairs, 2:1, 1972). Tooley's or similar positions are not mentioned, despite their importance regarding the distinction between "human being" and "person", and discussion of the basis for a right to life.

Wojcik touches on some solutions to the problem involved in allocation of scarce medical resources, but readers looking for a discussion of how consent becomes an issue will be disappointed. With all the medical ethics books appearing on the market, a detailed discussion of the complicated consent requirement and how it crops up in various problem areas of medical ethics, as the title suggests, would perhaps have been a more valuable addition to the market than just a summary of those problem areas. But as just a summary, if it is meant to stimulate discussion, it may succeed for someone already acquainted with ethical theory and decision-making, and with the elements of and problems surrounding the central concept of consent. Though there are references to various materials dealing with the issues, some major philosophical articles are not mentioned. But those that are can direct readers to more detailed discussion if they wish to pursue a particular topic.


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This text is unique among logic texts in that it is accompanied by a set of seven