
**JOURNALS IN
PHILOSOPHY AND
THEOLOGY**

Bioethics

Volume 20, Number 1
February 2006

**Addiction and Autonomy:
Can Addicted People Consent
to the Prescription of Their
Drug of Addiction?**

Bennett Foddy & Julian Savulescu

It is often claimed that the autonomy of heroin addicts is compromised when they choose between taking their drug of addiction and abstaining. This is the basis of claims that they are incompetent to give consent to be prescribed heroin. The authors reject these claims on a number of empirical and theoretical grounds. First, they argue that addicts are likely to be sober, and thus capable of rational thought, when approaching researchers to participate in research. They reject behavioral evidence purported to establish that addicts lack autonomy. The authors present an argument that extrinsic forces must be irresistible in order to make a nonautonomous choice. They argue that heroin does not present such an irresistible force. They make a case that drug-oriented desires are strong regular appetitive desires, which do not compromise consent. Finally, the authors argue that an addict's apparent desire to engage in a harmful act cannot be construed as evidence of irrational or compulsive thought. On these arguments, a sober heroin addict must be considered competent, autonomous, and capable of giving consent. More generally, any argument against legalization of drugs or supporting infringement of the liberty of those desiring

to take drugs of addiction must be based on considerations of harm and paternalism, and not on false claims that addicts lack freedom of the will.

Volume 20, Number 2
April 2006

**Genetic Ties: Are They
Morally Binding?**

Guiliana Fuscaldo

This paper examines the claim that genetic relatedness is sufficient grounds for parenthood based on a causal connection between genetic parents and their offspring. Fuscaldo argues that parental obligations are about moral and not causal responsibility, because one is not morally accountable for every consequence to which one causally contributes. The author's account includes the conditions generally held to apply to moral responsibility, i.e., freedom and foreseeability. She argues that parental responsibilities are generated whenever the birth of a child is a reasonably foreseeable consequence of voluntary actions. She considers the implications of this account for third parties involved in reproductive technologies. Finally, the author argues that under some conditions the obligations generated by freely and foreseeably causing a child to exist can be justifiably transferred to others.

Volume 20, Number 2
April 2006

**Cheap Listening? Reflections on the
Concept of Wrongful Disability**

Richard J. Hull

This paper investigates the concept of wrongful disability. The concept suggests that parents are morally obligated to prevent the genetic transmission of certain conditions and so, if they do not, any resulting disability is "wrongful." The authors argue that the idea of avoidability via substitution is both conceptually problematic and rather insensitive. Instead, they suggest that the question of whether or not bringing a particular disability about is wrongful does not hinge simply on whether or not substitution takes

place. Rather, it involves an evaluation of parental aspirations and responsibilities. They argue that the desire not to be responsible for creating challenges for others that lie outside the perceived acceptable range provides a justification for termination of pregnancy on the grounds of projected disability that neither commits one to a wrongful life claim nor requires that one substitute a nondisabled child instead.

Volume 20, Number 2
April 2006

Hastening Death and the Boundaries of the Self

Lynn A. Jansen

In end-of-life contexts, when patients are receiving “artificial” life support, judgments about when a person’s self begins and ends can become controversial. To illustrate this possibility, this paper presents a case in which a decision must be made whether to deactivate a patient’s pacemaker as a means to hasten his death. After discussing some common moral principles that are often applied to resolve ethical problems at the end of life, and after explaining why they are of no help here, Jansen argues that the correct analysis of this case, and of cases of this sort, turns on considerations that relate to the constitution of the self. These considerations, the author further argues, sometimes resist resolution. The constitution of the self is fixed in large measure by our concepts and social conventions, and these do not always provide determinate grounds for delimiting the boundaries of the self.

Christian Bioethics

Volume 12, Number 1
April 2006

Tube Feedings and Persistent Vegetative State Patients: Ordinary or Extraordinary Means?

Peter Clark, S.J.

The purpose of this article is threefold: first, to examine the medical condition of a persistent vegetative state (PVS); second, to examine and analyze the Catholic Church’s tradition on the ordinary/extraordinary means distinction; and third, to analyze the ethics behind the Pope’s recent allocution in regard to PVS patients as a matter of conscience. Rather than providing clarification, the author argues that the papal allocution has raised many difficult questions. People in situations where decisions must be made about withdrawal or [continuation of] ANH are in need of guidance. Moreover, additional analysis is needed to determine whether the papal allocution is in conflict with the traditional Catholic medical ethics understanding of the ordinary/extraordinary care distinction.

Volume 12, Number 1
April 2006

Stopping Nutrition and Hydration Technologies: A Conflict between Traditional Catholic Ethics and Church Authority

James F. Drane

This article focuses on the troubling effects of the secular values of individual freedom and autonomy and their impact on laws regarding suicide and euthanasia. The author argues that in an increasingly secularized culture, death and dying are losing their meaning and are not thought of within a moral framework. The debate regarding the provision of artificial nutrition and hydration is critically considered in light of the history of Catholic morality as well as within the modern health care context and, finally, with new insight from the recent statements made by the late Pope. Drane argues that the Pope’s

insistence on providing artificial nutrition and hydration despite irreversible persistent vegetative states is unconvincing.

Volume 12, Number 1
April 2006

**The Burdens-Benefits Ratio
Consideration for Medical
Administration of Nutrition
and Hydration to Persons in
the Persistent Vegetative State**

John C. Harvey

In this article, Harvey notes the initial confusion about the statement made by the Pope concerning artificial nutrition and hydration on patients suffering persistent vegetative states (PVS), due to misunderstanding through the translation of the Pope's words. He clarifies and assesses what was meant by the statement. He also discusses the problems of terminology concerned with the subject of PVS. Harvey concludes that the papal allocution was in line with traditional Catholic bioethics, and that while maintaining the life of a patient is favorable, in particular cases this presumption wanes when it is clear that this treatment modality would be futile or very burdensome.

Volume 12, Number 1
April 2006

**Reflections on the Papal Allocution
Concerning Care for Persistent
Vegetative State Patients**

Kevin O'Rourke, O.P.

This article critically examines the recent papal allocution on patients in a persistent vegetative state with regard to the appropriate conditions for considering "reformable statements." In the first part of the article, the purpose and meaning of the allocution are assessed. O'Rourke concludes that, given consideration of the individual patient's best interest, prolonging artificial nutrition and hydration is not in every case the best option. Although he stresses favorability for preservation of the life of the patient through artificial nutrition and hydration, costs and benefits to the patient should be weighed.

Ultimately, he argues in favor of leaving the decision to the patient, his caregivers, and others immediately involved in the case.

Volume 12, Number 1
April 2006

**Nutrition and Hydration:
An Analysis of the Recent Papal
Statement in the Light of the Roman
Catholic Bioethical Tradition**

Thomas A. Shannon

This article discusses the unexpectedly firm stance professed by John Paul II on the provision of artificial nutrition and hydration to patients who are in a persistent vegetative state, and its implications on previously held standards of judging medical treatments. The traditional ordinary/extraordinary care distinction is assessed in light of complexities of the recent allocution as well as its impact on Catholic individuals and in Catholic health-care facilities. Shannon concludes that the papal allocution implies that the average Catholic patient is incapable of making proper judgments about their own care. Shannon sees the preservation of life at all costs as at least highly troubling, if not as a radical move against the Catholic medical ethics tradition.

**Hastings Center
Report**

Volume 36, Number 1
January–February 2006

**Conservative Bioethics and
the Search for Wisdom**

Eric Cohen

"Conservative" bioethics is informed by a rich view of human personhood, a decent respect for the well-considered views of people across the political spectrum, and a philosophy of the state carefully calibrated to ensure that imperfect people can live together in community. The deepest disagreements between conservatives and

liberals are rooted in different ways of understanding the moral ideal of equality. This article explores the moral anthropology and governing philosophy that inform conservative bioethics, the practical concerns of public bioethics toward embryo research, the ethical issues surrounding the practice of assisted reproductive technologies, and the moral aspects of public bioethics.—Abstract expanded from introductory text.

Volume 36, Number 1
January–February 2006

Stem Cells: A Status Report

Stephen S. Hall

This article discusses ethical issues regarding embryonic stem cell research in the United States. It describes bioethical dilemmas associated with stem cell research and the social impact of President George W. Bush's decision to issue federal research grants only for embryonic stem cell lines that had been created up to August 9, 2001. It also discusses views of scientific experts on the clinical success of embryonic stem cells.—Abstract compiled from text of article.

Volume 36, Number 1
January–February 2006

The New Conservatives in Bioethics: Who Are They and What Do They Seek?

Ruth Macklin

A new political movement has arisen in bioethics, self-consciously distinguished from the rest of the field and characterized by a new way of writing and arguing. Unfortunately, the new method is mean-spirited, mystical, and emotional. It claims insight into ultimate truth yet disavows reason. This article offers views on the scientific and ethical perspectives of the so-called conservative movement in the field of bioethics. It draws distinctions between such movement and the proponents of mainstream bioethics; moral and social ideologies of bioethicists in the bioethics literature; and ethical notions on the use of assisted reproductive technologies.—Abstract expanded from introductory text.

Volume 36, Number 3
May–June 2006

Natural Law Judaism? The Genesis of Bioethics in Hans Jonas, Leo Strauss, and Leon Kass

Lawrence Vogel

The author discusses the genesis of bioethics in the work of Leon Kass, which is based on the teachings of Hans Jonas and Leo Strauss. Kass is much misunderstood. He is not simply a Republican ideologue who tailored his ideas to break out of the ivory tower and into the halls of power. Nor does he look simply to use human nature as a moral guide. When the full range of his writings is considered and set in the tradition of his teachers, a natural-law position colored by religious revelation emerges.—Abstract expanded from introductory text.

**Journal of
Medical Ethics**

Volume 32, Number 8
August 2006

Perceptions of Patients on the Utility or Futility of End-of-Life Treatment

K. L. Rodriguez and A. J. Young

Definitions of medical futility, offered by health-care professionals, bioethicists, and other experts, have been rigorously debated by many investigators, but the perceptions of patients of futility have been explored by only a few. In this study, patients were allowed to discuss their concerns about end-of-life care, so that their ideas about treatment futility or utility could be extrapolated by the authors. The following four factors were taken into account by the participants when discussing end-of-life interventions and outcomes: (1) expected quality of life, (2) emotional and financial costs of treatment, (3) likelihood of treatment success, and (4) expected effect on longevity. The authors determined that it may be fruitful for providers to focus on these concerns when discussing end-of-life treatment options with their patients.

**Journal of the Society
of Christian Ethics**

Volume 26, Number 2
2006

**A Burden of Means: Interpreting
Recent Catholic Magisterial
Teaching on End-of-Life Issues**

James T. Bretzke, S.J.

This essay first presents general guidelines for interpreting magisterial documents using *Lumen gentium*'s triple criteria of considering the character, manner, and fre-

quency of magisterial teaching in order to better determine its relative authority and weight. Next, these criteria are applied to a close reading of John Paul II's various documents that deal with end-of-life issues, especially his controversial March 2004 address to participants in the International Congress on Life-Sustaining Treatments and Vegetative State: Scientific Advances and Ethical Dilemmas. This analysis concludes that the Pope did *not* in fact assert that artificial hydration and nutrition had to be used in virtually every medical case, such as patients diagnosed to be in a persistent vegetative state.