

Book Reviews

Health Care for Children: What's Right, What's Wrong, What's Next

Ruth E. K. Stein, ed., *United Hospital Fund*,
New York City, 1997, 416 pp., \$40

THE UNITED STATES IS THE ONLY NATION in the Western world that fails to guarantee universal health coverage to its children and adolescents. In this ambitious book, experts in pediatrics, public health and health policy analyze current U.S. practices and policies in children's healthcare and conclude that significant changes are required to ensure children receive the care they need.

In the first chapter, the book's editor highlights the following: 10 million, almost 14 percent, of U.S. children are uninsured; 35 percent are uninsured for at least part of the year; almost two thirds of uninsured children live in families in which the head of the household is employed all year; and 23.5 percent of children are covered by Medicaid, but 4 percent lose their eligibility each month.

Health Care for Children is organized into four sections. The first discusses how healthy U.S. children are under our current healthcare delivery system. Research demonstrates that a strong relationship exists between income and child health and that poor, minority, and uninsured children fare consistently worse than non-poor, white, and insured children in access to primary care.

The organization of children's health services is the topic of section two, which reviews the historical development of the public sector, dealing with the health of populations, and the private sector, focusing on the individual patient or family base. Case histories highlight the complexities, frustrations, and difficulties in utilizing the patchwork of services and programs currently available.

The third section focuses on managed

care as a rapidly growing, potent force in children's healthcare. Although an estimated 16.7 million children, 22 percent of Americans under age 20, were enrolled in HMOs in 1994, little is known about managed care's impact on children, especially adolescents, children living in poverty, and those with chronic conditions whose consumption of resources (dollars) is higher. Two controversial issues involve the lack of incentives for managed care plans (1) to enroll children with costly or special healthcare needs or (2) to invest in programs with no promise of financial return (e.g., assisting children with learning disabilities). Children's needs will continue to be incompletely met as long as incentives

among all stakeholders are misaligned.

The final section evaluates possibilities available in systems of care for children in the future, citing examples of successes with redesign in Oregon, Massachusetts, Maine, Illinois, New Hampshire, Wisconsin, Minnesota, Rhode Island, Ohio, and Arizona.

In the concluding chapter, Stein articulates and supports her clear agenda on behalf of children. This agenda is built on five principles: a child-specific standard of care; the appropriate alignment of incentives for healthcare providers; universal coverage; strengthened community health functions; and investments in appropriate research, education, and data systems. She acknowl-

BOOK BRIEFS

Integrating the Practice of Medicine: A Decision Maker's Guide to Organizing and Managing Physician Services

Ronald B. Conners, PhD, ed.,
American Hospital Publishing Inc.,
Chicago, 1997, 469 pp., \$39, AHA
members; \$49, nonmembers

This interdisciplinary guide explains the complex structural changes going on in the physician practice industry and explores contemporary issues in physician practice management. The reference was designed as a comprehensive yet practical tool for healthcare executives, practice management executives, and students of healthcare administration. It explains essential methods of delivering physician services and provides physician-hospital integration models. Nearly 30 experts in accounting, health administration, law, and economics are contributors, including Russell C. Coile Jr., David W. Emmons, Eli Ginzberg, and Uwe E. Reinhardt.

BOOKS RECEIVED

Change Drivers: Information Systems for Managed Care, Roy Ziegler, ed., American Hospital Publishing, Inc., Chicago, 1998

Dying Well: Peace and Possibilities at the End of Life, Ira Byock, MD, Riverhead Books, New York City, 1997

The Foundations of Integrated Care: Facing the Challenges of Change, Marjorie A. Satinsky, American Hospital Publishing, Inc., Chicago, 1998

Guide to Managed Care Strategies 1998: An Annual Report on the Latest Practices and Policies in the New Managed Care Environment, Joseph Burns and Martin Sipkoff, Faulkner & Gray, New York City, 1997

Health Care Ethics: Critical Issues for the 21st Century, John F. Monagle and David C. Thomasma, Aspen Publishers, Inc., Gaithersburg, MD, 1998

edges that one cannot escape political reality in the United States. However, she says, "even a portion of the child health agenda articulated in this book will make a tangible difference in the lives of millions of children throughout the country."

This book can be a valuable resource for a large audience, especially legislators, advocates, healthcare providers, and employees of government agencies and managed care organizations. Parents of children with special needs and educators will benefit from the authors' insights. Those concerned about our society's commitment to our children's health need to understand current issues. This book helps address this need in a thorough, comprehensible manner.

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Human Genome Research and the Challenge of Contingent Future Persons

Jan Christian Heller

*Creighton University Press, Omaha, NE, 1996,
182 pp., \$24.95*

IF YOU ARE CONCERNED ABOUT THE ethical issues arising from the type of person who will be generated in the future, this is the book for you. Heller clearly foretells the effect of the Human Genome Project (HGP) on future human beings and explains the ethical theories that might serve as future signposts regarding the basic treatment of "future contingent people."

Why is the effect of the HGP on future people important? The author explains that "some far-reaching actions

are judged to have morally significant effects upon future persons . . ." For example, as a result of the HGP, it may be possible to eliminate Tay-Sachs disease. Is this a benefit for a person who might exist in the future? As Heller notes, "Of course, the more we project the effect of our actions into the future, the more difficult it is to predict them. But insofar as our actions can be judged to hold significant benefits, costs, or risks for future people, we are rightly concerned with the effects of the actions on them" (p. 9).

The book "attempts to address a two-pronged problem relative to human genome research and future generations." It investigates how the HGP is likely to affect future generations, and it asks what implications these effects hold for evaluating HGP and other research efforts like it, particularly from a theological perspective. Most of the study of the HGP's effects is provided in Chapter 3, "Diagnostic and Therapeutic Applications of the HGP." The concern that most of the expense of HGP will be borne by generations that do not realize its benefits is also pointed out. However, the U.S. Congress, which finances the greater part of the HGP, hopes that applied technologies will spin off from the project and that biomedical technologies will lead to the detection, prevention, and treatment of thousands of genetic diseases and disorders. In a sense, then, altruism is essential for appreciating the HGP.

This work is replete with predictions concerning the results, burdens, and benefits of the HGP. Predictions are seldom accurate as far as major and minor details are concerned. Thus, while the concern of the study is valid as an ethical issue, the various details set forth as the result of the HGP may prove in the future to be ambiguous or even erroneous.

One predicted outcome of the HGP that seems to be valid and worth repeating is the lapse that will occur between detection and diagnosis of genetic

anomalies and the ability to provide improved treatment, prevention, and ultimate care (p. 51). What the author admits in regard to analyzing the approach to values, which will serve as a basis for ethical evaluation, is true of the rest of the book as well: "We are working on very high levels of abstraction." Thus the book will be an excellent challenge for the professional theologian, but for the healthcare professional interested in ethical issues, it seems that a further simplification of the entire matter is needed in the form of articles summarizing the main considerations.

Although the theological answers to the questions giving rise to the study are not set forth definitively, it is clear that the author relies on James Gustafson and Rev. Richard McCormick for a basis of his thought. In commenting on the Roman Catholic Church's evaluation of the preembryo, it is simply erroneous to state that it "results from a physicalist interpretation of the natural law." Moreover, the theologian who does not agree with Fr. McCormick when he states there is such a thing as a preembryo is not necessarily "more conservative" (p. 124), nor does the rejection of proportionalism by Catholic theologians follow from a conservative stance in regard to moral theology. Rather, it follows from the scriptural teaching that no one may do evil to achieve good.

This is an original and probing study of a significant issue, stimulating questions most of us have never considered. It aptly fulfills the goal the author had in mind: to explain how the HGP is likely to affect future generations both positively and negatively and to consider ways to evaluate its far-reaching effects (p. 3).

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