

Fitzgerald offers interesting examples to bolster his case, his line of argument is unconvincing. For example, he notes that the autonomy of employers or insurers seeking a patient's medical information is in ethical conflict with the autonomy of the patient who wants to keep it private. Because the principle of autonomy seems to support both claims, he argues that autonomy cannot be the justification for protecting patient privacy. But surely my autonomy with regard to controlling my own medical information has a different moral status from that of a person or organization wishing to have access to my information, for whatever purpose.

In actuality, Boleyn-Fitzgerald's defense of equality as the basic ethical principle is really a defense based on nonmaleficence (do not harm). For he concludes: "Respecting privacy contributes to a safe space for patients. A patient need not worry that seeing a doctor *will result in harm* to their personal relationships, a loss of insurance, or denial of a career opportunity" (p. 65, emphasis added).

Both Korn's and Boleyn-Fitzgerald's essays raise questions that need to be responded to. The volume as a whole would be stronger if the various authors had engaged each other's ideas more directly. While Korn advocates placing fewer restrictions on the use of medical data, and Bill Allen and Ray Moseley propose more restrictions, Korn's discussion focuses on the context of medical research, whereas Allen and Moseley are concerned about the privacy of genetic tests in relation to health insurance. Hence these two essays do not really engage each other.

Similarly, authors take positions on such debatable topics as whether genetic information should be protected more stringently than other medical information, and what should be the relationship between federal and state privacy laws (i.e., whether federal laws should

preempt state laws). But the debate on these topics is not really engaged by the authors, and their arguments seem to miss each other.

No one except the editor, in his postscript, addresses the interesting issue of the penalties for violation of laws and regulations on medical privacy. From the perspective of a health care organization, the penalties imposed may seem very onerous. Yet as the editor notes, they are not nearly severe enough to deter truly malicious or criminal invasions of medical records by hackers, for example. This aspect of the federal regulations has been overlooked by most commentators, including the other authors in this book.

The volume has several helpful fea-

tures to assist the reader. Each essay is preceded by a carefully written abstract of the essay. Thus the reader can use the abstracts to decide which essays to read in their entirety. The index is detailed and helpful. The postscript on the Final Rule, added in view of significant changes that were made to the proposed regulations, is crucial to understanding the current state of affairs in federal privacy regulation, as well as to understanding the other essays in the book.

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The Health Care Professional and Healer: Building on the Work of Edmund D. Pellegrino

David C. Thomasma and Judith Lee Kissell,
eds.

Georgetown University Press, Washington, DC,
2000, 320 pp., \$65 (hardcover), \$24.95 (paper-
back)

HAVING REACHED THE ENVIABLE AGE OF fourscore years, Edmund D. Pellegrino, MD, might have relegated himself to his dusty shelves of trophies and accolades and enjoyed his just rewards. Instead, this titan of medical, philosophic, and ethical thinking has continued his campaign against the contemporary tendency (misguided in his view) to turn the traditional physician into a positivistic technocrat—*sans* empathy, compassion and humanity.

David Thomasma, MD, and Judith Kissell, PhD, editors of the book under review here, have undertaken to build on Dr. Pellegrino's tenets and principles. They note in the preface that contributors were invited to consider the wide-ranging field of Dr. Pellegrino's interests and to describe the way his ideas have

influenced their own thinking. The editors seemingly searched the capacious mysteries of Mount Etna and, from the 100 hands of the mythological Enceladus buried beneath it, chose 22 candidates from a variety of disciplines and asked them to expound on the myriad expressions, themes, and publications of this prolific academician.

Let me emphatically state that this book is not a Festschrift in his honor. Nor is it an eclat or an assemblage panegyric. Indeed, the book is none of these, but rather a recognition of Dr. Pellegrino's prominence in health care as a role model, friend, and healer. Still, in spite of the honorific disinclination, the contributor listing is a subtly encomiastic tribute in itself.

My own background—first as a pediatrician for 38 years serving the tiny and helpless and, more recently, as a clinical bioethicist—gives me a certain perspective in these matters. I have witnessed the extraordinary transformation of the clas-

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sical physician, a friendly champion of God's sick and helpless, into the more distant, less empathetic clinician I find among my peers in today's medical arena. This is a splendid volume of differing approaches to Dr. Pellegrino's vast and influential outpouring—some of it directed to the demise of the traditional "MD" of years gone by.

I first met Dr. Pellegrino in November 1986. He had been invited to speak to the staff of St. Joseph's Hospital, Savannah, GA. He immediately captured his audience's attention by noting that decision making is much easier—and much less scary—in the classroom than it is at a patient's bedside. His presentation of what he sees as the imminent collision of morality in medicine with the rising griffin of the mechanical, technological patient-care syndrome made a tremendous impact on his listeners. The fear he expressed that day—that faith and medicine would travel increasingly separate roads—was prescient indeed.

Gotthold Lessing, an Enlightenment philosopher, wrote that "if God held all truth in his right hand and persistent striving for that truth in his left and said, 'choose'. . . ?" Many of the authors in this volume would perhaps agree that Dr. Pellegrino, if offered the same choice, would choose the left hand without regrets.

These essays are presented in four sections. Each is succinct, and their consistent brevity makes this a comfortable "read," a book that one can easily set aside and then retrieve at the next free moment. The volume has an unstated but strong general theme to which each of the authors then adapts his or her own views.

The introductory commentary describes the role Dr. Pellegrino has played in contemporary medicine—as an exemplar of that significant word *trust*, in both senses of the word, noun and verb. The writer of the introduction notes that a moral community built on trust must look to a truly common good. Sub-

sequent essays then develop the many issues raised by the theme of physician-patient trust.

Part I of the book addresses the nature of the health care professional, exploring the traditional physician-patient relationship in depth. Physicians initially established their own code of ethics and expelled members who transgressed. This was the basis of physician autonomy. A certain ennobling as a moral agent marked the rite of passage in which a new member joined the physicians' peer group. In those days, a patient was understood to be a person suffering from some sort of illness. The patient's existential status demanded privacy and response from the physician. Treatment was a mutual patient-physician endeavor to achieve a "right and good action." The relationship of physician to patient was beneficent. The classical ideal was for the physician to be the patient's friend.

Part II of the book contains an excellent description of ethical nursing comportment. The authors of these essays, first, explore the necessity of engendering trust in a pluralistic society and, second, conduct a penetrating search for the internal and external sources of morality in medicine. One provocative essay considers the role of umbrage in physicians' denial of treatment failure. Another assesses physicians' moral courage vis-à-vis the multiple changes in U.S. health care over several centuries. An essay on the principle of physician domination offers a superb examination of the responsibilities involved in the practice of medicine—and may be summed up by Psalm 8:5: "You have set us over the work of your hands. . . ." The conclusion reached by the writer of an essay on organizational ethics and its pertinence to medicine is akin to Dr. Pellegrino's well-known rejection of the idea that a physician can ever be both a healer and a killer.

Part III offers eight essays on current challenges in reproductive technologies. This is not the stuff of scandal-sheet sen-

BOOKS RECEIVED

The Art of Being a Healing Presence: A Guide for Those in Caring Relationships, James E. Miller and Susan C. Cutshall, Willowgreen Publishing, Fort Wayne, IN, 2001.

sationalism. Included here are a moralistic piece that asks where these developing technologies are likely to take us; a praxologic "interpretative probe" into human nonsubject research (which I read twice); and an intriguing, asseverative consideration of the healing role played by philosophic hermeneutics.

Part IV explores the role of ethics in medical history and their likely role in the future. This section, although the briefest, is full of sparkling prose on society's continuing need for perspicuous humanities programs.

Although this volume is perforce not a tribute to Dr. Pellegrino, these distinguished contributors have nobly met the editorial request to follow in his footsteps. As Horace puts it in his *Epistles*:

Good Athens gave "his" art another theme
To sort what is from what might merely seem
And search for truth in groves of Academe²

I believe the reader will find this book a profitable and fulfilling armchair companion. *Ad multos annos*, Dr. Pellegrino.

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NOTES

1. Felipe Fernandez-Armesto, preface to *Truth*, St. Martin's Press, New York City, 1999, p. vii.
2. Felipe Fernandez-Armesto, p. xiii.