

3. Deshpande Shirish V: Are doctors really in the dock? *Bombay Times* 22 November 1995, p 4.
4. Vembuswami N: The Consumer Protection Act. Letter to the editor. *The Hindu* (Delhi edition). 5 December 1995, p 8.
5. Easwaran AN: Accountability of doctors. *The Hindu* (Delhi edition). 2 December 1995, p 8.
6. Chand Sumer: Doctors in business. In & an' *Express* 2 December 1995, p 8.
7. Lambay Habiba: Doctors at bay. (Letter to the editor) *The Times of India* (Bombay edition). 1 December 1995, p 6.
8. Staff Reporter: Lawyers, doctors dissect Consumer Act. *The Pioneer* (New Delhi). 2 December 1995, p 1.
9. Kaw Sanjay: Therapist insists on being 'Dr.' *Delhi Times*. 27 October 1995, p 1.
10. Anonymous: Rioting charge against 3 Lohia docs. *Evening News - The Hindustan Times*, New Delhi. 5 December 1995, p 1.
11. Anonymous: Silent saviours. *Indian Express* 2 November 1995, p 3.
12. Karkaria B: AIDS control programme - hurtling down path to disaster. *Times of India* 11 November 1995, p 12.
13. Ghosh Goutam: Pray that it be right. *The Hindu Magazine* 30 July 1995, p IV.
14. Anonymous: Cruel health support. The Guardian, London. Reproduced in *The Times of India* Bombay edition. 17 August 1995, p 12.
15. Chinai Rupa: HIV infected patients were used in secret vaccine trial. *The Times of India* Bombay edition. 6 September 1995, p 1, 5.

## FROM OTHER JOURNALS

### *Women's rights related to local culture'*

16,291 women, representing 189 countries registered for the Fourth World Conference on Women in Beijing. Many advocated using the term 'human rights' instead of women's rights but details emerging from discussions showed that these depend on local cultures, religions and ethnic preferences. These preclude a general agreement even in areas such as sexual rights and reproductive rights.

All countries expressing formal reservations were dominantly Catholic or Muslim. Religious conviction led them to question extra-marital sex, contraception and abortion.

It is perhaps time to recognise that neither reasoned argument nor belief in universal values necessarily precede consistent choices amongst the world's people.

### *Disadvantage of multi-centre clinical research*<sup>2</sup>

The advantages of such research are often balanced with extra difficulties in negotiating access to the research subjects. Researchers, their secretaries, nurses and others may make such access difficult, time consuming or even impossible.

It is necessary to build into the project cost-effective measures permitting frequent personal contacts with each centre, time to negotiate access to subjects and ensuring that delays in reaching them are kept at a minimum.

### *The rights of the aged*<sup>3</sup>

Attention is now being focussed on the rights of the heterogeneous group forming the frail, aged population, each of whom constitutes the 'individual in a communal setting'. In addition to her right to information, there must be con-

sultation and participation undiminished by her frailty. In discussing this theme, Diane Gibson touches upon important concepts such as what distinguished a right from a duty or the implications of constructing values in terms of rights.

She also discusses mechanisms for ensuring that such rights are catered to even when the personal care assistant has been annoyed by the justified complaints of an individual. In a touching incident she highlights the plight of these defenseless persons. "As I entered a room where a (frail, aged) resident lay moaning loudly, a staff member followed immediately on my heels. The resident looked up at us as we entered and cried, 'No, no. Please don't hit me.'"

She also pleads for discussion on the management of certain categories. Take for example an 82 year old person who has dementia but shows an intense dislike of restraint. If left alone, she tends to fall and has already hurt herself twice. She has a clear desire for freedom of movement but needs protection so that she doesn't break her bones. Who is to decide upon the extent to which her mobility should be facilitated without hurt and what are the means for doing so?

### *Two ethical debates*<sup>4,5</sup>

Fetal genetic testing for an incurable disease such as cardiomyopathy and the treatment of those attempting suicide are discussed in the section entitled 'Ethical debate'. After reading the case story of the family with cardiomyopathy, we are provided three opinions on whether such tests are helpful, the ethical issues involved and the steps towards adaptation to the diagnosis that are made possible by knowledge of the diagnosis and consequent risks. Finally we read the patient's comment.

As regards patients who have attempted suicide, the discussion focusses on the person's right to refuse treatment, which patients should be allowed to die and whether suicide is different from a terminally ill individual's decision not to prolong life. The reasons commonly offered for treating those attempting suicide are the assumption that they suffer from mental depression, are pleading for help when attempting suicide and may, eventually be grateful that their lives were saved. Among the issues discussed is what makes a choice rational and the importance of religious and cultural beliefs.

### *1994's most bizarre suicide*<sup>6</sup>

This fascinating incident must be read in the original.

### *References*

1. Kerin Jacinta: Reproductive rights for women remain culturally relative. *Monash Bioethics Review* 1995; 14: 1-3.
2. Alderson P, Madden M, Oakley A, Wilkins R: Access and multi-centre research. *Monash Bioethics Review* 1995; 14: Ethics Committees Supplement 18-22.
3. Gibson Diane: User rights and the frail aged. *Monash Bioethics Review* 1995; 14: 16-25.
4. Ryan MP, French J, Al-Mahdawi S, Nihoyannopolous P, Cleland JGF, Oakley CM: An ethical debate: genetic testing for familial hypertrophic cardiomyopathy in newborn infants. *Monash Bioethics Review* 1995; 14: 26-33.
5. Savulescu J: Should all patients who attempt suicide be treated? *Monash Bioethics Review* 1995; 14: 33-40.
6. Anonymous: From the Internet: 1994's most bizarre suicide. *Monash Bioethics Review* 1995; 14: 46.