BOOK REVIEWS

At last – a home grown ethics text!

SUNIL K PANDYA

Olinda Timms, *Biomedical ethics*. New Delhi: Reed Elsevier India, 2016, Paperback, 407 pages, ₹ 400.00, ISBN978-81-312-4415.9

At long last we have a homegrown text on biomedical ethics that we can be proud of, and recommend to teachers and students alike.

Dr Timms is a consultant anaesthetist in Bangalore. Graduation from the Christian Medical College, Vellore in 1984 and postgraduate study there up to 1986 must have sensitised her to ethical medical practices. Dr Ida S Scudder has left behind so much that we need to be grateful for!

Dr Timms went on to study medical law and ethics at the National Law School of India University in Bangalore (2009–10) and to train in bioethics under the ICMR – NIH modules in 2011–12. Among her many educational activities is her work as adjunct assistant professor in the Health and Humanities Division at St John's National Academy of Health Sciences, Bangalore. She joins Dr Manjulika Vaz and Dr Mario Vaz as an important member of their team. Fittingly, she is also adjunct faculty on research ethics at her *alma mater* in Vellore. Among her other interests is the collection of bells, especially those with pure ring tones. She had 257 of them at last count.

In keeping with the lesson she learnt from Dr Tony Hope at the ETHOX Centre at Oxford, UK, she has laboured to prepare a text that will help its readers to reason about ethical dilemmas, recognise factors that inhibit ethical behaviour and remain cognizant of principles that can help them make ethical decisions.

She sets the tone in her first sentence in the preface itself. "The term *Biomedical ethics* appears self-explanatory, but in reality is an extraordinary confluence of philosophy, tradition, practice and contextual beliefs."At all times, she keeps the Indian context central to her themes. She addresses the issue of whether ethics is best "caught" or "taught" and has adopted "a non-didactic approach using case scenarios and models from real life." These are to be found in each chapter

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and have proven very effective indeed. At times she prefers not to offer her solutions to problems she poses, preferring to let her readers put on their thinking caps and use the text provided by her to arrive at their own answers. She agrees with *vox intellectualis* that training in ethics is most effective when imparted during the early, formative years, before the *chordae tendinae* have ossified. We can only utter "Amen" to her last sentence in the preface: "If we are to reclaim the trust and respect of patients, it is clear that ethics must remain at the heart of medical training and practice, where it belongs."

Each chapter starts with an apt quotation relevant to the topic to be considered. The outline of the chapter, provided in the form of headings, is followed by objectives of what is to be learnt from it. A case study starts the ball rolling. Each heading listed in the outline is then expanded into detailed text with subheadings, where required. At the end of the chapter, there is a panel returning to the case described at the start and provides points for discussion. A list of relevant references brings the chapter to a close.

In the early chapters, we find erudite and logical enunciations of the principles of medical ethics, the various codes pronounced by grey eminences such as Charaka and Hippocrates and by bodies such as the World Medical Association and the Indian Medical Council. The code of the Indian Medical Council has been reproduced extensively.

Chapters 4–7 deal with the doctor–patient relationship, ethics at the beginning and end of life and the principles governing the conduct of medical research. Chapter 13 discusses the rights and wrongs of publication of the fruit of research.

In Chapters 8 and 9, Dr Timms discusses ethical concerns in emerging technologies and donation of organs for transplantation.

Chapter 10 on public health concentrates on epidemiology, problems related to the care of patients with leprosy, infection by HIV and those with full-blown AIDS. The need for greater effort to promote hygiene and nutrition, especially among the poor is dealt with in some detail. Among the dilemmas considered here are whether there are limits to individual autonomy and whether a patient can refuse to be immunised. She also discusses the care of patients who, through their wanton behaviour, have brought illnesses upon themselves as by addiction to alcohol and drugs. She touches briefly on how scarce resources should be allocated so as to effect the maximum benefit.

Medical errors and negligence (Chapter 11) and the interactions between medical professionals and society at large (Chapter 12) also offer much food for thought. Dr Timms rightly emphasises the goodwill in most patients and families that allow them to forgive an error provided the doctor has shown sustained interest in the welfare of the patient, done all in his power to help and unwearyingly discussed the progress or deterioration of the patient's clinical state at every stage. In the latter chapters, the section on why a student should choose to be a doctor is especially helpful. She highlights the need for assessing in all applicants for admission to medical colleges the urge to choose medicine as a vocation. Her concern over the overpowering competition when attempting postgraduate studies is well-placed. I found her unequivocal statement "(doctors) resorting to strikes is unethical" encouraging despite my awareness of views to the contrary often expressed by students and resident doctors. The innumerable poor patients who suffer and the inevitable deaths of some of them as a consequence of the strikes cannot be justified by any logic.

Appendix A at the end of the book provides details on declarations and amendments by the Medical Council of India, the World Medical Association, the Medical Termination of Pregnancy Act 1971, and the Nuremberg Code. Appendix B describes an integrated approach to the teaching of medical ethics using this book to start off the process. Appendix C provides a chapter-wise guide to further reading for those wishing to pursue subjects discussed in them in further detail. An index brings the book to a close.

For far too long have we depended on western texts on biomedical ethics. Admirable though these are, their primary concerns are practices and events in America and Europe. Dr Timms ends our tortured wait for a text addressing our concerns, albeit in the context of universal ethics.

Small enough to fit in the pocket of your hospital coat, but rich enough to bring you wisdom, ideals and principles that will serve you well; this is a book strongly to be commended.

Seeking to correct the psychiatric perspective

R SRIVATSAN

Peter Gøtzsche. *Deadly psychiatry and organized denial*, Copenhagen: People's Press, 2015. Rs 1720 (Kindle edition), ISBN: 978-87-7159-623-6

The book under review provides a detailed criticism of the contemporary practice of psychiatry. It documents the unparalleled extent of the use of psychotropic drugs, their unacceptable risk, the irrational disease categories, and the lack of a proper evidence base. It traces meticulously the different ways in which the pharmaceutical industry influences professional guidelines through money, prestige, and scientifically corrupt means. This review provides an overview of the book's arguments and recommendations and concludes with a comment on its scope and limitations.

Gøtzsche calls the professional leaders of psychiatry "silverbacks" (the term comes from the alpha male in a gorilla pack). He argues that the silverbacks' authority in psychiatry makes the profession deadly for patients. Silverbacks also deny

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and defend through other means any critical examination of the profession's structure, practice, and ethics.

In a key criticism of the Diagnostic and Statistical Manual (DSM) series, Gøtzsche argues that the DSMs have given up any analytical understanding of psychiatric illnesses and propose treatment using a symptom count. While this may be psychiatry's salutary admission of its ignorance of psychopathology, the DSM philosophy functions in the twin fields of psychiatric biomedicine and pharmaceutical pressure. Gøtzsche argues that such a configuration facilitates overdiagnosis, the pathologisation of everyday normal conduct and disease mongering.

The author, being one of the key figures in the evidence-based medicine (EBM) movement, argues that drug development in psychiatry routinely does not meet the minimal requirements of EBM. The data is selectively represented, statistics wrongly interpreted, and the marketing of the drugs is based on misinformation.

Dealing with different psychiatric "illnesses" like depression, anxiety, attention-deficit hyperactivity disorder (ADHD), and schizophrenia, Gøtzsche undertakes a detailed examination of the evidence, published clinical trial outcomes, and critical analyses of the conclusions. He argues at length how dangerous psychotropic drugs used for these diseases are.

Gøtzsche argues that in nearly every case, psychotherapy has proven to be consistently better in its outcomes than