

# *Medical Humanities Report*

---

## **Twenty Years of Medical Ethics: an Interview with Dr. Martin Benjamin by Scot D. Yoder**

*In 1975 the first undergraduate course in health care ethics offered at Michigan State University was taught by the Philosophy Department. Since that time, the course has remained one of the most popular and highly respected courses on campus. In recognition of the 20th anniversary MHR asked Dr. Martin Benjamin who developed and taught the first course to reflect on the origins of the course, where it's at now, and what he sees for it in the future.*

*MHR: How did you get started teaching this course?*

**MB:** In 1973 a notice came out from the Council of Philosophical Studies. They were sponsoring a six-week summer institute on moral problems in medicine. They sponsored institutes on a variety of topics. The director was going to be Sam Gorovitz, and the faculty was going to include Dan Callahan, Bob Veatch, Bernard Williams, William Frankena, Judith Thompson, Robert Nozick, John Ladd, Charles Fried, and others who I can't remember at the moment. Now, in order to apply I had to get a letter from the department chair and the dean each of whom said that if I get this grant and go to this then, when I come back they would let me field test or pilot a course on moral problems in medicine.

*MHR: There had been nothing like that prior to this point?*

**MB:** Nothing like that. Nothing like that before. So I applied, got some recommendations, and was one of 50 people who were accepted. It was wonderful. The Rockefeller Brothers Fund paid for transportation, they paid for room and lodging, and they paid part of it for my wife and kids. We went and had a wonderful time at Haverford College.

I mentioned who the faculty were, there were more people than that -- Willard Gaylin was also on the faculty. But among the fifty participants who were people for whom the area was all new were people like Bill Ruddick, Tom Beauchamp, Howard Goldman, Ron Carson, Glenn Graber. These are all people who have done a lot since, Stuart Spicker, a whole bunch of people -- Don Vandever -- a whole bunch of people who have done an enormous amount of work since then.

*MHR: Then this was not something the university asked you to pursue. It was your initiative and the university agreed to it?*

**MB:** They said, if they give you this grant and a condition of the grant is that when you get back you have to try out a course in

(Continued on page 2)

## Benjamin (cont.)

---

moral problems in medicine, we'll let you do it. So I went and had a wonderful time. I learned a lot. We worked real hard -- five days a week for six weeks during the summer of 1974.

I came back and scheduled the course. We scheduled the course under some open number -- 390 or 290, something like that -- we had an open number called "Special Topics." Then we put out fliers because we couldn't list it, it wasn't in the catalogue. [The flier said,] we're going to do this course on moral problems

charged. I was pumped up, the students were pumped up. We had a wonderful time. Howard did a great job. Howard helped me out. Howard was my teacher as well as my student, helping me on medicine. I think I used Paul Ramsey's book The Patient as Person. I think The Hastings Center, at that time, was starting to put out some reprints of various articles. We xeroxed some things up from the Hastings Center, case studies.

*MHR: So the first course was very much an experiment for you?*

**MB:** Oh yeah, I was interested in it and I thought it was surefire material, and it was not all that radically new for me in the following sense. I came here to teach a course called moral and political issues.

---

---

*It's the only course we have that we know of where so far the demand has been inexhaustible.*

---

---

in medicine. We had 120 people show up. We taught it in a big room in the Union, and my teaching assistant for that 120 students was Howard Brody who was at that time a graduate student in philosophy and a medical student. And so we did this one semester course -- it was a very good, interesting and exciting course and we had a great time.

*MHR: Why do you think you got 120 students? What was happening in 1974 to spark that kind of interest?*

**MB:** I don't know. I have no idea. I can't say for sure. There was a pent up demand for this, but I don't know why.

*MHR: That would have been prior to the Karen Quinlan case which received so much publicity.*

**MB:** Yes, yes. We had a lot of pre-medical students -- bright, good -- it was a great class. It was one of the few classes that I've done here where I got applause at the end of it, on the last day. So it was exciting. I was really

Before I started here I taught a course at the University of Miami of Ohio in the late 60's that dealt with civil disobedience, war and morality, and so on. So I saw this as just an extension of that. I had never done it with this big of group. I had always done it with 35 students. Never had a group as big as this, but I took the leap.

You might want to take a look at an article I may have mentioned, by Peter Singer called, "Philosophers are Back on the Job." That tells my story and that of a lot of my friends. It talks about those philosophers who wrote about war and morality, and Rawls, and civil disobedi-

**Medical Humanities Report, Vol. 18, number 1, Winter 1995**

The Medical Humanities Report is published quarterly by the Center for Ethics and Humanities in the Life Sciences at Michigan State University. The Center is an academic unit whose faculty teach in the medical, nursing and veterinary colleges, as well as in Arts and Letters.  
Editor: S.D. Yoder, M.A.  
Center Director: H. Brody, M.D., Ph.D.

ence and free speech, and when those issues wound down they went to medical ethics.

*MHR: Which has not wound down.*

**MB:** Which has not wound down, and there are no signs that it will in my lifetime.

*MHR: Has the course been taught regularly since 1975?*

**MB:** Yes, yes at least one section.

*MHR: Has it continued to have such strong enrollment?*

**MB:** It is our strongest course. Peter Asquith says it's the only course such that if he adds another section without putting it in the book or catalogue, it immediately fills up. If we got the money to lay out a new section for the Spring, hired Yoder to teach it, he says he has no doubts that it would fill up. He's done this. It's the only course we have that we know of where so far the demand has been inexhaustible.

*MHR: To what do you attribute that?*

**MB:** Well, for some students its professional education.

I had a very bright student in this week (who is in my class now) who told me he had his medical interview with the College of Human Medicine on Friday. They talked about the stuff in this course. So a lot of premed students who have interviews and are real savvy, will take the course. The other reason is that it's real interesting, and I think we do a good job of teaching it. A lot of it is word of mouth. People hear that its a real good course and it is.

It's a pretty interesting subject. I mean, I think it's at the cutting edge of philosophy. I think a lot of these things are among the most interesting philosophical questions that there are. If Descartes was around now, he'd be doing

medical ethics. These are real genuine philosophical problems, the kind that the great philosophers wrestle with. How as a just society do we allocate resources? When is a person dead? What is a person?

I think it's a metaphysical paradigm shift to go from the concept of person to the concept of human being. I've got to tell you, I got a call from the Journal of American Medical Association yesterday wanting me to review an article on personhood and medicine. This question of personhood is a metaphysical question and medicine is pushing it. It's interesting philosophy.

*MHR: And for the non-philosopher?*

**MB:** It's accessible. You can show them what philosophy is and why it's interesting.

*MHR: What is the challenge? You've got*

---

---

*I think it's at the cutting edge of philosophy. I think a lot of these things are among the most interesting philosophical questions that there are. If Descartes was around now, he'd be doing medical ethics.*

---

---

*interesting subject matter and motivated students.*

**MB:** Yes. Bright students. Bright students too. They're a little skeptical. They don't realize yet that even though this isn't science it still has to be precise and rigorous. But science and scientific training gives them the capacity for abstraction and the appreciation of discipline and rigor. It takes a little work to show them that it's applicable here as well, but they're among the best students in the university.

*MHR: Then you've got everything. Good subject matter, good students, full enrollments.*

**MB:** Yes, yes. The subject matter, it

(Continued on page 4)

## Benjamin (cont.)

---

teaches itself. I told Jo Butler who was going to teach her own course. "Don't worry Jo, it will teach itself." It's easy, it's easy. It's an easy course to teach. The easiest course I have to teach.

*MHR: I've seen work on the class. You give it a lot of time and effort.*

**MB:** Oh yes, but I like doing that. It doesn't seem like work to me. I mean, I like to do medical ethics.

*MHR: So what are the challenges? What do you have to work hard at to accomplish in the course?*

**MB:** I work hard to show the students that there is much to be gained by disciplined, rigorous thinking about these issues.

---

*I emphasize discipline, clarity, rigor, good argumentation, and I use high standards. I raise the level of critical disciplined thinking about these issues among the students. That's my main objective.*

---

*MHR: Do you find them skeptical about that initially?*

**MB:** Yes. Well, if not explicitly skeptical -- they might not voice it -- I don't think they think that they have to do that. I emphasize discipline, clarity, rigor, good argumentation, and I use high standards. I raise the level of critical disciplined thinking about these issues among the students. That's my main objective.

*MHR: To raise the level of critical, disciplined thinking about these issues.*

**MB:** And increase their capacity to find for themselves questions that need to be addressed.

*MHR: What should a student who takes the course be able to do? What are you prepar-*

*ing them for? Some will be physicians some will be nurses ...*

**MB:** I aim the course at the patient-citizen. If the patient-citizen also is a doctor or a nurse, okay. But the course as I teach it is aimed at the patient-citizen so that he or she can identify ethical issues in health care -- and be able to reason about them and analyze them critically and in an informed way.

*MHR: I can understand why this is important to the patient. How do you see it applying to the average citizen?*

**MB:** Oh, because the health care system and questions of justice and allocation.

*MHR: So the student who takes the course should be able to participate in that public debate in a reasoned way?*

**MB:** Oh yes.

We live in a democracy. These are not questions for the experts alone. So the citizens have to know. And also citizens are going to be relatives of patients, and patients themselves someday.

But we put a lot of stress, most of us who teach the course, also on the social-political dimensions -- questions of justice in the health care system for a large part are addressed by everyone who teaches the course.

That wasn't true when I started! Okay, there's a change, there's a shift. It was a lot more doctor-patient issues. There wasn't as much emphasis on justice in the health care system, in part because we weren't as aware of, and didn't have the same the cost problems and questions of allocation, access to care, and so on. If you look at the textbooks those issues play a larger and larger part of the textbooks as time goes on.

*MHR: Do you see issues now which will*

*be our allocation issues of the future? What issues are starting to emerge now that are going to reach that magnitude in the future?*

**MB:** Questions of micro allocation, the allocation of certain things. Well, I think questions about the allocation of expensive artificial organs are going to come up soon. I think questions about enhancing human beings through medical technology -- the growth hormone issue is the tip of the iceberg there.

**MHR:** *And now the human genome project.*

**MB:** Yes. And we don't have anything like a handle on the allocation issue. I think the euthanasia issues are going to be with us for a long time. If we don't work through that then

problems that are bringing the Kevorkians into existence won't become less, they'll become greater.

---

---

*...the course as I teach it is aimed at the patient citizen so that he or she can identify ethical issues in health care -- and be able to reason about them and analyze them critically and in an informed way.*

---

---

*Martin Benjamin is a Professor of Philosophy at Michigan State University. Scot Yoder is the Editor of the Medical Humanities Report and a doctoral student in the Department of Philosophy, Michigan State University.*

## **Bioethics in Argentina: A Conference Report by Howard Brody, M.D., Ph.D.**

"Ethics of Life" was the title of a conference sponsored by the OSDE and J.M. Mainetti Foundations in Buenos Aires, August 10-11, 1995. The second large conference in Argentina on topics in bioethics, it was organized in part by faculty from the Latin American School of Bioethics at the University in La Plata.

The large attendance (over 850 physicians, philosophers, lawyers and others) testified to the level of interest in the topic in Argentina today. Further evidence was provided by Dr. Juan Carlos Tealdi of the School of Bioethics in

La Plata, who showed me a copy of the schedule for an upcoming 3-week course in bioethics for physicians, and estimated that perhaps 25-30 would enroll.

The range of topics addressed in the conference was too great to allow a complete summary. Some impressions:

1. The Argentine scholars in bioethics who spoke illustrated a thorough grasp of the current U.S. literature; but the questions entertained from the audience (a very small percentage of the total number of questions submitted) suggested a much less well developed grasp of bioethical issues, as one would expect from the relative newness of this topic within medical circles. While some important new work is under way, so far Argentine scholars have made few

**(Continued on page 6)**

## Brody (cont.)

---

original contributions and have relied largely upon U.S. and European scholarship.

2. The "hot button" topic of the week was in vitro fertilization, which is currently being reviewed as a subject of possible legislation. The Catholic church in Argentina is influential and politically powerful, and tends to be very conservative on reproductive issues especially. Some scientists and physicians currently chafe at the resulting restrictions upon new technologies which are generally available elsewhere. Based on panel presentations at the conference, Catholic theologians might be relatively more dogmatic and, thus, less willing or able to enter into real

hospital system for the poor, and lack of adequate coverage for as much as 1/3 of its population. Large organizations like OSDE (a nonprofit comprehensive care organization covering 700,000 people, with elements of capitated care and quality monitoring of its physicians) are becoming increasingly important and managed care variants are coming upon the scene. Various Argentine panelists issued appeals that would sound familiar here-- for physicians to avoid seeing medicine only as a business; for a better balance between technology and humanism in medicine; and for increasing emphasis on generalist medicine and primary care.

---

---

*The Catholic church in Argentina is influential and politically powerful, and tends to be very conservative on reproductive issues especially.*

---

---

dialogue with secular scholars over bioethical issues, compared with their U.S. counterparts.

3. In the financing and organization of health care, Argentina finds itself in a situation enough like that of the U.S. to make discussion of recent U.S. health reform efforts of considerable interest to this audience. In trying to control previously rampant inflation, Argentina is stressing privatization, and is dealing with increasing unemployment, a deteriorating public

4. Paternalism in end-of-life care is slowly being challenged. For example, Dr. Rene Favoloro, a pioneering Argentine cardiac surgeon who spent many years at the Cleveland Clinic, admitted the inappropriateness of the physician unilaterally deciding when to withdraw or withhold care as death appeared more certain. His proposed solution was for a group within the hospital to make such decisions, in consultation with the family; but no mention was made directly of patient participation or of patient preferences.

*Howard Brody is a family physician and Director of the Center for Ethics and the Humanities in the Life Sciences.*

---

## Announcements

---

Tom Tomlinson and Brian Brown led a course entitled, "Medical Ethics and History of Health Care in London" at St. Bartholomew's Medical College, London, England, June 19 -

July 27.

Howard Brody was recently elected to the Institute of Medicine of the National

Academy of Sciences.

Judith Andre published "My Client, My Enemy," in Professional Ethics (Vol 3, Nos 3 & 4 (Fall/Winter 1995) pp. 27-46

Judith Andre published "Preventive Medicine: Some Hidden Costs," in M.D. (Summer 1995), pp. 16-17.

Judith Andre published "Moral Distress: Commentary" in Making the Rounds, Vol. 1, No. 1, p. 7.

Leonard M. Fleck and Harriet Squier were the authors of the article "Just Caring: Facing the Ethical Challenges of Managed Care," in Family Practice Management, 2 (October 1995), pp. 48-55.

Leonard Fleck addressed the 23rd annual medical meeting of the Burns Clinic in Petoskey, Sept 16-17 on "Ethical Issues in Managed Care."

Judith Andre spoke at the CHM Alumni Reunion September 30, 1995. Her presentation was titled "Confidentiality in Medicine."

Leonard Fleck presented two workshops for the American Hospital Association Patient Representatives Conference in New Orleans, October 12-14. The workshops, titled "Just Caring: Organizational Ethics and Accountability," explored some of the ethical issues raised by the movement of the health care system toward managed care.

Howard Brody received the annual award of the Society for Health and Human Values at the groups annual meeting in San Diego in October 12-15.

Judith Andre presented "Africa and (the) Enlightenment" at the Society for Health and Human Values, San Diego, October 13.

Leonard Fleck presented a paper, "Just Caring: The Moral and Economic Costs of ApoE Genotyping for Alzheimer's Disease," at a consensus conference on ApoE testing for Alzheimer's disease. This was a closed conference sponsored by the Alzheimer's Association and the National Institute of Aging, in Chicago, October. 21-22. The paper is to be published in the Bulletin of the New York Academy of Sciences in mid-1996.

Leonard Fleck addressed the annual meeting of the Michigan Hospital Association Hospital Trustees and CEOs in Traverse City. The title of his presentation was "Just Caring: The Moral Challenge of Medicaid Block Grants for Hospital Leaders."

The University of Michigan has been awarded a \$1.1 million grant from NIH under the ELSI program (Ethical, Legal and Social Implications of the Human Genome Project). Michigan State University is a sub-grantee for \$200,000. This is a three-year project under the title "Genome Technology and Reproduction: Values and Public Policy." Leonard Fleck will direct the community dialogue phase of the project, which is modelled on the "Just Caring" project. There will be structured community dialogue in six Michigan communities beginning in May of 1996.

Leonard Fleck contributed a case study and commentary to the Hastings Center Report for October 1995, pp. 28-29, under the title "My Conscience, Your Money."

Tom Tomlinson will speak on "Ethical Issues in Cancer Control Programs" at New Directions for Women's Health Services, the Second Annual Conference for the Breast & Cervical Cancer Control Program. The conference is being held at Michigan State University November 16 and 17.

## Coming Events

*The Center for Ethics and Humanities is an academic unit whose faculty teach, write, and consult about bioethics and the other medical humanities. Staff members frequently conduct public discussions about a variety of such topics and we encourage our readers to attend and participate in these forums.*

**Movies and Medicine.** September Williams, MD lectures on the medical movie at 11:00 a.m. each Friday; major film showings begin about 12:15. You are welcome to drop in for part or all of either remaining class. The schedule below is subject to change. For recent information contact Dr. Williams directly at <OurSong@aol.com>.

\* November 3: City of Joy (Joffe, 1992) or Philadelphia (Demme, 1993).

\* November 10: Recent experimental video, including "How to Keep a Goldfish in a Bowl" (Karp 1993), and "Rock Hudson's Home Movies" (Rappaport 1993).

### **Friday, November 17: Non-Heart Beating Organ Donors - A Medical, Legal, and Ethical Overview.**

The workshop will examine issues involved in retrieving solid organs for transplant from non-heart beating donors and steps that hospital policy makers can take to implement a successful program. Holiday Inn-West, Lansing,

MI. For more information contact the Transplantation Society of Michigan, 2203 Platt Road, Ann Arbor, MI 48104, (800) 482-4881.

**May 5-10: Life Science Bioethics Institute: Program in Ethics and Environmental, Food, and Agricultural Biotechnology.** This workshop is designed to aid faculty in the non-medical life sciences in integrating discussions of ethical issues into their teaching. Sessions will be devoted to ethical theory and argument, pedagogical issues, and several ethical and policy issues. Applicants must be tenured or tenure-track life science faculty members. For more information or application materials contact Dr. Fred Gifford, Department of Philosophy, MSU, 353-1993 or <gifford@pilot.msu.edu>.

### CENTER FOR ETHICS AND HUMANITIES STAFF

H. Brody, M.D.,PhD.....	Director
T. Tomlinson, Ph.D.....	Assistant Director and Director, Interdisciplinary Programs in Health and Humanities
J. Andre, Ph.D.....	Faculty
L. Fleck, Ph.D.....	Faculty
A. Hogan, Ph.D.....	Faculty
S. Yoder, M.A.....	Editor, Medical Humanities Report
K. Hankins.....	Editor, Ethics-In-Formation
J. Holmes.....	Office Supervisor

### **Published by:**

Center for Ethics and Humanities  
in the Life Sciences  
C-201 East Fee Hall  
Michigan State University  
East Lansing, MI 48824-1316

Non-Profit Org.  
U.S. POSTAGE  
**PAID**  
E. Lansing, MI  
Permit No. 21

MSU is an affirmative-action, equal opportunity institution.