

Phil 164: Medical Ethics
Fall 2008

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Course Overview: This course will deal with issues of ethical import for medical practitioners and administrators. It will be divided by topic into three units:

(1) Killing and Letting Die

It is usually assumed that killing is not morally permissible. Sometimes, however, there might be good reason to distinguish a notion of *letting die*, in which one merely abstains from performing an action that would prevent someone from dying. We might then ask, if letting die is different from killing, is letting die also morally impermissible? Or conversely, if letting die is sometimes permissible, is killing? In this section of the course, we will examine whether the distinction between killing and letting die can be made coherently, and if so, what the moral status of letting die might be.

(2) Patient Autonomy

A patient's autonomy is his ability to make decisions about his own treatment. It is widely acknowledged that patient autonomy should be safeguarded as much as possible. However, there are two domains in medical practice where patient autonomy may sometimes be threatened. Accordingly, this unit will have two subdivisions.

In the first part, we will examine clinical research practices. It is often the case that, in tests of new medicines or treatments, one treatment offered to a patient will prove ineffective or inferior to an alternative treatment. In order to respect patient autonomy, patients must be informed of this possibility. But if they are informed, they may decide not to participate in the test, fearing inferior treatment. So how can clinical researchers conduct effective and efficient research without undermining patient autonomy?

In the second part, we will consider whether it is a violation of patient autonomy for doctors to make decisions on behalf of their patients. Sometimes, either because a patient does not have the requisite technical knowledge to decide, or because a patient is physically unable to decide (he is comatose, for example), it seems necessary for a doctor to make treatment decisions on behalf of the patient. How can the doctor do this in a way that does not undermine patient autonomy?

(3) Philosophers and Decision-Making

We will close the course with a brief examination of exactly what role philosophers and ethicists should play in medical decision-making. Are medical practitioners qualified to make difficult ethical decisions on their own, or should they call on experts in ethics to aid them? And if these experts are called upon, how great should their role be?

Readings:

Most readings will come from:

Bioethics: An Anthology (2nd Edition)

Edited by Helga Kuhse and Peter Singer.

This book is available from Amherst Books in downtown Amherst.

Additionally, there will be a few readings not found in this book. I will post these readings as PDFs on the course website:

<http://www.people.umass.edu/cox/164F08.html>

To download these readings, go to the above url. Click on “schedule”. Here you will see an HTML version of our class schedule. Scroll down to the day for which the additional reading is scheduled, and simply click on the title of the reading to view the PDF.

To save a copy of your own, right-click (Windows) or control-click (Macintosh) on the link and select “save as” from the context menu.

I strongly encourage you to print these readings and bring printed copies to class the day we discuss them.

A word about the readings:

The readings for the course will be manageable, although probably more difficult than you are used to. Reading philosophy is not like reading for many other disciplines. When we read a philosophical paper, while we are certainly interested in “what the author thinks”, i.e., his opinion, our main purpose will be to understand how he *argues* for his opinion. The greater part of the work in philosophy is not in generating opinions, but in generating careful, logical arguments in support of them. For this reason you should try to read the text more than once. As a minimum I suggest reading twice: once before the lecture and again afterward. Pay attention to the sometimes tedious argumentative details that you might overlook if you were reading for a literature or history class—these will be the most important parts.

Assignments and Grading:

Take-Home Assignment 1: 20% (Sept 29)

Take-Home Assignment 2: 20% (Nov 14)

Mid-Term Examination: 25% (Oct 27)

Final Examination: 25% (TBA)

Class Preparation: 10%

Take-Home Assignments: There will be two take home assignments during the semester, the first due on Sept. 29, and the second due on Nov. 14. For each one, I will give you two questions to answer, about a week before the assignment is due. You will then have a week to prepare written answers to the questions. We will talk in more detail about these as the time for the first one approaches, but here are a few guidelines.

(i) Your answer for each question should average half a page in length, 12-pt. typeface, single-spaced.

(ii) You are allowed to consult me during your preparations, either by email or in person.

(iii) You *are allowed* to consult one another during your preparations. However, you may not copy answers from one another—every student must write his answer in his own words. If you *talk* to other students about your answers, I advise you to *write* your answers in isolation. This minimizes the risk you will fail to use your own words. Any answers that resemble one another too closely will be considered candidates for cheating, and subject to the appropriate penalty (see below).

Exams: There will be two exams in the class, a mid-term (Oct 27) and a final (date to be announced). Each exam will consist of two parts. The first part, called "short-essay", will require you to rehearse specific arguments from our readings. The second part, called "long-essay", will require you to discuss a broader issue or doctrine from our readings, often asking you to piece together an author's complete view on an issue. I will give you a pool of possible exam questions to study before each test. I will try to give you these study guides about one week prior to the exam day.

Class Preparation: The preparation will be based on two things: (i) attendance and (ii) your level of preparation for class. You will begin the semester with the full 10%. Penalties will be introduced for:

- (a) Absences. Any more than three absences will result in a loss of 5%. Any more than five absences will result in losing the full 10%.
- (b) Indications that you are not prepared for class (you clearly haven't done the reading, etc.)
- (c) Failure on occasion to contribute to class discussion. Contribution may be by asking questions, or by answering questions I may ask you in class.

Academic Dishonesty:

Academic dishonesty comes in two primary forms: plagiarism and cheating. Plagiarism is intentional or unintentional use of someone else's words as your own. Do not plagiarize. Cheating is any attempt to violate the rules or understood conventions pertaining to exams, quizzes, or similar assignments. Do not cheat. **Academic dishonesty on any assignment will earn you a failing grade for the class. There will be no compromises.** If you have any questions about academic dishonesty, ask me, or consult the student conduct code.