

Letters

Editor

Thank you very much for your September editorial, which I considered quite profound. I thought your references were very well chosen. When teaching ethics classes at QUB for nearly ten years from about 2003, I did notice a tendency for students to increasingly favour personal feelings in regard to abortion, euthanasia and other issues.

Can one practice medicine without morality? I don't think so. Can one be culturally conditioned to a particular moral viewpoint? I think it is to some extent possible (and suggested by history) but I think that is no reason not to promote the 'best' morality.

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Editor

Apropos of your Ulster Medical Journal editorial Ulster Med J 2022;;91(3):121-122

First they came for the socialists, and I did not speak out—because I was not a socialist.

Then they came for the trade unionists, and I did not speak out—because I was not a trade unionist.

Then they came for the Jews, and I did not speak out—because I was not a Jew.

Then they came for me—and there was no one left to speak for me.

—Martin Niemöller

Eight or so decades later a medical educator asks his year 1 class, who have elected to take a course in medical ethics, what they think of doctors who joined Hitler's Nazi party : were they evil, or mistaken? He finds their answers, of which he tells us only that most "felt that evil was not a valid concept in these circumstances", disturbing.....

I wonder if the students, perhaps thinking aloud in attempting to answer, might have been asking themselves whether they might have been at moral risk, themselves, had they found that their careers could depend on collaboration with a cruel and oppressive regime which had a firm hold on power in their own country. The response of a German physician between 1933 and 1944 (at which later date it would have been clear to most that Naziism was beaten) would have depended on how much danger that physician could accept to himself, his family, his career...as well as pre-existing prejudices, and where personality testing would have placed him on an axis of empathy-sociopathy. (By the 1930s Germany had been a Christian society for at least 1700 years, suggesting that religiosity gives only limited protection against mass hysteria and consequent state cruelty...)

It would be intriguing to be told what the students in the aforementioned ethics class actually said to their teacher. It might also have been fairer to those students than leaving alternative implications of "a disturbing example of Lewis's thesis from the Abolition of Man" (Lewis had invoked Naziism in a sort of "straw-man" argument about absolute morality) hanging in the air. Indeed, the class might already feel they should have a right of reply... But my feeling is that, had the students instead opted for the unqualified, apparently expected, ready-provided, one-word answers "evil" or "mistaken", it would have let them off the real challenge, which was to examine their own potential for being conscripted into an utterly vile project. It sounds to me as though they rose to that challenge. I hope they got credit for that.

A couple of footnotes: Pastor Martin Niemöller, previously a supporter, fell out with the Nazis in 1936, and eventually endured eight years in the concentration camps of the Nazis, an experience which led him to become a committed pacifist after WW2. I would urge everyone to read, at the very least, the Wikipedia article about him.

On doctors who collaborated with the Nazis, I found it helpful to read the psychiatrist Robert Jay Lifton's 1986 account "The Nazi Doctors" (MacMillan).

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Editor,

I read your editorial in the UMS September 2022 with interest. In my academic teaching days in the 1970s ethics was not part of the curriculum and there was no formal ethical teaching for medical undergraduates although it was an important part of the then unwritten curriculum. We taught knowledge, skills and attitudes and the greatest of these was knowledge. Even in those distant days it was clear that medical knowledge was a slippery subject with significant portions becoming obsolete within a few years not to mention a professional lifetime, whereas skills had a much longer shelf life and attitudes longer still.

In my undergraduate days it was implicitly accepted that part of becoming a doctor was to adopt the attitudes and approaches of senior practitioners to your own medical practice. None of our teachers was perfect but we selectively accepted from each what seemed most appropriate for ourselves and our patients.

Since and probably long before Hippocrates, medicine has had a strong ethical component. This was recognised by the collective taking of the Hippocratic Oath by my entire undergraduate year in 1965 immediately prior to graduation, supervised by the Dean of the Faculty Prof. John Henry Biggart.

I am struck by the change in general social attitudes during my lifetime. As a war baby I grew up with the memory and experience of individuals then being prepared to sacrifice,

their lives if necessary for the good of the group, regiment or community. Nowadays this attitude seems to have evaporated to be replaced by what is for the individual's personal good and perceived benefit although I see that currently in Ukraine the old social habits seem to have persisted.

God is dead. Nietzsche rules. What next? Perhaps Darwin is right about more than we thought? In evolutionary history the group mattered, the individual didn't. Maybe it's time to change our old-fashioned views in line with modern values or perhaps our culture will be supplanted by another less selfish and more collective? Time will tell.

Sincerely,

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