

## BOOK NOTES

Structured abstracts of information on newly published books, computer programs, selected Web sites, and other material are provided in this portion of Medical Writings. Order phone numbers and Web sites can be used to place orders directly with publishers.

### Medical Malpractice: A Physician's Sourcebook

Anderson RE, ed. 300 pages. Totowa, NJ: Humana Pr; 2005. \$59.50. ISBN 1588293890. Order at [www.humanapress.com](http://www.humanapress.com).

**Field of medicine:** All fields.

**Format:** Hardcover book.

**Audience:** Practitioners desiring to minimize the risk for becoming a malpractice defendant or testifying as an expert witness.

**Purpose:** To provide an overview of malpractice law and its implications for selected medical specialties.

**Content:** The 17 chapters are grouped into 4 parts: insurance, law, clinical implications, and reform prospects.

**Highlights:** All clinicians will benefit from understanding part I (insurance underwriting) and part II (theory of malpractice law, discovery process, and being an expert witness). Part III has chapters specific to telemedicine, emergency medicine, anesthesiology, obstetrics, and plastic surgery. Part IV argues for legislative reform of malpractice.

**Limitations:** Part IV's proposals appear logical, fair, rational, valid, and efficient for patient and practitioner. However, they are unlikely to be enacted unless linked to economic concessions to the trial bar. In addition, the text omits the practical vicissitudes of conducting a malpractice defense (for example, structuring settlements that avoid National Practitioner Databank reporting, a growing practice of institutions that admit liability in return for dismissal of all individual defendants). Finally, part I would benefit from some mention of the paradoxes of the underwriting cycle.

**Related reading:** Curiously, no existing book clearly summarizes malpractice for physician readers. Practitioners will find the many legal treatises on malpractice litigation too dense for ready comprehension. More useful are the publications reporting the Harvard Malpractice Study that are cited in the notes to chapter 16 in *Medical Malpractice*. They prove the randomness of both litigation and compensation.

**Reviewer:** David Hsia, JD, MD, MPH, U.S. Agency for Healthcare Research and Quality, Rockville, Maryland.

*Disclaimer:* This review does not represent the views of any U.S. government agency.

### Contemporary Catholic Health Care Ethics

Kelley DF. 336 pages. Washington, DC: Georgetown Univ Pr. \$32.50. ISBN 1589010302. Order at [www.press.georgetown.edu](http://www.press.georgetown.edu).

**Field of medicine:** Ethics, philosophy, religion, and Christian bioethics.

**Format:** Softcover book.

**Audience:** Students of bioethics in Catholic colleges, medical and administrative staff in Catholic hospitals, chaplains, and anyone interested in the intersection of medicine and religion.

**Purpose:** A primer of medical ethics with pertinent Catholic teachings.

**Content:** The book is divided into 3 parts: "Theological Basis," "Method," and "Application." The first maintains that Catholic concepts of human dignity, holism, sanctity of human life, and quality of life should contextualize bioethical decisions. Part 2 discusses deontological and utilitarian moral theories and the "principle of double effect," axioms favored by the Church for deciding on actions that have both good and bad consequences. It also explains shifts away from previously held positions in Catholic moral theory that have occurred since the Second Vatican Council. Part 3 mostly covers contentious issues surrounding terminal care—competency, advanced directives, euthanasia, withdrawing care, medical futility, and the practical administration of hospital ethics committees. It also has chapters on genetic engineering, embryonic stem-cell research, pain management, and health resource allocations.

**Highlights:** "Catholic medical ethicists," the author writes, "are united in our insistence that God's will is to be taken seriously and that there are indeed objective moral norms." Yet even within this common moral framework, he underscores a diversity of bioethical thought among official and unofficial Catholic moral philosophers. The author, a recognized authority, describes himself as a "consequentialist," and in many instances, notably contraception, he disagrees with doctrine and with other Catholic philosophers.

**Limitations:** A chapter on abortion is notably absent. Also missing is a systematic discussion how basic Christian virtues (faith; hope; charity; self-sacrifice; love of neighbor; and concern for the poor, the oppressed, and strangers) should inform physician and patient. The book has no examples of medical cases, so it is hard to imagine how a beginning student will understand how bioethical principles are considered and applied in reality.

**Related readings:** Lammers and Verhey's *On Moral Medicine: Theological Perspectives in Medical Ethics*, 2nd edition (WB Erdmans, 1998), is a rich anthology of selections from Christian writings on health, illness, and medicine that gives an overview of religious thought. Pellegrino and Thomasma's *The Christian Virtues in Medical Practice* (Georgetown Univ Pr, 1996) explores "the kind of person a Christian physician ought to be."

**Reviewer:** David L. Freeman, MD, Caritas Carney Hospital, Boston, Massachusetts.