EthxWeb Search Results

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Document 1

Healy, Gerald B

Ethics: the joy of practice.

Abstract: Dr John J. Conley was an integral part of the house of surgery in the latter part of the 20th century. Conley placed the ethical values of practice at the forefront of his teachings and transcribed many valuable lessons in his writings. In 1993, he wrote his version of the Hippocratic Oath outlining 12 important principles. Those principles are revisited here as a way to celebrate the joy of the calling that is medical practice. In addition, 7 new elements are added as a way to enhance that joy in the light of 21st-century medicine. The uplifting experience found in a career filled with ethical conduct is the legacy we should all strive to achieve.

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Document 2

Hoerni, Bernard

Histoire des sciences médicales 2011 Jul-Sep; 45(3): 257-64

Abstract: The activity of the division of Ethics and deontology of the French National council of medical doctors is analysed by its former president (1993-2001). Among a lot of topics, a new version of the professionnal Code of deontology and patients' information were the main subjects of reflection and action.

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Document 3

Sierra, X


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Document 4

Liebowitz, Jason

Moral erosion: how can medical professionals safeguard against the slippery slope?
Medical humanities 2011 Jun; 37(1): 53-5

Abstract: The extensive participation of German physicians in the atrocities of the Holocaust raises many questions
concerning the potential for moral erosion in medicine. What circumstances and methods of rationalisation allowed doctors to turn from healers into accomplices of genocide? Are physicians still vulnerable to corruption of their guiding principles and, if so, what can be done to prevent this process from occurring? With these thoughts in mind, the author reflects on his experiences participating in the Fellowships at Auschwitz for the Study of Professional Ethics program and offers a medical student's perspective on the ethical issues encountered in clinical training and the practice of medicine.

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Document 5
Kropf, Simone Petraglia
**Carlos Chagas: science, health, and national debate in Brazil.**
Lancet 2011 May 21; 377(9779): 1740-1

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Document 6
**[The traditions of "the saint doctor" Gaas in Russian clinic: A.N. Kazem-Bek and V.A. Kazem-Bek (Kazan-Harbin).]**
Problem sotsialnii gignenii, zdravookhraneniia i istorii meditsiny / NII sotsialnii gignenii, ekonomiki i upravleniiia zdravookhraneniim im. N.A. Semashko RAMN ; AO "Assotsiatsiia 'Meditinskaia literatura'." 2011 May-Jun(3): 50-2

*Abstract:* The article retrace the process of maintaining and passing on the humanistic traditions of Russian medicine founded by Doctor F.P. Gaas in the late XIXth - early XXth centuries. The biographies of Kazan physicians are presented, including eminent therapist professor A.N. Kazem-Bek (the representative of N.A. Vinogradov clinical school) from Kazan University and his son, Doctor V.A. Kazem-Bek, who practised medicine in Harbin.

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Document 7
Abrams, Sarah E
**History, ethics, and the truth.**
Public health nursing (Boston, Mass.) 2011 Mar-Apr; 28(2): 105-6

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Document 8
Kapp, T; Bondio, M G
Der Hautarzt; Zeitschrift für Dermatologie, Venerologie, und verwandte Gebiete 2011 Mar; 62(3): 219-23

*Abstract:* During the period of National Socialism, many politically motivated changes occurred in Germany in all areas of medicine and consequently in the field of dermatology as well. Most of the Jewish dermatologists were removed from their positions; many of the chair reshuffles were executed for political causes. These changes caused decline of dermatology in the time of National Socialism.

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Document 9
Horner, Jennifer; Minifie, Fred D
Research ethics I: Responsible conduct of research (RCR)–historical and contemporary issues pertaining to human and animal experimentation.
Journal of speech, language, and hearing research : JSLHR 2011 Feb; 54(1): S303-29
Abstract: In this series of articles—Research Ethics I, Research Ethics II, and Research Ethics III—the authors provide a comprehensive review of the 9 core domains for the responsible conduct of research (RCR) as articulated by the Office of Research Integrity. In Research Ethics I, they present a historical overview of the evolution of RCR in the United States then examine the evolution of human and animal experimentation from the birth of scientific medicine through World War II to the present day.
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Document 10
McCullough, Laurence B
Was bioethics founded on historical and conceptual mistakes about medical paternalism?
Bioethics 2011 Feb; 25(2): 66-74
Abstract: Bioethics has a founding story in which medical paternalism, the interference with the autonomy of patients for their own clinical benefit, was an accepted ethical norm in the history of Western medical ethics and was widespread in clinical practice until bioethics changed the ethical norms and practice of medicine. In this paper I show that the founding story of bioethics misreads major texts in the history of Western medical ethics. I also show that a major source for empirical claims about the widespread practice of medical paternalism has been misread. I then show that that bioethics based on its founding story deprofessionalizes medical ethics. The result leaves the sick exposed to the predatory power of medical practitioners and healthcare organizations with only their autonomy-based rights to non-interference, expressed in contracts, to protect them. The sick are stripped of the protection afforded by a professional, fiduciary relationship of physicians to their patients. Bioethics based on its founding story reverts to the older model of a contractual relationship between the sick and medical practitioners not worthy of intellectual or moral trust (because such trust cannot be generated by what I call 'deprofessionalizing bioethics'). On closer examination, bioethics based on its founding story, ironically, eliminates paternalism as a moral category in bioethics, thus causing bioethics to collapse on itself because it denies one of the necessary conditions for medical paternalism. Bioethics based on its founding story should be abandoned.
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Document 11
Steger, F
Yesterday's ethics in contemporary medicine - is it still of concern?
Prague medical report 2011; 112(3): 159-67
Abstract: Discussions on questions and problems of medical ethics are on everyone's lips. The debates center for instance around the just allocation of public resources, demographical changes in our society or the guarantee of patient autonomy, thus posing questions on the technical progress in modern medicine. These contemporary conflicts in medicine are numerous, but not all of them are new; rather, the discussion in medical ethics on these dilemmas is bound to contexts and has historical roots. Some of these conflicts reach back to the medicine of the Renaissance and Antiquity, thus assigning actuality to the historical viewpoint. Taking history into account, one can benefit from a timeless content and not least get a feeling for historicity and contingency. Considering the creation of identity, the old authorities also represent central normative reference points for the ethical competence of physicians understood as an attitude within an interpersonal medicine. For this reason, the heritage of Hippocrates, which encompasses values and norms of the Hippocratic Oath, needs to be respected. Apart from other dimensions of knowledge and skills, the development of an individual ethical competence also requires awareness of the past, leading to an understanding for the historical, social and cultural relativity of medical action.
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Document 13


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Document 14

Sachse, Carola


Abstract: The Max Planck Institute for Molecular Genetics (MPIMG) in Berlin-Dahlem dates its establishment to 1964. Its homepage makes no mention of its predecessor institutes, the Kaiser Wilhelm Institute for Anthropology, Human Genetics and Eugenics (KWIA) and the subsequent MPI for Comparative Genetics and Hereditary Pathology (MPIVEE). This article traces the two critical phases of transition regarding the constellations of academic staff, institutional and epistemic ruptures and continuities specific to the era. Only one of the five department heads from the final war years, Hans Nachtsheim, remained a researcher within the Max Planck Society (MPG); he nevertheless continued to advocate the pre-war and wartime eugenic agenda in the life sciences and social policy. The generational change of 1959/60 became a massive struggle within the institute, in which microbial genetics (with Fritz Kaudewitz) was pitted against human genetics (with Friedrich Vogel) and managed to establish itself after a fresh change in personnel in 1964/65. For the Dahlem institute, this involved a far-reaching reorientation of its research, but for the genetically oriented life sciences in the Max Planck Society as a whole it only meant that molecular biology, which was already being pursued in the West German institutes, gained an additional facility. With this realignment of research traditions, the Society was able to draw a line under the Nazi past without having to address it head-on.

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Document 15

Matos, Mariângela Silva de; Tenório, Robson

[Perceptions of students, professors and users regarding the ethical dimension at odontology education]. = Percepção de alunos, professores e usuários acerca da dimensão ética na formação de graduandos de odontologia. Ciência & saúde coletiva 2010 Oct; 15 Suppl 2: 3255-64

Abstract: The present work analyzes the perception that students, professors and users of the ambulatory have concerning the professional education in its ethical dimension, in two odontology course, a public and a private one from Bahia. It also aims to compare these perceptions with the observed ambulatory practice. With these purposes the following research instruments had been applied: questionnaires for 283 students, not-directive interviews with 32 professors and 36 users, and participatory observation in ambulatory practice in the two courses. The results show that (1) students and professors perceive the high stimulation of the ethic dimension, (2) students leam the basic concepts of bioethics theoretical knowledge, and (3) the majority of the users feel respected considering these principles. However, the observation of the ambulatory practice does not confirm all that perception results.
Document 16
Jones, Nancy L; Peiffer, Ann M; Lambros, Ann; Eldridge, J Charles
Problem-based learning for professionalism and scientific integrity training of biomedical graduate students: process evaluation.
Abstract: We conducted a process evaluation to (a) assess the effectiveness of a new problem-based learning curriculum designed to teach professionalism and scientific integrity to biomedical graduate students and (b) modify the course to enhance its relevance and effectiveness. The content presented realistic cases and issues in the practice of science, to promote skill development and to acculturate students to professional norms of science.

Document 17
Magnus, David
The history of the American Journal of Bioethics.

Document 18
Palmer, Susan K
Preserving patients' health during WWII. Commentary.
Anesthesiology 2010 Sep; 113(3): 685-6

Document 19
Comiti, Vincent-Pierre
[Historiography of bioethics]. = Historiographie de la bioéthique.

Document 20
Howard, Frazer; McKneally, Martin F; Levin, Alex V
Integrating bioethics into postgraduate medical education: the University of Toronto model.
Abstract: Bioethics training is a vital component of postgraduate medical education and required by accreditation organizations in Canada and the United States. Residency program ethics curricula should ensure trainees develop core knowledge, skills, and competencies, and should encourage lifelong learning and teaching of bioethics. Many physician-teachers, however, feel unprepared to teach bioethics and face challenges in developing and implementing specialty-specific bioethics curricula. The authors present, as one model, the innovative strategies employed by the University of Toronto Joint Centre for Bioethics. They postulate that centralized support is a key component to ensure the success of specialty-specific bioethics teaching, to reinforce the importance of ethics in medical training, and to ensure it is not overshadowed by other educational concerns.
Document 21
Silvestri, Giorgio

Memories of Jean Dausset. A pioneering scientist in medical ethics.
Blood transfusion = Trasfusione del sangue 2010 Apr; 8(2): 130-1

Document 22
Pories, Walter J.

Charles Granville Rob.
Journal of the American College of Surgeons 2010 April; 210(4): 535

Document 23
Jonsen, Albert R.

Stephen Edelston Toulmin [obituary]
Hastings Center Report 2010 March-April; 40(2): inside front cover

Document 24
McCann, Peter D

Sarmiento's opportunity.
American journal of orthopedics (Belle Mead, N.J.) 2010 Feb; 39(2): 64

Document 25
De Gregorio, Vincenzo

[Ethical decalogue of Vincenzo Cuomo]. = Il decalogo etico di Vincenzo Cuomo.
Annali di igiene : medicina preventiva e di comunità 2010 Jan-Feb; 22(1 Suppl 1): 17-9

Document 26
Petrovskii, B V

[Medical ethics in the past, present and future]
Eksperimental'naia i klinicheskaia gastroenterologiia = Experimental & clinical gastroenterology 2010 (2): 70-8
 Franzblau, Michael J.

*Ethical issues in health care: facing our responsibilities in 2010.*
Clinics in Dermatology 2010 January-February; 28(1): 112-114

Vaux, Kenneth L.

MINISTRY ON THE EDGE: REFLECTIONS OF AN INTERFAITH PIONEER, CIVIL RIGHTS ADVOCATE, AND THE FIRST BIOETHICIST

Peterson, Paul Silas

On nature and bioethics.
Human reproduction and genetic ethics 2010; 16(1): 74-86

Abstract: The account of nature and humanity's relationship to nature are of central importance for bioethics. The Scientific Revolution was a critical development in the history of this question and many contemporary accounts of nature find their beginnings here. While the innovative approach to nature going out of the seventeenth century was reliant upon accounts of nature from the early modern period, the Middle Ages, late-antiquity and antiquity, it also parted ways with some of the understandings of nature from these epochs. Here I analyze this development and suggests that some of the insights from older understandings of nature may be helpful for bioethics today, even if there can be no simple return to them.

Coombs-Thorne, Heidi

"Mrs. Tilley had a very hasty wedding!": the class-based response to marriages in the Grenfell Mission of Newfoundland and Labrador.
Canadian bulletin of medical history = Bulletin canadien d'histoire de la médecine 2010; 27(1): 123-38

Abstract: The International Grenfell Association (IGA) attracted hundreds of single young women for nursing in northern Newfoundland and Labrador between 1939 and 1981. Under contract with the Mission, the Grenfell nurse was expected to behave in a non-sexual manner and uphold a strict moral code of behaviour. However, the Grenfell experience provided nurses with a unique opportunity for socializing with young men who ranged the social spectrum, from fishermen and labourers to medical professionals. This paper highlights the relationships and marriages of the nurses that developed during or immediately after their tenure with the IGA and evaluates the Grenfell Mission's class-based responses to those relationships. The administration responded either positively or negatively to nurses' marriages, depending on the socioeconomic background of the husband in question. Marriages to physicians or dentists were almost always celebrated while marriages to local men were usually questioned or treated with ambivalence. From the perspective of the IGA, the social status of the nurse could be raised or lowered depending on the socioeconomic background of her marriage partner.
Document 31

Vymetal, Jan

[Twenty years of teaching of social sciences and humanistic subjects at the First Faculty of Medicine Charles University in Prague] = Dvacet let výuky spolecenskovedních a humanitních oboru na 1. lékarské fakulte Univerzity Karlovy v Praze.
Casopis lékařů českých 2010; 149(8): 385-6

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Document 32

García Fernández, Dora

Una aproximación al Bioderecho = [A survey of biolaw]
Anuario de Derechos Humanos: Nueva Época 2010; 11: 203-224

**Abstract:** The emergence of Bioethics in the early 70's marked a new era and established a very important nexus with juridical science. The union between these two disciplines gave birth to Legal Bioethics or Biolaw, juridical discipline that systematizes and gives juridical coherence and ethics to the emerging themes regarding technology development, life and health sciences.

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[http://revistas.ucm.es/der/02120364/articulos/ANDH1010110203A.PDF](http://revistas.ucm.es/der/02120364/articulos/ANDH1010110203A.PDF) (link may be outdated)

Document 33

Kassirskii, I A

[About health care]

Georgetown users check [Georgetown Journal Finder](http://library.georgetown.edu/journalfinder) for access to full text

Document 34

Petrovskii, B V

[Medical ethics in the past, present and future]
Eksperimental'naia i klinicheskaiia gastroenterologiiia = Experimental & clinical gastroenterology 2010 (2): 70-8

Georgetown users check [Georgetown Journal Finder](http://library.georgetown.edu/journalfinder) for access to full text

Document 35

Jones, Ron W.

National Women's Hospital deserves a fair and balanced history -- with response by Linda Bryder.
New Zealand Medical Journal 2010; 123(1309): 130-132; author reply 132-133

Georgetown users check [Georgetown Journal Finder](http://library.georgetown.edu/journalfinder) for access to full text

Document 36

Harvey, John Collins.

The Cambridge World History of Medical Ethics, edited by Robert B. Baker and Laurence B. McCullough
Document 37
Byk, Christian
Bioethics in the USA: historical background and perspectives. Forward.

Document 38
Callahan, Daniel
The contested terrain of American bioethics.
Abstract: Bioethics came to life in the United States in the late 1960s. As the first research center in the world devoted to bioethics. Those of us who were early in the field had to deal with a general skepticism that the field of ethics could offer useful direction and advice, and had to deal as well with resistance among physicians. As time went on various struggles emerged on the role of ethical theory, the influence of ideology on the field of bioethics, and the particular features of American culture, highly individualistic and not inclined to take on ultimate human questions. A global bioethics has emerged and the field of bioethics, despite internal struggles, continues to grow and flourish.

Document 39
Doucet, Hubert
Does American bioethics speak with one voice?
Abstract: Many international organizations and countries have adopted the principles of American bioethics as their own principles. However, further analysis of what is going on in the United States shows that what we have come to call principlism is only one expression among many other health care ethics approaches that are found in the U.S. The first section of the text presents American bioethics from the point of view of principlism, the main focus being the creation of this vision, and its meaning. The second section examines, first of all, the critiques that from the beginning have been addressed to this approach; and secondly, other visions developed as much in response to the limits intrinsic to principlism as to the major changes that drive the American health system. In the third section, I will attempt to indicate that the real challenge of American bioethics is not a consequence of the tension existing between principlism and the other approaches, but that it arises in the political domain: the polarization between liberals and conservatives.

Document 40
Rothstein, Mark A
The role of law in the development of American bioethics.
Abstract: In the United States, interest in bioethics increased significantly during the 1970s, as new technologies and changing social mores combined to focus attention on contentious issues in medical research and treatment.
New legal developments, both statutory and case based, also began to address reproductive freedom, informed consent to research and treatment, organ transplantation, end of life issues, and other matters. Since the 1970s, the law has relied on ethical principles such as autonomy and respect for persons; bioethics has relied on the law to implement and institutionalize bioethical concerns into the nation's social fabric.
Chamberland, Celeste


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Miller, Ian


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Mansfield, Rick


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Drane, James F.


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Murray, Thomas H.


Abstract: This year marks The Hastings Center's fortieth anniversary. These essays examine the four core issues that the early Center identified as its domain. Thomas Murray, president, revisits the Center's work on ethical issues in human genetics. Though that work began in 1971, when genetic counseling was in its infancy and genetic
engineering was unheard of, Murray finds it "remarkably prescient."

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* Article  Document 52
Veatch, Robert M.
**The evolution of death and dying controversies**
*Abstract*: This year marks The Hastings Center's fortieth anniversary. These essays examine the four core issues that the early Center identified as its domain. Robert Veatch, among the Center's first staff members, discusses death and dying -- including the ongoing controversy over defining death.

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* Article  Document 53
Gaylin, Willard
**Behavior control: from the brain to the mind**
Hastings Center Report 2009 May-June; 39(3): 13-16
*Abstract*: This year marks The Hastings Center's fortieth anniversary. These essays examine the four core issues that the early Center identified as its domain. Writing on behavioral contrar, cofounder Willard Gaylin recalls that this issue arose alongside early discoveries about the brain-behavior link and the desire to find ways to modify undesirable behavior, causing a reassessment of what is "normal."

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* Article  Document 54
Callahan, Daniel
**Ethics and population**
Hastings Center Report 2009 May-June; 39(3): 11-13
*Abstract*: This year marks The Hastings Center's fortieth anniversary. These essays examine the four core issues that the early Center identified as its domain. Cofounder Daniel Callahan takes up population control, noting that the concern has shifted from overpopulation to underpopulation, but that the central issue remains -- respect for procreative freedom and recognition of its profound social effects.

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* News  Document 55
Lewis, Rebekah
**A Rock Hill native and medical law expert, Holder’s life lessons live on [Angela Roddey Holder]**
Herald 2009 April 24; 1p.

[http://www/heraldonline.com](http://www/heraldonline.com) (link may be outdated)

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* Article  Document 56
Figueiredo Filho, Gilberto Vilela
**The Medicine and GERD of Immanuel Kant (1724-1804).**
Otolaryngology – Head and Neck Surgery 2009 January; 140(1): 9-12
Document 57

Bruns, Florian

**MEDIZINETHIK IM NATIONALSOZIALISMUS: ENTWICKLUNGEN UND PROTAGONISTEN IN BERLIN (1939-1945)**


Call number: RA418.3 .G3 B76 2009

Document 58

Baker, Robert B. and McCullough, Laurence B., eds.

**THE CAMBRIDGE WORLD HISTORY OF MEDICAL ETHICS**


Call number: R724 .C3274 2009

Document 59

Maehle, Andreas-Holger

**DOCTORS, HONOUR AND THE LAW: MEDICAL ETHICS IN IMPERIAL GERMANY**


Call number: R724 .M1626 2009

Document 60

Gibson, Twyla

**The code of ethics in medicine: intertextuality and meaning in Plato's Sophist and Hippocrates' Oath**


Call number: R724 .C8247 2009

Document 61

Kuhse, Helga; Singer, Peter

**What is bioethics? A historical introduction**


Call number: R724 .C616 2009

Document 62

Caplan, Arthur L.

**The birth and evolution of bioethics**


Call number: QH332 .P46 2009

Document 63
Rispler-Chaim, Vardit
The discourses of practitioners in the modern and contemporary Islamic Middle East
Call number: R724.C3274 2009

*  Chapter  Document 64
Baker, Robert B.
The discourses of practitioners in nineteenth- and twentieth-century Britain and the United States
Call number: R724.C3274 2009

*  Chapter  Document 65
Lichterman, Boleslav L.; Yarovinsky, Mikhail
The discourses of practitioners in eighteenth- to twentieth-century Russia and Soviet Union
Call number: R724.C3274 2009

*  Chapter  Document 66
Maeble, Andreas-Holger; Trohler, Ulrich
The discourses of practitioners in nineteenth- and twentieth-century Germany
Call number: R724.C3274 2009

*  Chapter  Document 67
Gracia, Diego
The discourses of practitioners in nineteenth- and twentieth-century Spain
Call number: R724.C3274 2009

*  Chapter  Document 68
Nye, Robert A.
The discourses of practitioners in nineteenth- and twentieth-century France
Call number: R724.C3274 2009

*  Chapter  Document 69
Burns, Chester R.
The discourses of practitioners in eighteenth-century North America
Call number: R724.C3274 2009
**Document 77**
Zohar, Noam J.

*The discourses of Jewish medical ethics*
Call number: R724.C3274 2009

**Document 78**
Ferngren, Gary B.

*The discourses of Protestant medical ethics*
Call number: R724.C3274 2009

**Document 79**
Amundsen, Darrel W.

*The discourses of Roman Catholic medical ethics*
Call number: R724.C3274 2009

**Document 80**
Engelhardt, H. Tristram

*The discourse of Orthodox Christian medical ethics*
Call number: R724.C3274 2009

**Document 81**
Amundsen, Darrel W.

*The discourses of early Christian medical ethics*
Call number: R724.C3274 2009

**Document 82**
Fan, Ruiping

*The discourses of Confucian medical ethics*
Call number: R724.C3274 2009

**Document 83**
Young, Katherine K.
The discourses of Buddhist medical ethics
Call number: R724.C3274 2009

Young, Katherine K.
The discourses of Hindu medical ethics
Call number: R724.C3274 2009

Baker, Robert B.; McCullough, Laurence B.
A chronology of medical ethics
Call number: R724.C3274 2009

Pernick, Martin S.
Bioethics and history
Call number: R724.C324 2009

Baker, Robert B.; McCullough, Laurence B.
What is the history of medical ethics?
Call number: R724.C3274 2009

Gilbert, Susan
The year in bioethics: The highs and lows of 2008
Georgetown users check Georgetown Journal Finder for access to full text
http://www.thehastingscenter.org/Bioethicsforum/Post.aspx?id=3080 (link may be outdated)

Niebroj, L.
The origins of bioethics: advances in resuscitations techniques.
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*Document 90*

Zhang, Ming-xue; Liu, Sheng

[A comparative study on the ethics of Western and traditional Chinese medicine]

Zhonghua yi shi za zhi 2008 October; 38(4): 209-213

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*Document 91*

Boury, D.; Dei-Cas, E.

Current bioethical issues in parasitology

Parasite 2008 September; 15(3): 489-494

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*Document 92*

van Leeuwen, Evert

Changing moral experiences in European healthcare


Abstract: Solidarity is one of the four values in European healthcare. Solidarity has resulted from a long lasting process governed by the moral experiences of people who suffer and need support. Developments in the modern health care system defy that concept of solidarity in propagating individualized care and insurance. In the long run this might change the moral basis of healthcare.

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*Document 93*

Fox, Renée C.; Swazey, Judith P.

Why we wrote... Observing Bioethics

Clinical Ethics 2008 September; 3(3): 155-158

http://ce.rsmjournals.com/ (link may be outdated)

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*Document 94*

Laron, Zvi

Nicolae C. Paulescu -- scientist and politician.

Israel Medical Association Journal 2008 July; 10(7): 491-493

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*Document 95*

Kiser, Kim
Nuremberg revisited
Minnesota Medicine 2008 April; 91(4):

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Document 96

Lantos, John
The liberal backlash against “Juno”

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http://www.bioethicsforum.org (link may be outdated)

Document 97

Pessini, Leo; de Barchifontaine, Christian de Paul
History of bioethics in Brazil: pioneering voices, educational programs and future perspectives.

Abstract: Although Brazilian bioethics has appeared in a globalized and dynamic context in which the main problems on the current agenda of bioethical questions had already been formulated (e.g., abortion, euthanasia, organ transplants, etc.), it contributed to the bioethics questions agenda by bringing in specific and original problems, linked to the socio-economic-political and cultural reality of Latin America countries and especially the Brazilian one, for instance, public health problems and the accompanying challenges stemming from unjust situations and social exclusion. Historically, first there was a dependence on a foreign ethical model, the North-American principialist bioethical paradigm, almost hegemonic in the first 25 years of world bioethics history. This would be Brazilian bioethics "infancy", the 1990s stage. There follows a movement with a critical attitude about "imported" models, particularly the principialist model, when it comes to public health. We enter here into the "adolescence" of Brazilian bioethics. As we arrive at "the adult" phase, we begin to make a deep evaluation, where the main challenge to face will be complex, involving knowing how to distinguish without severing, and to unite without confounding, bioethical problems of a personal character and those of a public one, that is, knowing how to distinguish among relevance types and scopes of some problems to be faced, in order for us to integrate them in a domain marked by a greater understanding.

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Document 98

Donchin, Anne
Remembering FAB's past, anticipating our future

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Waggoner, Jesse
The role of the physician: Eugene Sanger and a standard of care at the Elmira prison camp.

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Document 100
Fox, Renée C.; Swazey, Judith P.; and Watkins, Judith C.
OBSERVING BIOETHICS
Call number: R724 .F62 2008

Document 101
Aoki, Norihiko
The background of bioethics and environmental ethics
Call number: R724 .A645 2008

Document 102
van Delden, Johannes J.M.
Convergent trends in modern medical ethics: medicine-based ethics and human rights
Call number: R724 .G595 2008

Document 103
Emanuel, Ezekiel J.
The evolving norms of medical ethics
Call number: R724 .G595 2008

Document 104
Marcum, James A.
Origins of bioethics and normative ethics
Call number: R723 .M333 2008

Document 105
Jonsen, Albert R.
The sins of specialists.
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Sass, Hans-Martin
Fritz Jahr's 1927 concept of bioethics
Kennedy Institute of Ethics Journal 2007 December; 17(4): 279-295
Abstract: In 1927, Fritz Jahr, a Protestant pastor, philosopher, and educator in Halle an der Saale, published an
article entitled "Bio-Ethics: A Review of the Ethical Relationships of Humans to Animals and Plants" and proposed a "Bioethical Imperative," extending Kant's moral imperative to all forms of life. Reviewing new physiological knowledge of his times and moral challenges associated with the development of secular and pluralistic societies, Jahr redefines moral obligations towards human and nonhuman forms of life, outlining the concept of bioethics as an academic discipline, principle, and virtue. Although he had no immediate long-lasting influence during politically and morally turbulent times, his argument that new science and technology requires new ethical and philosophical reflection and resolve may contribute toward clarification of terminology and of normative and practical visions of bioethics, including understanding of the geoethical dimensions of bioethics.

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Dame Anne Laura McLaren [obituary]
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It can't happen here: Bovary's Blunder
American Journal of Medicine 2007 August; 120(8): 741

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Oransky, Ivan
Joanne Trautmann Banks [obituary]
Lancet 2007 July 28-August 3; 370(9584): 312

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Sakamoto, Hyakudai

Opening greetings from founding president, Asian Bioethics Association [ABA] [abstract]
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Zahedi, Farzaneh; Ardeshir Larijani, Mohammad Bagher; Mohabe, Azadeh; Esfahani M.M.
Production of knowledge and medicine of Islamic era

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Analyzing Pandora's box: the history of bioethics
Call number: R724 .E8242 2007

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Alan Godfrey Johnson [obituary]
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**The Nuremberg doctors' trial: the 60th anniversary.**

Intensive Care Medicine 2006 December; 32(12): 2049-2052

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Gunderman, Richard B.

**Idealism and realism.**

Journal of the American College of Radiology 2006 September; 3(9): 710-712

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**Jean Bernard. Medicine, science, humanity [obituary]**

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**Historia del Comité de Bioética de Cataluña**
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**Ethics and the European countries in transition - the past and the future**
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*An introductory on medical ethics history in [sic; a] different era in Iran*


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*El boom de la bioética [The boom in bioethics]*

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*A book on medical ethics in medieval Islam: Al-Tashwîk Al-Tibbî (Encouraging Medicine) of Abu'l-Alâ Sâîd B. Al-Hasan Al-Tabîb (1009-1087 A.C.)*


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Singer, Peter; Kuhse, Helga
1980-2005: bioethics then and now
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Ethics in nursing: an historical perspective
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Roelandt, Micheline
Rapport d'activites 2004-2005
Bioethica Belgica 2005 October; (24): 5-15
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Lichterman, Boleslav L.
Basic problems of medical ethics in Russia in a historical context

Abstract: The paper provides a short overview of key problems of medical ethics in the Russian and Soviet contexts—confidentiality, informed consent, human experimentation, abortion, euthanasia, organ and tissue transplantation, abuse of psychiatry. In Soviet ideology common interests were declared superior to private ones. Hence, medical confidentiality was viewed as a bourgeois survival. On the other hand, diagnosis was normally not disclosed to a patient in the case of an incurable disease (especially cancer). Due to the strong paternalistic traditions of Russian medicine the idea of informed consent is still disputed by many physicians. Abortions were first legalized in Soviet Russia in 1920. A brief history of this landmark event is provided. However, abortions were forbidden in 1936 and legalized again only in 1955. Active euthanasia was legalized in Soviet Russia in 1922 but for a short period. Federal law regulating human transplantation was adopted only in 1992 and based on the presumed consent model. Until then forensic autopsy and procurement of cadaver organs were viewed as equal procedures. In 1960s-1980s there was a practice of declaring political dissidents insane in their involuntary treatment.

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Lichterman, Boleslav L.
Soviet medical ethics (1917-1991)

Abstract: Russian medical ethics bears a heavy mark of seven decades of the communist regime. In 1918 the Health Care Commissariat (ministry) was formed. It was headed by Nikolai Semashko (1874-1949) who claimed that "the ethics of the Soviet physician is an ethics of our socialist motherland, an ethics of a builder of communist society; it is equal to communist moral". "Medical ethics" had been avoided until the late 1930s when it was replaced by "medical (or surgical) deontology". This "deontological" period started with "Problems of surgical deontology" written by N. Petrov, a surgeon, and lasted for almost half a century until "medical deontology" was abandoned in favor of "bioethics" in post-communist Russia. There have been five All-Union conferences on medical deontology since 1969. The story of the emergence of "The Oath of a Soviet Physician" is briefly described. The text of this Oath was approved by a special decree of the Soviet Parliament in 1971. Each graduate of medical school in USSR was obliged to take this Oath when receiving his or her medical diploma. It is concluded that such ideas of zemstvo medicine as universal access to health care and condemnation of private practice were put into practice under the communist regime.

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Lichterman, Boleslav L.; Yarovinsky, Michail
Medical ethics in Russia before the October Revolution (1917)
Journal International de Bioéthique = International Journal of Bioethics 2005 September-December; 16(3-4): 17-32, 166-167

Abstract: The evolution of medical ethics in Russia was determined by several factors. First, such Russian concepts as "obshina" (community) and "sobornost" (counciliarism) determined the supremacy of the collective body over the individual body, the state over a person etc. There is no analogue for "privacy" in the Russian language. Second, Russian medical doctors with university degrees appeared only in the 18th century after the politics of westernization by Peter the Great (1672-1725). Medical ethics probably starts from Prof. Matvei Mudrov (1776-1831) of Moscow who followed the Hippocratic credo "to treat not a disease but a patient". Third, after serfdom had been abolished in 1861 medical care in many rural regions was provided by zemstva (local elected councils). Zemskie medical doctors had idealistic views of self-sacrificing for the service to society and to the people. On the other hand, while dealing with illiterate peasants paternalism was a necessity. Ethical problems of healthcare and medicine were a subject of intense discussions both in professional and popular literature. A weekly periodical "Vrach" edited by V. Manassein played an important role in this discourse. Local medical societies adopted their own ethical codes but an All-Russian code of medical ethics was never formulated because the country lacked a national medical society. "Confessions of a physician" by Vikenty Veresaev published in 1901 put problems of doctor-patient relationship and human experimentation in the centre of public debates both nationally and internationally. Two
Russian editions of "Aerztliche Ethik" by Albert Moll also contributed to the discourse on medical ethics in Russia. Medicine as a money-making activity was criticized and ridiculed in Russian literature (see, for example, Tolstoy’s novels and Chekhov’s stories). Medical morality was generally understood as moral life in action when deeds are much more important than words (e.g. formal codes of medical ethics).

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In memoriam: Marc Lappe [obituary]
Hastings Center Report 2005 July-August; 35(4): 10

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Shadi, Heydar
An introduction to the history of medical ethics

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Smith, Cedric M.
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Medical Humanities Review 2005 Spring-Fall; 19(1-2): 30-34

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Abse, Dannie
Carnal knowledge [poetry]
Academic Medicine 2005 February; 80(2): 162
Takahashi, Takao
**Introduction: a short history of bioethics in Japan.**
Call number: R724 .T35 2005

Cheek, Dennis W.
**Ramsey, Paul**
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Gracia, Diego
**Bioethics, from stories to history [review of The Story of Bioethics: From Seminal Works to Contemporary Explorations], edited by J.K. Walter and E.P. Klein [book review]**
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**Daniel Callahan**
Nature Biotechnology 2004 December; 22(12): 1495
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Capron, Alexander Morgan
**Introduction: Bernard Dickens: bespoke public health, law and ethics**
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Gostin, Lawrence O.; Flood, Colleen M.
**Preface: a tribute to Bernard Dickens**
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Kraj, Tomasz

La prospettiva teologica in bioetica, by Salvino Leone [book review]

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Cooter, Roger

Historical keywords: bioethics

Lancet 2004 November 13-19; 364(9447): 1749

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Issues in Law and Medicine 2004 Fall; 20(2): 103-154

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John C. Fletcher – 1931-2004 [tribute]

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**Medical science and social values**

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**Medical ethicists, human curiosities, and the new media midway**

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**Andre Hellegers and Carroll House: architect and blueprint for the Kennedy Institute of Ethics**
Kennedy Institute of Ethics Journal 2004 June; 14(2): 199-206

**Abstract:** The Newman programs established at secular colleges and universities provided an opportunity for intellectual, spiritual, and social growth among the Catholic student population. As a young physician and junior medical faculty member, Andre Hellegers took part in the early organization and ongoing work of Carroll House, the Newman Center at the Johns Hopkins Medical Institutions. Hellegers's experience at Carroll House enabled him to develop a clear blueprint of an academic center of excellence for the scientific, theological, and philosophical exploration of the many problems that he had seen and foresaw in medicine. That center would become Georgetown's Kennedy Institute of Ethics.
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Wolf, Susan M.
**Law and bioethics: from values to violence**
Journal of Law, Medicine and Ethics 2004 Summer; 32(2): 293-306
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**Bioethics and the national security state**
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Paediatric and Perinatal Epidemiology 2004 May; 18(3): 166-167
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**Professor the Reverend Canon GR Dunstan [obituary]**
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McCullough, Laurence B.
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**Health law at fifty years: a look back**


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**Bergdolt, Klaus**

**DAS GEWISSEN DER MEDIZIN: ÄRZTLICHE MORAL VON DER ANTIKE BIS HEUTE**


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**The history of bioethics as a discipline**


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**Ratanakul, Pinit**

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**Kimura, Rihito**

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**Kitagawa, Joseph Mitsuo**

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**Medical ethics, history of Africa: II. Sub-Saharan Africa.**
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Pressel, David M.
**Nuremberg and Tuskegee: lessons for contemporary American medicine**
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McGee, Glenn
**Thirty years of bioethics**
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Smith, Linell
To protect and do no harm – bioethicist Ruth Faden spends her days balancing what is medically possible against what is right, on a national scale
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A historical overview of the developing medical ethics culture in the new Jewish settlement in Israel during the years 1840-1914

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**THE STORY OF BIOETHICS: FROM SEMINAL WORKS TO CONTEMPORARY EXPLORATIONS**


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**The birth and youth of the Kennedy Institute of Ethics.**


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**Shaping and mirroring the field: the Encyclopedia of Bioethics.**


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Beauchamp, Tom L.

**The origins, goals, and core commitments of The Belmont Report and Principles of Biomedical Ethics.**


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Interview with Paul Schotsmans, Past-President of EACME

EACME Newsletter 2002 December (6): 2-3

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**Title:** Van Rensselaer Potter: a memoriam  
**Authors:** Lower, Gerald M., Jr.  
**Journal:** Cambridge Quarterly of Healthcare Ethics 2002 Fall; 11(4): 329-330  
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**Title:** Reflections [editorial]  
**Authors:** Thomasma, David C.  
**Journal:** Cambridge Quarterly of Healthcare Ethics 2002 Fall; 11(4): 326  
**Abstract:** Georgetown users check [Georgetown Journal Finder](#) for access to full text

**Document 258**

**Title:** Dedication: David C. Thomasma [photos]  
**Authors:**  
**Journal:** Cambridge Quarterly of Healthcare Ethics 2002 Fall; 11(4): 323-325  
**Abstract:** Georgetown users check [Georgetown Journal Finder](#) for access to full text

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**Title:** Examining ethics in practice: health service professionals' evaluations of in-hospital ethics seminars  
**Authors:** Alderson, Priscilla; Farsides, Bobbie; Williams, Clare  
**Journal:** Nursing Ethics 2002 September; 9(5): 508-521  
**Abstract:** This article reviews practitioners’ evaluations of in-hospital ethics seminars. A qualitative study included 11 innovative in-hospital ethics seminars, preceded and followed by interviews with most participants. The settings were obstetric, neonatal and haematology units in a teaching hospital and a district general hospital in England. Fifty-six health service staff in obstetric, neonatal, haematology, and related community and management services participated; 12 attended two seminars, giving a total of 68 attendances and 59 follow-up evaluation interviews. The 11 seminars facilitated by an ethicist addressed the key local concerns of staff about the social and ethical consequences of advances in genetics and their impact on professional policies and practice. Seminar agendas were drawn from prior interviews with 70 staff members. During evaluation interviews, participants commented on general aspects that they had enjoyed, how the sessions could be improved, timing, the mix of participants, the quality of the facilitation, whether sessions should be more challenging, after-effects of sessions, and interest in attending seminars and contacting the ethicist in future. Participants valued the increased interprofessional understanding and coherent discussion of many pressing issues that addressed important though seldom discussed ethical questions. The seminars worked well in the different hospitals and specialties.  
**Abstract:** Georgetown users check [Georgetown Journal Finder](#) for access to full text

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**Title:** Philosophical challenges in teaching bioethics: the importance of professional medical ethics and its history for bioethics  
**Authors:** McCullough, Laurence B.  
**Journal:** Journal of Medicine and Philosophy 2002 August; 27(4): 395-402  
**Abstract:** The papers in this number of the Journal originated in a session sponsored by the American Philosophical Association's Committee on Philosophy and Medicine in 1999. The four papers and two commentaries identify and
address philosophical challenges of how we should understand and teach bioethics in the liberal arts and health professions settings. In the course of introducing the six papers, this article explores themes these papers raise, especially the relationship among professional medical ethics, the "long history" of medical ethics, and bioethics. The tendency of bioethics to deprofessionalize medical ethics is rejected, in favor of an historically informed professional medical ethics. It is suggested that bioethics should be critically reconsidered from the perspective of medical ethics as professional ethics.

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Abstract: This paper contributes to the understanding of Ottoman medical guilds, their relationship with the government, and the role played by medical ethics in this framework. Decrees by the sultans (sing. ferman), issued in the Ottoman Imperial Council (Divan) in Istanbul during the sixteenth century, concern themselves also with medical and ethical issues. The sheer number of these decrees may give the erroneous impression that the quality of medicine in the Ottoman Empire was low. This paper argues, however, that many of the complaints brought before the Ottoman authorities were instigated by medical guilds' members against their colleagues and competitors, not by aggravated patients demanding compensation from negligent healers. The discourse of medical ethics was raised in these cases not for its own sake, rather it embodied efforts by medical guild members to defend their economic interests and their intellectual and social status in the brutal competition in the medical realm.

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