

## Editorial

### In defence of bioethicists of the third kind

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*There appears to be a slight lull in the violent controversy triggered by an article published in a well-known review of bioethics in which the two authors argued that if we accept the legitimacy of abortion then we should also accept the legitimacy of infanticide (after-birth abortion) [1]. The article unleashed a torrent of (mostly indignant) comments, the newspapers and blogs were full of it, and in-depth analyses by persons of authority were published in equally authoritative reviews. The commotion was such that the authors felt obliged to write to the review to explain that their paper was intended as a theoretic exercise and not as a proposal that, in certain circumstances, infants should be suppressed [2].*

*It is not intended here to add in any way to the already multitudinous comments on the article (with the exception of a small footnote, since the authors maintain that theirs was an exercise in theory: the violent “pro-life” reactions ranged against the article and the reassertions that infanticide is an abominable violation of human rights could be turned around – still from a “pro-life” angle – to argue that, as infanticide is almost universally considered a crime, we should ask if legalised abortion respects the human rights of the unborn child).*

*The purpose of the present comments is to draw on the article mentioned above (and on the ample literature on the role of so-called “experts” [3]) to reflect on the work of bioethicists, who can be divided into three kinds.*

*Bioethicists of the first kind have a mainly philosophical background; they dissect the reference principles and foundations. Their job is both essential and not easy.*

*The second kind of bioethicists are more numerous and their job is to propose discussion and analysis on the basis of the reference principles and foundations identified by their colleagues of the first kind. We may at times question the usefulness of such discussion: for example, the article referred to above could be subjected to in-depth analysis but in practical terms this would be somewhat sterile. In most of the world's legal systems (alas, not all) infanticide is treated as homicide and, in contrast to legislation on abortion, there is no pressure for change. Thus a proposal to allow infanticide would be universally rejected a priori as being unrealistic and incompatible with existing legislation. This is not intended to belittle the work of many excellent bioethicists: it is simply meant to*

*focus attention on the third category of bioethicists.*

*The third kind of bioethicists work mostly in hospitals, clinics, research institutes and bioethics committees. Their work is to ensure that the sick are protected and respected; it is often performed in silence and very often is of great value.*

*This division into categories gives rise to several considerations. Three are set out here.*

*The first consideration concerns the role of bioethicists. Many years ago, when bioethics had only recently been recognised as a separate discipline with its own philosophy, a respected intellectual wrote that medicine had saved the life of ethics: in his view, the new and often dramatic problems posed by biomedicine had forced philosophers and ethicists – who had become bogged down in arid and sterile theoretical disquisitions – to face up to reality and find answers to urgent questions [4]. More recently a well-known bioethicist repeated the charge. In his essay “Against bioethics” [5], Jonathan Baron accuses bioethicists of defining scientific problems in convoluted moral terms which he claims have led to bioethics becoming a hindrance. Without plunging into the debate (and, it is worth repeating, without formulating charges against bioethicists of the “second kind”, whose discussions often provide useful suggestions), it is possible to express a simple wish: that verbiage and aestheticism as an end in themselves should have no place in bioethics.*

*The second consideration concerns the media. The press, particularly the daily newspapers, whether printed or electronic, is concerned almost solely with the doings of bioethicists of the second kind. Those of the first kind are sometimes given space in leading articles or in the cultural pages, but much less frequently. The third kind of bioethicist is almost completely ignored, appearing occasionally when episodes of malpractice attributable to opinions or other interventions by the competent ethics committee are reported.*

*The third consideration concerns the preparation of bioethicists who sit on ethics committees. A debate is currently in progress in Italy at various levels (in Parliament, in the government and among experts) regarding revision of the legislation governing clinical experiments [6] and the workings of ethics committees [7]. It is to be hoped that the new regulations will promote the nomination to these committees of persons with proven and specific expertise in the field.*

**References**

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