NETHERHALL NEWS

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I. Editor's Introduction

This last month at Netherhall there have been: no guest speakers, no reactions to the release of recent films and no late dinners. Thinking about what to write about in the editorial introduction, I figured that I could fall back on football. But, the World Cup, which everyone has already watched and analysed to death, is now over. And there was not much football in Netherhall for the remainder of the month. So, until next month, adios.

Best,

Ed.

I. EDITOR'S REAL INTRODUCTION

But then, I realised that it is probably worth pausing briefly to consider the summer courses that take over Netherhall in the summer. After all, on a personal note, that was how I initially came into contact with Netherhall (to teach English, not to learn it).

The atmosphere in the house is very different during the summer course. Out go the majority of students and young professionals who inhabit Netherhall during the main part of the year. And, at least in July, in flow hordes of Swiss and Spanish teenagers. As a pseudo-journalist dedicated to honesty in reporting, I must mention that, initially, a few residents were perturbed by the prospect of spending a month with scores of loud Andalucian adolescents.

And, if truth be told, Andalucians are very loud. Part of this perception must stem from a cultural gap. In contrast to stereotypical, but to some extent, real English reserve, they love communicating in noisy songs and shouts, as opposed to achingly polite and hushed conversation. Having moved rooms for July, I was placed next to the football pitch. I can confirm that much of their communication on the pitch is also in the medium of noisy songs and shouts.

And if you leave it at that – trying to decipher the Spanish kids at a distance, as they dart out sentences faster than a machine-gun, armed only with knowledge of a few useless words and phrases (which, owing to the newsletter's anti-vulgar language policy, cannot be repeated) – then you don't get very far. From an external perspective, the July course is easily reduced into a bunch of loud Andalucians briefly colonising Netherhall. (I am sure the initial temptation for the Andalucians to reduce Netherhallites like me into grumpy bores is equally great).

But, during the month, my typically late evening meal after shifts at work often tended to coincide with the Spaniards' before-bedtime-biscuits-and-fizzy-drink supper. Such evenings witnessed my silence amidst their chatter, until one evening, one of the youngest in their group decided to make conversation. It centred upon the weird dish I was eating (it was a curry, as I explained). From these humble beginnings, my previously lonely post-work meals evolved into a chance to converse with them. Admittedly, these conversations often centred on me explaining and defending my choice of food, which seemed to delight and disgust them simultaneously.

But, in time, it became a semi-ritual to have a chat with some of them at the end of most days. And you know what? They're decent kids. Loud, for sure. But interesting and inquisitive in equal measure. So, I guess that I am grateful to that first kid for making conversation. It meant I couldn't reduce them simply to a horde of loud Andalucians. And, hopefully, they revised their grumpy bore theory.

And, as I write this, with Netherhall half empty in between July's and August's courses, I'm hit with a nostalgic air that kills, so to speak. As the house readies itself for the active, amusing and unforgettable cultural interchange that is the August summer course, I really do wish I was teaching again.

Best,

Ed.

(PS – part of my Master's course has involved studying the Hippocratic Oath. So, for this month, I have included an essay that tentatively explores the relation between the Hippocratic Oath and modern bioethics debates. It is not an essay that I had to write for my course – I am not a cheat! – though it relates to some things I have studied. It is perhaps a bit long, but hopefully will be of interest to some of you.)

II. DIRECTOR'S NOTES

This newsletter goes out just as we have a lull in the summer courses. The July groups from Spain and Switzerland have gone and we await the participants on the International Summer Course starting on 2nd August. The course in August is always a wonderful event and this year we have 43 participants from 11 countries. Amongst these is a group from Taiwan led by Peter Herbert (director 1987-96). It's great to have Peter around for the month chatting away in Mandarin, Cantonese, French, Spanish, German, Italian, Catalan and occasional "Wembley" English.

August is busy too for other reasons. A group of 12 including Fr Joe (Netherhall's chaplain) and Alvaro Tintore (Netherhall's secretary) head off to Nicaragua for a two-week work-camp from 7th to 21st August. As in previous years, the group includes doctors who will assist in the understaffed local hospital. The rest of the group will be digging latrines. A number of residents are also involved in the month long Reachout mentoring programme being run in Hackney. Dave Strinati is leading a team of mentors and trying to control some 40 kids aged 8-12. Both these projects are fantastic. They provide a lot of practical help to people in need and foster a spirit of service.

Buildings are never the most exciting news but former residents will be pleased to know that work on the new lift (to provide disabled access to the house) is well underway. The actual building work has been completed and we now await delivery of the lift on 7th August.

Finally I would like to mention the death last week of Jane Lambert, wife of Edwin our former gardener. Jane was a great friend of the House over many years and will be sadly missed. May she rest in peace.

Peter Brown

III. NETHERHALL DIARY

AUGUST DIARY

Wednesday 2nd – Wednesday 30th
August Summer Course

Monday 7th- Monday 21st
Nicaragua Work Camp

Far East Travelogue

Drawing upon his recent trip to the Far East, Neil Pickering recalls meeting a plethora of former residents, old and young.

A reunion of former residents on the occasion of my Eastern trip brought together five decades of Netherhall history. On 24th June in Hong Kong, in an event hosted by Denis Chang – and his wife, Agnes – I was joined by others from the 60s, such as Ian Carlson, now a Judge, and Michael Leung, a paediatrician, both of whom were with me in the late 60s.

Tony Eccles recalled the visit of Henry Cooper in the early 70s, and from the later 70s we were joined by Fr Stephen Lee, who is the Chaplain at Tak Sun School, one of the two schools in Hong Kong run by the East Asian Educational Association (the equivalent of our own Netherhall Educational Association). With the religious instruction entrusted to Opus Dei, the kindergarten/junior school has 1,500 pupils, whilst the secondary school has now grown to 1,000 pupils.

It was fascinating to hear stories from all eras: the "class of the 90s" – with John Wong, Robert Chu, Donald Pang and Gerald Ho – right to the present day with recent residents like Eugene Low, Henry Suen and JJ Lee. There were also several former residents from mainland China who are now working in Hong Kong: William Liu, Leo Wang and George Sun. You will no doubt recognise some from the photograph taken at the reunion. It is never easy to find a time that suits everyone – as busy people in Hong Kong travel a lot – but it proved possible to catch up separately with others like Alec Chan and Mak Sai Yiu, or phone the likes of Michael Chan, those from the late 1970s, as well as Johnny Chan, Adrian Chang, Louis Pang, Jason Hung, Henry Cheng and Jackie Wong (all of whom are from the last decade).

As the flight passed through Tokyo, it proved possible to have a mini-reunion dinner with some former residents now based in the capital city. Again, some of these residents were at Netherhall in the 1960s. In the 1950s, there were only three Japanese residents: Paul Saito, who died a few years ago, Gus Fujimoto, who is now quite ill, and Joseph Uchiyama. It is indeed a sign that Netherhall's history stretches back a long way: Professor Paul Saito, for example, was born in 1913!

One also heard news of the death of Sailosi Kepa. Freddie Long – who is now Minister of Tourism for Johor State in Malaysia – told me of the death of our contemporary, Sailosi, who had led the Fijian rugby team, was High Commisioner of Fiji in UK, Lord Chancellor and Ombudsman. He will be sadly missed. If you look at the ornaments in the Main Lounge, the large "paddle" was a gift from Sailosi when his nephew came to stay at Netherhall. There is also in one of the old Netherhall newsletters a picture of him on the roof garden with Godfrey Kassim Owango, who also died. We will remember them with great affection, and our sympathies go to their families.

You will see from the photograph those who attended the Tokyo dinner. Professor Nishimura was at Netherhall in the 1960s; Toshi Ozawa in the 1970s and others – like Harushige, Kazumasa, Yuki, Koichi Joe – were more recent residents. Go Kobayashi gave a lot of help in organising the dinner, and he, like Harushige, are just setting out on their careers. 24 hours is not enough to

do justice to a country like Japan, but the morning before the flight back home gave Neil the opportunity to meet some who had been unable to attend. Takahiro Sekine (the only Japanese I know with a Scottish accent!), and Nao Tashiro, who will be doing his doctorate in Sheffield from this August. It was also quite moving for me to see Seizo Inabata, who was my pupil in 1973 and whose nephews both attended the summer English Language course at Netherhall.

As a lot of work goes into organising reunions, it was decided to limit it to two. As such, in Singapore and Malaysia it was a string of meeting up with people morning, noon and night! It was really great seeing so many former residents once again: Professor Augustine Chong (1960, now retired), the very first Singaporean in Netherhall, Danny Tan – now a Dato (Sir) – those from the 1970s, such as Hari Gunasingham, Peter Heng, Terence Siew and Raja Rajasingham; from the 1980s Mark Yeo, Jonathan Foong and Phillip Lim; from the 90s, Raj Devadas, Edward Lam and Jamal Hassim; and from the current millennium, Lay Kok Tan and Sony Adhiguna, who has just got married. Soon to get married – on July 8th – is Gus Laude, who, together with Harushige, was actually a resident of Greygarth. The guys helped me to relax: Raj heads the Liverpool Singapore supporters club ("EastofAnfield") so he arranged a front-row seat next to a huge screen at The Penny Black on Boat Quay to watch England thrash Paraguay! Later, JJ would take me to Wanchai to be amongst all the ex-Pats watching England's victory over Ecuador. It certainly served to confuse my body clock, which was already confused enough by the jet lag!

Each of course has his own story, and it is wonderful to see the different eras: some are getting married, others are in the full swing of their careers, while others are retired. It is marvellous to hear how their families are growing, and the possibilities that the children of some may relive their fathers' stays in Netherhall. Almost everyone was told of the monthly email Netherhall Newsletter, so hopefully there will be contributions from former residents of different eras to demonstrate how Netherhall truly is a big family. [NP]

Re-reading the Hippocratic Oath

The April edition of the newsletter featured a write-up of Professor Sir David Watson's talk on education, entitled 'Does Higher Education Need a Hippocratic Oath?'. There was also an article on a debate on recent attempts to legislate for euthanasia in this country, outlining Lord Brennan's argument against euthanasia. Part of the summarised argument, to quote the article, referred to the Hippocratic Oath:

"The Hippocratic [O]ath whereby doctors promise not to administer poison to their patients, will be changed. Are we prepared to set aside the Hippocratic [O]ath that has been the mainstay of trust in the medical profession for centuries?"

What both these examples show is that the Hippocratic Oath has a cultural resonance in contemporary society. It stands for something ennobling that links professional work to a set of values prescribing practice. Perhaps the allusion to Hippocrates – often murkily recalled as the founder of medicine in the West - confers a sense of connection with the past, with a respectable tradition of values giving social and moral definition to medical practice. Ostensibly, the Hippocratic Oath remains relevant as demonstrated by its inclusion, in some form or other, at graduation ceremonies in many American medical schools or through its integration into bioethical debates (most recently, in this country, on euthanasia). At the same time, however, over the past 70 years or so, historians of medicine have been faced with a growing sense of scepticism in relation to the historicity of the Hippocratic Oath. By historicity, I do not mean whether or not it

actually existed in ancient Greece – it did – but the precise form, function and meaning with which it was written and later interpreted.

The relevance of the Oath is particularly important in regard of bioethical debates. Take euthanasia. It should be noted, to begin with, that what the Hippocratic Oath may or may not say about euthanasia is *not* the central point in arguments for or against euthanasia. Indeed, appeals to the Hippocratic Oath do not necessarily form a part of *all* arguments against (or, rarely, for) euthanasia. Nonetheless, during the course of an argument against euthanasia, an appeal to the Hippocratic Oath itself may be made in order to bolster the position. Likewise, a critique of a position advocating forms of euthanasia on consequentialist or utilitarian grounds, while based in the main on a rejection of utilitarian principles, may also cite how this position subverts the Hippocratic tradition.

What is the relevance of the original meaning and purpose of the Oath? What is the substance and relevance of a Hippocratic tradition within medicine? Ultimately, how problematic is the updating of the Oath in recent times? It may be noted that the position outlined below is, firstly, provisional – it is more food for thought than anything else – but also contentious in some of the scepticism articulated. This scepticism is not directed towards the possibility of authoritative moral arguments, but simply at the relevance and authority of the Hippocratic Oath in particular moral debates.

Firstly, what exactly was the Oath? Despite arguments among scholars, often centring on very technical details, the Oath is usually dated to Greece in around 400BC. It is a surprisingly short text which can briefly, though imperfectly, be summarised as follows.

The oath-taker swears by Apollo (and various other gods): to show respect to his teachers; to safeguard his *technê* (a Greek word that is notoriously difficult to translate: it means something along the lines of art, or expertise, or craft); and to pass on his knowledge. The middle segment that follows is perhaps the most famous, for the oath-taker will not use his knowledge for ill; he will keep people from “harm and injustice”; he will not administer “a drug that is deadly to anyone if asked” nor give a woman “a destructive pessary”; and, strangely to modern ears, he will “not cut, and certainly those not suffering from stone” but will leave this for “practitioners of this activity” (the exact meaning of this presumable allusion to surgery, specifically lithotomy, need not trouble us in the context of this essay). And finally, the oath-taker swears not to perform injustices, including sexual acts, upon those whose houses he enters, and he also swears confidentiality.

Who wrote the Oath? The ultimately dissatisfying answer to this question is, in reality, we do not and cannot know. The Oath was part of a collection of many texts that formed what is known as the Hippocratic Corpus. It was a few centuries later that we have solid evidence that these texts were circulating under the name and authority of Hippocrates. But, problematically, the texts within the Corpus are not obviously the work of a single author. In fact, through their differing conceptions of medical theory, practice and stylistic differences, the various texts that comprise the Hippocratic Corpus – that is to say, the various texts attributed to Hippocrates – are quite clearly *not* the work of a single author.

More problematically, consensus among most historians of medicine is such that it is not possible to establish authentic Hippocratic texts from inauthentic ones. The arguments involved in this are extremely technical and dense (and, occasionally, dull…). But, in a simplified form, consider the following example.

At the outset, it is worth bearing in mind that when dealing with such old texts, we are not talking about original

copies written by Plato or Aristotle or Homer. Rather, we are dealing with copies of copies made by later scribes. (The earliest complete version of the Hippocratic Oath is an Egyptian papyrus dating from 300AD, some 700 years after the 400BC dating most people ascribe to the Oath). Now, on reasonable grounds we have a body of texts that are attributed to Aristotle, the *Ethics* and *Politics* among others. Suppose a new text that appears to be Aristotelian is discovered on a papyrus in Egypt (which, because of the dry conditions prevalent in certain areas, is particularly conducive to the survival of ancient texts on papyri). In order to establish whether or not this is a genuine work of Aristotle, we would have to negotiate both the internal and external evidence.

Internally, this would mean scouring the new text and comparing it to what is written in the other texts already reasonably attributed to Aristotle. Obviously, if, contrary to, for example, Aristotle's known criticisms of Plato's notion of communal reproduction in the ideal society set out in the *Republic*, this new text articulated strong support for this notion, then there would be a problem. Externally, it would mean looking for references to this new text in the works of contemporary and later writers (though, it must be said, this is not a foolproof method in and of itself).

Now, in the case of the texts attributed to Hippocrates – including, of course, the Oath – the external evidence is extremely poor. In terms of authors writing during a reasonably close time to the Oath, there are a few very limited references in Plato and Aristotle to Hippocrates in general. These references are not much help in ascertaining authenticity. Further, in terms of internal evidence, the absence of any certifiably known Hippocratic text – i.e. a text definitely written by Hippocrates – the exercise is futile. Unlike the cases of Plato and Aristotle, there is no central body of texts against which to measure individual texts. While in many interpretations of the Oath there is a clause prohibiting abortion, in another text included within the Hippocratic Corpus (called *On the Nature of the Child*), the author describes – in the first-person perspective – how he administered an abortion to the slave girl of his kinswoman. If contemporary medical historians are right – and their arguments are strong - then Hippocrates does not really exist as an author for us in the way Aristotle and Plato do. He is a figure who was written about. Consequently, all the texts within the Corpus – whether *On the Nature of the Child* or the Oath – are connected to Hippocrates in name only.

Following from this, one might reasonably contend that, although reference to Hippocrates himself in relation to the Oath may be loose and even figurative (in the same way that, following the practice of people in the ancient world, we refer to the author of the *Iliad* and *Odyssey* as 'Homer' without really knowing who or, indeed, how many people wrote them), the contents of the Oath had and can still have a certain normative potency, whether through its general, overall force or the force of particular clauses. Once again, however, historically speaking there are problems.

Firstly, the general purpose of the Oath is not clear. The last substantial attempt to attribute a specific purpose to the Oath came in the first half of the 20th century. The medical historian L. Edelstein argued that the Oath was a "Pythagorean manifesto". The Pythagoreans followed, as the name suggests, the particular (and even peculiar) precepts of the philosopher Pythagoras, though the details of these need not concern us here. The point is that Edelstein was giving the Oath a very sharply defined ideological purpose (the Pythagoreans really tried to live out their philosophy) and intellectual context. Almost all medical historians have not accepted this thesis since Edelstein first proposed it. Modern scholars stress how difficult it is to place the general purpose of the Oath – was it to be sworn as

allegiance to a set of values, or allegiance to a particular guild of doctors? – and the precise intellectual milieu it reflects. They generally shrink from making claims about the general purpose of the Oath in the absence of sufficient evidence with which to substantiate such claims. What is clear, however, is that in the ancient (and, perhaps to some extent, the medieval world) the Oath was not *the* norm for the medical profession. Unlike the modern world, there was no centralised curriculum for training doctors. While the values of wider society and uncodified values of the medical profession undoubtedly must have had an effect on physicians, there was certainly no universal and public acceptance of the Oath in the ancient world (in fact, our evidence of use of the Oath in the ancient world is extremely limited).

Secondly, the precise meaning of particular clauses in the Oath is contentious. That is not to say that strong cases cannot be made for certain readings, but often counter-arguments are strong too. For instance, at one point in the Oath, having outlined how he will use medical regimens for the benefit of the ill and keep them from what is harmful or unjust, the oath-swearer then says, "And I will not give a drug that is deadly to anyone | if asked…nor will I suggest the way to such a counsel". Ostensibly and plausibly, this might be read as a prohibition on euthanasia: the doctor is not permitted to give a death-dealing drug to someone who asks for it. But, on the other hand, alongside no real evidence of debates on what we would now call euthanasia in Ancient Greek medicine (and some evidence of its practice), the prohibition might, as some have argued, be forbidding the handing out of deadly drugs for someone else whether to use on himself or on a third party (i.e. the physician is prohibited from handing out deadly drugs that others might use with murderous intent). This corresponds to a suspicion that endured through antiquity of those with medical knowledge. Doctors had knowledge of drugs whose perceived pharmacological or even magical effects could be used for ill and this resulted in a perennially problematic social image of the doctor as potential poisoner. Even law codes from the 4th century AD reflect this ancient anxiety over this aspect of doctors' knowledge.

The next clause in the Oath is no less contentious and relevant to modern debates. It prohibits giving to a woman (in Ancient Greek) a *pesson phthorion*. How do we translate this? Some render it, "I will not give an abortive remedy to a woman" (i.e. a prohibition on abortion), while others prefer the more literal (and limited) "I will not give to a woman a destructive pessary". Arguments for both readings, though technical, are plausible. Briefly, one may argue, for example, that if the previous clause is indeed prohibiting euthanasia, then this clause is prohibiting abortion, thereby forming a consistent sanctity of life ethic of sorts, which protects life from its beginning to its end. (This argument is proposed by Leon Kass, the prominent American bioethicist who was chairman on the President's Council on Bioethics from 2002 to 2005). Alternatively, if the clause covering the "deadly drug" does not refer to euthanasia but to dispensing harmful substances, then this clause extends this insofar as it relates to a technical discussion that was current in Greek medicine at the time on the dangerous, potentially noxious effects of pessaries on women's health: in this reading, both clauses reflect a social sensitivity towards the possibly dangerous knowledge physicians had.

What both these examples show are the difficulties in interpreting the Oath, particularly given the difficulties of establishing its general purpose and context in Ancient Greek medicine. For what it is worth, my personal inclination – though I am certainly not a specialist on this – is that the second clause does indeed prohibit abortion in general, though this is not wholly conclusive. The reason for this is rather particular and creates a complication of its own. The "deadly drug" not to be given to anyone is

described by the Greek word *thanasimon*, meaning "deadly" or "fatal": clearly the implication of this adjective is a drug that can kill a person, that is homicidal. The adjective describing the pessary, however, is *phthorion*, which means "destructive": this does not have the same connotations of homicide. This raises a further question of whether or not, according to the Oath, adult and foetal life are seen as having, in modern terms, the same 'rights'. Or in more technical language, it is not clear to me that, even if it does prohibit abortion, the Oath assigns the same ontological status to foetus and adult.

There is another important issue, however, to bear in mind. Whatever the difficulties of understanding the original meaning and purpose of the Oath, difficulties which may render its interpretation speculative, there have also been more clearly defined traditions of interpretation of the Oath. Interestingly, in the ancient world, it arguably did not have the same social resonance it now enjoys, as shown by two interesting points. Firstly, there are very few references to the Oath as *the* source of authority defining the ethics of medical practice for doctors. The 1st/2nd century gynaecologist Soranus described how the doctors of his day were divided into two parties on the question of whether or not abortion was licit. One party, he says, forbids all abortion, "citing the testimony of Hippocrates", while another (to which Soranus subscribed) is willing to perform an abortion if the mother's life was in danger. But, secondly, as this example suggests, there was a school of interpretation that understood Hippocrates in a particular way that is recognisable to modern people.

Now, while there are only two references to the Oath that we have in texts from the 5th to 11th centuries, from the central Middle Ages onwards, it was rediscovered and mentioned far more frequently in the works of Christian and Islamic scholars. Despite inevitable divergences in understandings, there tended to be commonalities of interpretation. This contributed towards what we may broadly speaking call a tradition of interpretation, exemplified by reading the Oath as prohibiting the practice of abortion (though, since it was not a biting social issue at the time and in the absence of a large number of aged people among the population, euthanasia in the modern sense was not an issue).

It is perhaps through this medieval legacy that the Oath emerged into the modern world bound with a certain authority. Given the scepticism I outlined above – strong interpretations *can* be forwarded but they are not *absolutely* conclusive – what relevance does the Oath still have today? Is it a worthwhile avenue of debate in arguments about modern bioethical issues? Provisionally, I would offer one negative conclusion and one slightly more positive one.

Examples of what I think are ultimately misleading and problematic uses of the Oath lie in modern reworkings. As suggested above, the Hippocratic Oath has a powerful cultural resonance in the modern world. Even in the mid-19th century, American doctors wanted to codify an articulated set of values to govern their profession. Moreover, this was *explicitly* connected to what was seen as the spirit (as opposed to the letter) of the Hippocratic Oath. Fast forward a century and in 1957, the American Medical Association (AMA) published a 'Principles of Medical Ethics' document, which was essentially a reworking of the mid-19th century document and, likewise, was seen in the tradition of the Hippocratic Oath. The fascinating opening principle stated,

"The principle objective of the medical profession is to render services to humanity with full respect for the dignity of man"

In and of itself, this may be considered a worthwhile governing principle for medical practice, casting it as a communitarian service that is in some sense prescribed according to what the

document calls “the dignity of man”. In 2001, the American Medical Association published an updated version of its own ‘Principles of Medical Ethics’ (there had been another version in the 1980s). The 2001’s opening principle states:

“A physician shall be dedicated to providing competent medical care, with compassion and respect for human dignity and rights”

This reworking is interesting for two reasons. Firstly, for what it reflects in terms of wider social changes over the past 40 years or so. The reference to “competent medical care” perhaps indicates the social pressures of litigation that have increasingly affected the medical profession. It also reflects a growing professionalisation of medicine. By professionalisation, I do not mean increasingly technical competence, though this may be the case, but growing understanding of the public role of the doctor less in terms of a servant to society and more in terms of a working professional (albeit one performing a vital role). Moreover, the values that prescribe the boundaries of medical practice in this 2001 version are no longer summarised as “the dignity of man” but as “human dignity and *rights*”, doubtless reflecting the growth of rights discourse in relation to medical practice over the past generation (consider the prevalence of arguments alluding to “a right to die”, etc).

Secondly, it is not entirely clear to me whether these sets of principles should be connected to the name of Hippocrates. This is not simply because of historical scepticism regarding the original meaning of the Oath. For, in fact, despite problems in analysing the Oath’s original meaning, the AMA’s principles, especially in the 2001 version, are clearly far removed from the various interpretations of the Oath. But, perhaps most importantly, associating these values – including the ambiguous reference to rights – with the name of Hippocrates, clouds the more traditional interpretations of Hippocrates (and, more importantly, the guiding principles of medical ethics that these principles assume), and normalises more novel principles under the authoritative banner of an oath.

The same sort of problem faces medical schools that hold oath-taking ceremonies upon graduation, as happens in some, though not all, medical schools in America. Only one uses a translation of the Oath from the original, a large number use amended versions and others use different oaths. In principle, the notion of taking an oath for a profession like medicine is a good thing: it relates the practice of medicine to a set of values that are readily summarised and articulated to the rest of society. But, my problem is, as oath swearing in American medical schools suggests, the oaths have a semblance of authority despite their divergences. In terms of public representation, it seems that sometimes the fact of having an oath, despite the arbitrary nature of some of them (one American medical school invites students to write personal oaths modelled on the Hippocratic Oath) solidifies ethical principles contained therein: substance is subordinated to appearance. Surely it would be far more cogent if the real authority is seen to stem from ethical principles that are then codified and solidified into oaths?

Another example of the problem of reworking the Oath comes from a document published by the National Catholic Bioethics Center (NCBC), called ‘The 1995 Restatement of the Oath of Hippocrates circa 400BC’. For example, in one passage, which is a reworking of the “deadly drugs” part of the Oath, the document states:

“I will neither prescribe nor administer a lethal dose of medicine to any patient even if asked, nor counsel any such thing nor perform act or omission with direct intent deliberately to end a human life”

Clearly this passage prohibits euthanasia and reflects prominent contemporary debates on this question. Now, as far as summaries go, this is a decent though not wholly comprehensive summary of the Catholic position on euthanasia. Perhaps one would strongly support a scenario in which doctors swore and stuck to such an oath. So what is the problem? Firstly, given the substantial difference between this and the Hippocratic Oath – coupled with the afore-mentioned ambiguities and uncertainties – I am not sure how licit it is to label it explicitly as a restatement of the Hippocratic Oath. Another section from the NCBC Oath on abortion reads:

"I will maintain the utmost respect for every human life from fertilization to natural death and reject abortion that deliberately takes a unique human life"

Whatever the cogency of this clause in and of itself, its relation to Hippocrates is problematic. Even those who interpret the Hippocratic Oath as prohibiting abortion have articulated doubts on whether abortion is actually prohibited in the Oath on the grounds that foetal life in equal terms to adult life. But, a further problem is this. Suppose in the midst of a debate on euthanasia, two people are arguing. One, a traditional moralist, argues that the deliberate, intentional taking of human life – by a lethal injection, for example – is morally unjustifiable. The other, by contrast, is a utilitarian who argues that in some circumstances, administering euthanasia may be morally justified (or even obligated) if someone consents to it, with the further advantage that it could save money that might have been used on expensive treatment. Their argument broaches important questions, on one hand, of intrinsically wrong acts, the distinction between acts and omission, and the inviolability of human life, and on the other, autonomy, consent and consequences. Suppose, further, that the traditional moralist invokes the Hippocratic Oath to support his position. The utilitarian may reply by pointing to the historical problems regarding the Oath and question why it should have normative force today (as many do). The ensuing debate may then refocus on historical aspects of the Hippocratic Oath. Alternatively, he may (as is not unknown) try to appropriate the Oath for himself, perhaps by casting euthanasia as 'mercy killing' and thereby complementary to rather than contradictory with the (rather vague) 'do no harm' principle (with a particular understanding of 'harm'). Of course, reshaping the Oath along the contours of modern utilitarian or liberal principles (like autonomy), would also constitute a huge, if not contradictory, divergence from the original tenor of the Oath.

It strikes me that the complications regarding the Hippocratic Oath into which such a debate can (though by no means necessarily does) fall distract attention away from the central issues, namely the competing claims between autonomy and inviolability, between a 'right to life' and a 'right to die'. Moreover, the Oath constantly seems to be rewritten in varying degrees of relation to the original: the substance of the resulting oaths changes, while the appearance of authority remains. By rewriting the oath along one's own lines, even if it *is* premised upon sound, defensible moral principles, nonetheless contributes to this masking of substance: the very act of rewriting in order to harness some of the social authority associated with the title, 'Hippocratic Oath', can risk ceding substance to appearance.

On the other hand, where mention of Hippocrates may be relevant is in reference to abandoning what is sometimes called the 'Hippocratic tradition of medicine', part of which would have included a tradition of interpretation(s) of the Oath, as outlined above. This abandonment reflects the increasing dominance in the West, over the past 50 years and with particular acceleration more recently, of strictly consequentialist and utilitarian modes of thinking in relation to bioethical and other social issues. In and of itself, this allusion

to the abandonment of a tradition is not an argument against such modes of thinking, let alone an argument against euthanasia. But, it is, for many people, cause for concern, pointing to a dramatic change in medical practice and principles. The quotation from the article on Lord Brennan's argument against euthanasia, quoted above, perhaps makes a legitimate use of this idea. Implicit in the brief quotation is the idea that for a long time we have taken the Oath as a token of trust in the doctor's social role and the moral boundaries delimiting this role. Undoubtedly, there is something peculiarly modern about the application and centrality of utilitarian theories or principles centred on autonomy in bioethical debate. These contradict a strong social tradition and, at the very least, must be examined very thoroughly without dismissing such critical examinations as a reactionary stance.

Nonetheless, and perhaps it is strange thing for someone who studies ancient history to write, but this is a context in which I think it is better for fragments of ancient history to be held at a distance, and for their relevance not to be overemphasised. I would rather that Hippocrates – whoever he was and whatever he might or might not have said – did not divert attention from the issues at the heart of the very real and grave moral questions that face medical practitioners, government policy makers, bioethical thinkers and, most importantly, families today. In this sense, perhaps the significance of the ancient historian might be to demonstrate the irrelevance or, at least, highly problematic relevance of this particular ancient evidence to contemporary issues. By adopting a sceptical position on the relevance of ancient medical practice, we might illuminate the far more important matters lying at the divided heart of modern medical principles and social policy. [ZM]

IV. Former Residents

PASSING BY…

One visitor this month was **Kai Eberspaecher** (1995-97)**,** one half of the "large" team (the other team member was Arrigo Triulzi) that, occasionally, used its (substantial) weight to bully the then secretary of the house, Michael Lowenthal.

Kai is married to Debbie and they have a son, Max. They live just outside Reading. He works in the oil and gas industry and is currently working in Kazakhstan on a "4 weeks on / 4 weeks off" arrangement. Kai is still in contact with residents from his era and was recently at Arrigo's wedding.

On the same day that Kai called in we had a surprise visit in the shape of **Adrian D'Oliveira** (2003-4)**.** Adrian was on holiday in the UK catching up with friends. He is now working as a barrister in Johannesburg and attending recollections organised by Andres Merino (Netherhall's former secretary, 2002-05). Adrian says he hasn't time to read the newsletter but would make an effort if his name appeared! It seems Adrian has not continued his acting career despite the acclaim he earned acting alongside Robert Devlin (and under the critical eye of Dilip Bassi) in the Netherhall production of *The Real Inspector Hound* in 2004.

Diego Barroso (2003-4) was another summer visitor. He was spending a weekend in London with his girlfriend, Neus (Snow). Diego continues to set the marketing world alight in Barcelona.

Radha Faraj (1967-70) called in on a flying visit on his way to USA. He now works in Bahrain.

A Letter From Down Under

[*Former Resident, **Michael Nestor** (2004-05) was in recent contact with Netherhall. He has moved to Sydney, Australia, to continue studying sound engineering. He kindly agreed to put bits of his correspondence in the newsletter. It offers a typical example of the intricacy and intimacy of keeping in touch with former residents*]

I arrived in Sydney four days ago. I was working up until the night before departing, on that Irish Dancing Show, so I didn't get a chance to make a pit-stop in Netherhall.

Sydney is incredible. My brother, Sean, (who's been living here for 20-something years), picked me up from the airport and took me on a drive around the city. We checked out the Harbour, which has to seen to be believed. It's so beautiful. Sean told me you can't buy a property on the harbour for less than $10million.

We had lunch there and I tried Squid for the first time. The texture is exactly what I expected, (yucky-gross rubbery kinda thing), but it's very tasty. After a stroll on Bondi Beach we took a spin around the suburbs and then found the place I'm staying at.

Warrane is a cool place, but as you know, it's the people that make it special. Everyone here is unbelievably sound. The biggest thing I've noticed is that Sydney-siders are happy, upbeat, funny people. I guess it's only natural when the weather is so good all the time.

I checked out my University yesterday. It's incomparably better to its London equivalent. It's huge, ultra modern (the student ID doubles as a key card to get access to class rooms, studios and computer rooms), and the staff are so nice and take pride in their University and the very impressive Hall of Fame of ex-students.

Also, there are opportunities to work in Studio 301 (this is the commercial recording studio attached to the University, since no

commercial work can be done in the Uni itself). It's Australia's top studio and it's where Metallica mastered "The Black Album" (unquestionably the most important rock album of the 90's). The work is small (coffee boy stuff) but you're surrounded by incredible engineers and artists and it’s an amazing place to learn the ropes. So I'm very happy that I decided to study here for the year and my first impressions of Sydney are very positive.

Fast food is rampant though. It's everywhere! I don't eat junk food at all and I have to say I almost gagged walking down one street because of the greasy haze pouring out of restaurants.

It's the middle of winter at the moment, but I'm wearing a t-shirt. It gets chilly enough at night but coming from Ireland, it's very comfortable. The sun is intense and I will have to wear sun-screen almost every day of the year.

Take care for now,

Michael