
PREFACE

At the time of the first publication of the *Encyclopedia of Bioethics* in 1978, the then fledgling field of bioethics was neither well defined nor widely recognized. Warren Thomas Reich, then Senior Research Scholar in the Kennedy Institute of Ethics at Georgetown University, envisioned a major reference work that would contribute significantly to the establishment of bioethics as a field by integrating historical background, current issues, future implications, ethical theory, and comparative cultural and religious perspectives. Professor Reich became the editor in chief for the first edition, a four-volume set that, as he foresaw, was immediately acknowledged as a landmark reference work defining the field.

The 1978 edition received the American Library Association's 1979 Dartmouth Medal for outstanding reference work of the year, as well as widespread critical acclaim. The eminent bioethicist Daniel Callahan, writing for *Psychology Today* in March of 1979, entitled his stellar review of the *Encyclopedia* "From Abortion to Rejuvenation: A Summa of Medical Ethics." *Choice* declared the work "an outstanding achievement." *Social Science* described the work as "magnificent," and the *Hastings Center Report* acknowledged it as both "an astonishing achievement" and "a major event." Throughout the 1980s, as programs in bioethics and medical humanities proliferated in professional schools, undergraduate and graduate school curricula, "think tanks," and academic societies, the first edition of the *Encyclopedia* was considered the essential reference work in the field, and contributed significantly to intellectual vitality.

While the 1978 first edition will always be essential and fascinating reading for anyone interested in the history of bioethics, it was, by the late 1980s, in need of a revision. A reference work at the interface of biology, technology, healthcare and ethics becomes dated due to the fast pace of biotechnological development, changes in the healthcare

delivery system, and the emergence of important new voices in a rapidly expanding field. Although in certain respects the modern bioethics movement began in the United States, it took root in many countries around the world during the 1980s, requiring the inclusion of scholarship from other nations and cultures in order to properly reflect worldwide growth. Professor Reich impressed all those working on the second edition with his remarkable grasp of the history of medical ethics, of the modern bioethics movement, of European thinkers, of religious ethics and moral philosophy, and of salient clinical issues.

The revised edition included various topic areas including: professional-patient relationship; public health; ethical theory; religious ethics; bioethics and the social sciences; healthcare; fertility and human reproduction; biomedical and behavioral research; history of medical ethics; mental health and behavioral issues; sexuality and gender; death and dying; genetics; population; organ and tissue transplantation and artificial organs; welfare and treatment of animals; environment; and codes, oaths, and other directives. All of these topics are retained and enhanced in the third edition.

The five-volume revised edition, which was carefully planned at editorial meetings in the spring and fall of 1990, was supported by both the National Endowment for the Humanities and the National Science Foundation, in addition to several private foundations and individual donors. The Joseph P. Kennedy, Jr. Foundation was a major funder of both the first and the revised editions. Published in 1995 by Macmillan Reference Division, it received the same high level of acclaim as the first edition.

Development of a Third Edition

Yet with the passing of the 1990s, the *Encyclopedia* again required a thorough revision and update. Warren Reich,

professor *emeritus* at Georgetown and deeply engaged with a new project on the history of “care,” decided not to prepare the third edition. He recommended Stephen Garrard Post—who had served as his associate editor in the preparation of the second edition—for the position of editor in chief of the third edition. Subsequently, Macmillan Reference, after consulting with Georgetown University (which had sponsored the first edition), offered the position of editor in chief to Post.

This invitation was accepted with the understanding that a third edition could only emerge from the already remarkable scope and framework of the revised edition, and would be much indebted to all those responsible for that extraordinary work, including the following area editors: Dan E. Beauchamp, Arthur L. Caplan, Christine K. Cassel, James F. Childress, Allen R. Dyer, John C. Fletcher, Stanley M. Hauerwas, Albert R. Jonsen, Patricia A. King, Loretta M. Kopelman, Ruth B. Purtillo, Holmes Rolston III, Robert M. Veatch, and Donald P. Warwick.

There are more than 110 new article titles in the third edition, and approximately the same number of new articles appearing under old titles. Thus, half of the third edition is entirely new, while half consists of deeply revised and updated articles from the earlier edition. There isn’t a single article that was not thoroughly updated, even if only at the level of bibliographies. The least revision was needed in the topic areas of environmental ethics, population ethics, and the history of medical ethics. For all necessary revisions, we went back to the articles’ original authors, whenever possible, and many accepted to undertake the revision work. In those cases where the original authors were not available, new authors were asked to complete the work. Both original and new authors are acknowledged and their contributions clearly identified in the bylines. A small but exceptional set of articles from the revised edition were designated by the editorial board as *classics*, and are retained in the third edition unchanged. These articles were selected because they were written by a distinguished contributor to the field and were still deemed definitive. For example, Daniel Callahan’s article on “Bioethics” was retained as a classic, as was Reich’s “Care: I: History of the Notion.” Also included without revision are those articles under the title “Medical Ethics, History of,” which do not pertain to the contemporary period. But all articles dealing with the contemporary period were significantly revised in order to be current with the many developments in bioethics over the past decade in countries and regions across the world.

EDITORIAL BOARD. The development of this third edition of the *Encyclopedia* was facilitated by a new editorial board consisting of area editors David Barnard, Dena S. Davis,

Eric T. Juengst, Loretta M. Kopelman, Maxwell J. Mehlman, Kenneth F. Schaffner, Bonnie Steinbock, Leonard J. Weber, and Stuart J. Youngner. These editors were selected because their particular expertise—as philosophers, ethicists, healthcare professionals, and teachers—was needed to revise and expand those topic areas from the revised edition where new developments had been particularly rapid over the 1990s. The Editor in Chief and the Editorial Board were responsible for the intellectual planning of the third edition, including all decisions about contents and authorship, as well as for reviewing and approving all manuscripts. Mark Aulisio served as associate editor for ethical theory and clinical ethics.

CONSULTANTS. William Deal, Patricia Marshall, Carol C. Donley, Sana Loue, Robert H. Binstock, and Barbara J. Daly made significant contributions to the quality of the overall work as editorial consultants. Carrie Zoubol assisted with bibliographical updating.

The Appendix, found in volume five of the *Encyclopedia*, consists largely of an exhaustive collection of historical and contemporary codes and oaths across all the healthcare professions, as well as research ethics guidelines and regulations. The remarkable collection of primary documents in the revised edition was thoroughly updated by Kayhan Parsi of the Neiswanger Institute for Bioethics and Health Policy at the Stritch School of Medicine of Loyola University. This was a major task because there have been so many revisions of contemporary documents since the early 1990s, as well as the introduction of many new policy and ethical statements from a wide array of professional organizations. Carol C. Donley contributed an annotated bibliography on literature and medicine from the Center for Literature, Medicine, and the Healthcare Professions at Hiram College. Emily Peterson added an annotated bibliography on law and medicine. Doris M. Goldstein, Director of Library and Information Services at the Kennedy Institute of Ethics, Georgetown University, thoroughly updated the section on “Additional Resources in Bioethics,” which she had prepared for the revised edition. Volume five is the fruit of much labor and will be a definitive resource for the field over the next decade.

Acknowledgments

The day-to-day work of preparing the third edition entailed close collaboration with the publisher’s team in New York and Michigan. None of this work would have been possible without a publisher able to efficiently implement the intellectual plan. The Macmillan team commissioned all the articles, maintained contact with all authors, coordinated reviews, copy edited all manuscripts, checked revised manuscripts and bibliographies, and prepared all materials for

production. In particular, Hélène G. Potter, Editor in Chief of Macmillan Reference USA, provided vision and managerial insight for the development of the third edition—as well as many thoughtful perspectives. Similarly, Monica M. Hubbard, Senior Editor with Macmillan Reference USA, provided excellent leadership in implementing all the operational aspects of the project. Before the revision project began in earnest, Elly Dickason, prior to her retirement from Macmillan Reference USA, provided her usual thoughtful guidance.

The Department of Bioethics, School of Medicine, Case Western Reserve University, provided a collegial environment for a number of those involved as editors, consultants, authors and reviewers. The School of Medicine has a long tradition of humanism in medicine that creates a welcome atmosphere for the *Encyclopedia*.

We wish to acknowledge support for both the revised and third editions from The Alton F. and Carrie S. Davis Fund of the Cleveland Foundation. In addition, the John Templeton Foundation provided Stephen Post with a generous grant in 2002 in support of a research institute on altruism and compassion, “The Institute for Research on Unlimited Love—Altruism, Compassion, Service,” which allowed him to devote additional editorial time to related themes in the third edition, especially as these pertain to the ongoing dialogue between science and religion.

STEPHEN G. POST
EDITOR IN CHIEF
SEPTEMBER 2, 2003

INTRODUCTION

In the Introduction to the 1995 revised edition of the *Encyclopedia of Bioethics*, Warren Thomas Reich, Editor in Chief, defined bioethics as “*the systematic study of the moral dimensions—including moral vision, decisions, conduct, and policies—of the life sciences and health care, employing a variety of ethical methodologies in an interdisciplinary setting.*” This definition shapes the third edition, which continues the broad topical range of earlier editions.

The word *bioethics* was coined in the early 1970s by biologists in order to encourage public and professional reflection on two topics of urgency: (1) the responsibility to maintain the generative ecology of the planet, upon which life and human life depends; and (2) the future implications of rapid advances in the life sciences with regard to potential modifications of a malleable human nature. In his book entitled *Bioethics: Bridge to the Future*, published in 1971, Van Rensselaer Potter focused on evolutionary biology, a growing human ability to alter nature and human nature, and the implications of this power for our global future. Other life scientists at that time, such as Bentley Glass, Paul Berg, and Paul Ehrlich were among many similarly interested in spurring thought on the biological revolution with regard to eugenics, the engineering of new life forms, and population ethics. Bioethics, then, emerged from biologists who felt obliged to address the moral meaning of the biosphere, and to reflect on the remarkable implications of their discoveries and technological innovations.

Alongside of bioethics as an intellectual movement among life scientists there emerged the field of medical ethics, which was both old and new. It was old in the sense that physicians had reflected perennially on their professional duties from within the narrow confines of the guild. It was new in that now this reflection was occurring in open dialogue with theologians and philosophers, and attentive to

widening public concerns in a time of civil rights and “the twilight of authority.” The emerging discussion quickly included all the significant healthcare professions. Physicians focusing on medical ethics were in conversation with the accumulated wisdom of Catholic, Jewish, and Protestant reflection on medical ethics, as well as with moral philosophy. Many philosophers in this early period engaged in fruitful and mutually enriching dialogue with religious thinkers. Such dialogue not only contributed to the vitality of the field, but also reflected the dynamics of a liberal democracy in which citizens of all backgrounds and persuasions were, by the early 1970s, becoming awakened to the important moral questions surrounding developments in healthcare, medicine, research, and the professional–patient relationship.

Bioethics, as the tradition of the *Encyclopedia* defines it, developed then from these two central lineages, and includes both. The *Encyclopedia* integrates all aspects of healthcare and medical ethics, without losing sight of the wider context provided by the life scientists of the early 1970s, including their environmental and public health concerns.

The earlier editions of the *Encyclopedia* remain the key historical documents defining the field in its initial stages. Many elegantly written and authoritative articles included in these editions represent the thought of a generation of remarkable thinkers whose intellectual creativity, scholarly breadth, and openness to dialogue across traditions may never be surpassed. These thinkers were relatively free of any conventional literature of the field of “bioethics” as we would now be able to describe it; they were generally free from the internal status hierarchies and concerns with legitimization in academic medical centers that can sometimes limit creativity; they were almost entirely free from conflicts of interest, a serious concern in current bioethics, in

response to which this third edition has required full disclosure from all authors.

Bioethics, Pluralism and Public Discourse

The tradition of the *Encyclopedia* makes an instructive contribution to the future of bioethics in the academy because it includes the full spectrum of voices addressing the questions of bioethics, consistent with diversity in the public square of liberal democracies. The academic field of bioethics, in order to remain both relevant and creative, is wise to include thoughtful representatives from this full spectrum.

As Alasdair MacIntyre has pointed out, every system of philosophical or religious ethics has its own foundational assumptions about human nature and the human good, its unique historical context and questions, and its inherent conceptual limits. Bioethics is therefore enhanced by dialogue between different traditions of thought, both secular and religious, reflecting the diversity of the public square. Such dialogue requires a set of core virtues—mutual respect, tolerance, civility, and an openness to modification of one's perspectives based on the clarification of empirical fact and the persuasiveness of others. These virtues pertain not only to discourse within the Western context, but to global discourse. Whether African, Asian, Middle Eastern, or Native American, religious perspectives and the philosophical systems that have emerged from them need to be respected and engaged. Secular or religious monism—the view that only one voice is valid—eliminates meaningful dialogue, inhibits full participation, and thwarts conceptual growth.

Even within the particularistic scope of contemporary Western moral philosophy, whether utilitarian, Kantian, or contractarian, there is a need for dialogue with equally useful schools of thought, such as Aristotelian reflection on the virtues and final causality, natural law thought on essential human goods and correlative moral obligations, existential concern with the emotional underpinnings of human action such as hope or "the will to power," phenomenological description of the transition from solipsism to the "discovery of the other as other," feminist reflection grounded in the experience of women, and many other Western philosophical traditions that raise significant and yet very distinctive questions. Depth discussion requires an appreciation for different systems of moral thought, each of which raises a unique set of questions that those inculcated in other systems may miss.

Secular monists hold that religious ethics should be privatized and excluded from bioethical and public discourse; that religion should be a purely internal affair, no more relevant to public discourse than one's culinary tastes;

that religious voices result in a discordant mixture that means nothing. Public debate requires, it is said, common secular language; religious language constitutes bad taste. While it is true that religious voices can be "conversation-stoppers"—to use the philosopher Richard Rorty's pejorative term—secular voices can be just as easily so. A great many religious voices are respectful, diplomatic, and contributory to deeper levels of discourse on public issues; they are often conversation-starters rather than conversation-stoppers by virtue of raising unique questions of human nature and destiny. In a liberal and robust bioethics, an opinion is no more disqualified for being *religious* than for being atheistic, psychoanalytic, feminist, Marxist, or secular existentialist.

The *Encyclopedia of Bioethics* is unique because it has always included many voices and traditions in an effort to foster dialogue, prevent the narrowing of the field, and engage a wide international readership. This edition, like previous ones, embraces cross-cultural approaches, the full history of bioethics, comparative religious and philosophical ethics, and global perspectives. The articles on the history of medical ethics are exemplary efforts to highlight the degree to which our contemporary theories of ethics and bioethics evolve from particular social, cultural–religious, and historical contexts. Moreover, the historical articles on "the contemporary period" provide important information on developments such as population ethics in China, assisted suicide in the Netherlands, and brain death legislation in Japan.

Yet the array of materials presented is not intended to imply moral relativism, even as it conveys the substantial reality of ideational difference. Many articles, while balanced and expository, do highlight areas where those in search of a common morality can find respite. In the classical dialectic between the One and the Many, or between moral objectivism and moral relativism, there are some areas in which no agreement is either likely or necessary. There are other areas, however, such as the wrongness of genocide or the sexual abuse of children, where agreement is both expected and imperative. Most of us are partial relativists, which is also to say that we are partial objectivists. When an incompetent physician lies by claiming competence and as a result inflicts avoidable harm on a patient, or when a researcher refuses to halt a study despite the intolerable suffering of subjects as they perceive it, ethics is objective and we can speak with authority of a common morality. Yet in other areas, such as brain definitions of death or certain reproductive technologies, few would assume moral objectivism. There are also difficult disagreements as to whether we should attempt to significantly modify human nature itself through advanced biotechnology.

The third edition of the *Encyclopedia* was animated by the recognition that no other work presents bioethics in its fullness, both with regard to definition, methods, and contents. It is this fullness that makes the *Encyclopedia* of continuing international value in maintaining the open and expansive nature of the field.

New Points of Emphasis

The third edition includes a wide array of new titles ranging from "Bioterrorism," "Holocaust," and "Immigration, Ethical and Health Issues of," to "Artificial Nutrition and Hydration," "Cancer, Ethical Issues Related to Diagnosis and Treatment," "Dementia," "Dialysis, Kidney," "DNR—Do Not Resuscitate," and sets of articles under "Cloning" and "Pediatrics." Topic areas such as Reproduction and Fertility, Organ and Tissue Transplantation, Death and Dying, Ethical Theory, Law and Bioethics, Mental Health, Genetics, Religion and Ethics, and alike have been thoroughly redesigned, and are essentially new. As mentioned in the Preface, half of the third edition is entirely new, while half consists of deeply revised and updated articles from the earlier edition. There isn't a single article that was not thoroughly updated, even if only at the level of bibliographies, unless it is designated as *classic*.

Some new points of thematic emphasis in the third edition can be highlighted and commented on, although the revised edition was comprehensive with regard to general topic areas within the field of bioethics.

Posthumanism and Anti-Posthumanism

The reader will find new articles entitled "Transhumanism and Posthumanism," "Cybernetics," "Cloning," "Human Dignity," "Embryo and Fetus: III. Embryonic Stem Cell Research," "Enhancement Uses of Medical Technology," "Nanotechnology," and "Aging and the Aged: VI. Anti-Aging Interventions: Ethical and Social Issues." Collectively, these articles and others accentuate the question of what it means to be human.

Posthumanism (or sometimes "transhumanism") is a pure scientism that endorses fundamental alterations in human nature (see, e.g., <www.betterhumans.com>, <www.transhumanism.org>, <www.forsight.org>). Off with biological constraints! Transcend humanness by technology! The posthumanist embraces the eventual goal of decelerated and even arrested aging, but only as a small part of a larger vision to re-engineer human nature, and thereby to create biologically and technologically superior human beings that we humans today will design for tomorrow. As such, posthumans would no longer be humans. Genetics,

nanotechnology, cloning, cybernetics, and computer technologies are all part of the posthuman vision, which even includes the idea of downloading of synaptic connections in the brain to form a computerized human mind freed of mortal flesh, and thereby immortalized. Posthumanists do not believe that biology is destiny, but rather something to be overcome, for there is, they argue, no "natural law," but only human malleability and morphological freedom. Their appeal lies in the fact that, within the boundaries of technology, humans have been reinventing themselves anyway through applied technologies for millennia. Science is moving so rapidly that serious conversation is required to distinguish salutary from destructive transformations.

Human nature as we know it is, for the posthumanist mind, a mere constraint to be overcome. To use Walt Whitman's language, there is a "Song of the Open Road." After all, it is argued, there was a time when the very idea of human beings trying to fly was deemed heretical hubris in the light of eternity—*sub specie aeternitatis*. Now are the posthumanists to be deemed the new heretics in the light of evolution—*sub specie evolutionis*? Or shall we set aside trepidation and with confidence rethink ourselves in the light of human creativity and so-called "superbiology?" Indeed, Francis Bacon, a founder of the scientific method, in his millennialist and utopian essay *The New Atlantis* (1627), set in motion a biological mandate for boldness that included both the making of new species or "chimeras," organ replacement, and the "Water of Paradise" that would allow the possibility to "indeed live very long."

One of the wiser minds of the last century, Hans Jonas (d. 1993), an intellectual inspiration for today's anti-posthumanists, articulated the ethical questions around human malleability with thoroughness. He asked how desirable would the potential power to slow or arrest aging be for the individual and for the species? Do we want to tamper with the delicate biological balance of death and procreation, and preempt the place of youth? Would the species gain or lose? Jonas, by merely raising these questions, meant to cast significant doubt on the anti-aging enterprise. In current discussion, debate grows over cybernetics, nanotechnology, genetic enhancement, reproductive cloning, therapeutic stem cell cloning, life span extension, and new forms of behavior control. For some, the ambitions of posthumanists to create a new posthuman who is no longer human are, it is argued, arrogant, pretentious, and lacking in fundamental appreciation for natural human dignity. And yet others see potential for progress in these developing technological powers.

Ours is an age that is seriously beginning to consider "transhuman" possibilities through biotechnological enhancements in human biological capacities such as lifespan,

personality type, and intelligence. What will be the status of the altruistic generativity that Erik Erikson associated with old age as adventurous human beings begin to experiment with efforts to alter their lifespan? Will compassion be left behind in favor of the biotechnological pursuit of bigger muscles, prolongevity, happy dispositions, and unfading beauty? Or are the care and compassion that lie within us the "ultimate human enhancement"? Readers of the *Encyclopedia* are encouraged to reflect on such questions and draw their own conclusions.

Business Ethics in Healthcare

The reader of the third edition will find new articles with titles such as "Corporate Compliance," "Health Insurance," "Health Policy in the United States," "Health Services Management Ethics," "Healthcare Institutions," "Just Wages and Salaries," "Labor Unions in Healthcare," "Managed Care," "Medicaid," "Mergers and Acquisitions," "Organizational Ethics in Healthcare," "Private Ownership of Inventions," and "Profit and Commercialism."

This new feature of the *Encyclopedia* grew from the concern throughout the 1990s and beyond with the ways in which healthcare has become a business ruled by corporate executives and the bottom line of economic profit. While the nonprofit context of healthcare delivery is still significant, even there the freedom of the physician to focus on the best interests of the patient has been to varying degrees compromised by sometimes necessary cost cutting. Many professionals have struggled to retain the moral core of commitment to beneficence and the well-being of patients as even the time allowed for each patient visit has been dramatically contracted, compromising the time to establish an empathic and compassionate relationship. With the restructuring of healthcare along corporate lines, and with the emergence of for-profit healthcare systems answerable to stock holders and Wall Street forces, business ethics in healthcare becomes a significant addition to the *Encyclopedia*.

The article entitled "Conflict of Interest" raises a question of significance for the field of bioethics itself. Increasingly, especially in academic medical centers at major universities, bioethicists have themselves accepted lucrative financial benefits from pharmaceutical companies and biotech firms. While this does not mean that some bioethicists are no longer free to think for themselves about ethical issues, it does mean that they are subject to various pressures and should fully disclose any financial interests whatsoever that might influence their opinions. Of all fields, bioethics should remain untainted by financial conflict of interest, for its public credibility is always at risk.

Basic Approaches to Ethics

The *Encyclopedia* has, in its earlier editions, always been strong in providing the reader with background articles in ethical theory. The third edition enhances this aspect of the work with articles including "Conscience, Rights of," "Contractarianism and Bioethics," "Ethics Committees and Ethics Consultation," "Human Dignity," "Human Rights," "Moral Status," "Principlism," "Utilitarianism and Bioethics," and "Value and Healthcare," among others. In addition, new articles dealing with religious ethical approaches have been added, such as "Authority in Religious Traditions," "Christianity, Bioethics in," "Circumcision, Religious Aspects of," "Compassionate Love," "Jehovah's Witness Refusal of Blood Products," "Mormonism, Bioethics in," and related topics. Additional articles on anthropology and bioethics have also been developed.

Organization of the *Encyclopedia*

Entries are arranged alphabetically. Some *entries* are comprised of several *subentries*. For example,

Aging and the Aged

- I. Theories of Aging and Life Extension
- II. Life Expectancy and Life Span
- III. Societal Aging
- IV. Old Age
- V. Anti-Aging Interventions: Ethical and Social Issues

The reader wishing to study ethical aspects of aging and anti-aging research would do well to read all five of these interlocking articles.

Cross-references are provided for each article. However, for a complete perspective on the thematic relationships between articles, please see the "Topical Outline" in the front of the first volume following the "List of Contributors."

The bibliographies following each article are an important resource. These were prepared by the authors, or otherwise updated with approval by the Editor in Chief. The bibliographies are necessarily selective rather than completely exhaustive due to the volume of significant new books and articles relevant to each article.

The lengthy collection of codes, oaths, and policies in the fifth volume is of great value. Readers will benefit from reviewing these contents as they pertain to a specific topic of interest. Various annotated bibliographies in law and medicine, literature and medicine, and in bioethics should also be consulted. The section on "Additional Resources in Bioethics"

is especially important for its thoroughness and its international aspects, including current websites worldwide that are easily available to students.

A special effort has been made to keep these volumes free from technical jargon. The articles should be accessible to students at the high school, college, and graduate levels, as well as to interested lay readers. They are written in such a manner as to be authoritative for professionals wishing to gain a clear perspective on how ideas have evolved.

Bioethics, Civil Discourse, and a Common Humanity

Because the issues with which bioethics grapples are profoundly relevant to the future of nature, human nature, and healthcare, they are often contentious. Moreover, in the dialectic between moral objectivism and moral relativism, while many of these issues allow for plausible resolutions, there are others for which no resolutions emerge. Tolerance, civility, respect, and the willingness to seriously engage with the views of others who work out of different traditions, both secular and religious, are necessary virtues and habits of mind. Bioethics is inevitably subject to criticism by those who believe that answers to the many new questions brought on by the accelerating biological and healthcare revolutions are immediately and simply apparent. But what, after all, is a good ethicist, whether secular or religious, if not the person who asks an unsettling new question that no one else envisioned, and thereby prompts renewed debate as an alternative to superficiality.

While this *Encyclopedia* does not include biographies of bioethicists who were also moral leaders attempting to influence the world of science, healthcare, and public opinion, the list would be extensive and pluralistic. Many of the finest contributors to the field of bioethics are actively engaged in the service of needful constituencies, involved with voluntary associations, and otherwise engaged in practice. As appropriate, they move beyond the mere exposition of the essential inventory of existing thoughts on a topic, and argue persuasively for a normative viewpoint. Indeed, those who read these volumes will hopefully be motivated by a sense of responsibility and service, as well as by intellectual curiosity. For the purpose of liberal education and learning is not only the enhancement of knowledge, but also progress in benevolence, creative altruism, and commitment to a common humanity.

As Editor in Chief, I hope that readers of these volumes become better informed participants in a respectful public dialogue over a set of issues that increasingly must be understood and appreciated by all citizens of a liberal democracy. The gravity and significance of these bioethical issues for the future of our generative planet, of life itself, and of humankind might impress the reader so as to inspire purposeful educational and life pursuits.

STEPHEN G. POST
EDITOR IN CHIEF, THIRD EDITION
SEPTEMBER 2, 2003

TOPICAL OUTLINE

The classification of articles that follows provides a thematic view of the Encyclopedia's contents, depicting overall coverage in various divisions of the field of bioethics. It is also intended to assist the user, whether researcher or browser, in locating articles broadly related to a given topic. Because the topic headings are not mutually exclusive, certain entries are listed more than once.

ABORTION

Abortion
Adoption
Autonomy
Buddhism, Bioethics in
Christianity, Bioethics in
Conscience, Rights of
Double Effect, Principle or Doctrine of
Embryo and Fetus
Feminism
Fertility Control
Freedom and Free Will
Genetic Testing and Screening: Reproductive Genetic Testing
Harm
Healing
Hinduism, Bioethics in
Homicide
Human Dignity
Human Rights
Infanticide
Islam, Bioethics in
Jainism, Bioethics in
Judaism, Bioethics in
Law and Morality
Life
Life, Sanctity of
Literature and Healthcare
Maternal–Fetal Relationship
Medical Codes and Oaths
Medical Ethics, History of
Medicine, Profession of
Mental Illness
Moral Status

Nursing, Profession of
Patients' Rights
Population Policies, Strategies for Fertility Control in
Professional–Patient Relationship
Reproductive Technologies: Fertility Drugs
Responsibility
Sexual Behavior, Social Control of
Sexual Ethics
Virtue and Character
Women, Historical and Cross-Cultural Perspectives

ABUSE AND HARM

Abuse, Interpersonal
Autoexperimentation
Bioterrorism
Circumcision
Cloning: Reproductive
Coercion
Double Effect, Principle or Doctrine of
Electroconvulsive Therapy
Embryo and Fetus
Eugenics: Historical Aspects
Genetic Discrimination
Harm
Harmful Substances, Legal Control of
Holocaust
Infanticide
Injury and Injury Control
Malpractice, Medical
Military Personnel as Research Subjects
Minorities as Research Subjects
Mistakes, Medical
Pain and Suffering

Psychiatry, Abuses of
 Psychosurgery, Ethical Aspects of
 Psychosurgery, Medical and Historical Aspects of
 Race and Racism
 Research, Unethical
 Sexism
 Smoking
 Students as Research Subjects
 Suicide
 Transhumanism and Posthumanism
 Warfare

AFRICAN AMERICANS

African Religions
 Anthropology and Bioethics
 Bioethics: African-American Perspectives
 Christianity, Bioethics in
 Dialysis, Kidney
 Genetic Discrimination
 Genetic Testing and Screening: Population Screening
 Health and Disease: Anthropological Perspectives
 Healthcare Resources, Allocation of
 Holocaust
 Human Dignity
 Human Rights
 Islam, Bioethics in
 Justice
 Medical Ethics, History of Africa
 Mental Illness: Cultural Perspectives
 Metaphor and Analogy
 Organ and Tissue Procurement
 Organ Transplants
 Pastoral Care and Healthcare Chaplaincy
 Patients' Rights: Origins and Nature of Patients' Rights
 Public Health
 Race and Racism
 Research Policy: Risk and Vulnerable Groups
 Research, Unethical
 Smoking
 Trust

AGING

Advance Directives and Advance Care Planning
 Aging and the Aged
 Artificial Nutrition and Hydration
 Body
 Care
 Chronic Illness and Chronic Care
 Confucianism, Bioethics in
 Death
 Dementia
 Disability
 Informed Consent
 Justice
 Life, Quality of

Long-Term Care
 Medicaid
 Medicare
 Moral Status
 Paternalism
 Patients' Rights
 Surrogate Decision-Making
 Technology
 Virtue and Character

ANIMAL RESEARCH AND ANIMAL RIGHTS

Animal Research: Historical Aspects
 Animal Research: Philosophical Issues
 Animal Research: Law and Policy
 Animal Welfare and Rights: Ethical Perspectives on the
 Treatment and Status of Animals
 Animal Welfare and Rights: Vegetarianism
 Animal Welfare and Rights: Wildlife Conservation and
 Management
 Animal Welfare and Rights: Pet and Companion
 Animals
 Animal Welfare and Rights: Zoos and Zoological Parks
 Animal Welfare and Rights: Animals in Agriculture and
 Factory Farming

BUSINESS ETHICS IN HEALTHCARE

Advertising
 Commercialism in Scientific Research
 Conflict of Interest
 Corporate Compliance
 Economic Concepts in Healthcare
 Healthcare Institutions
 Healthcare Systems
 Health Insurance
 Health Policy in the United States
 Hospital
 Just Wages and Salaries
 Labor Unions in Healthcare
 Pharmaceutical Industry
 Pharmaceuticals, Issues in Prescribing
 Privacy in Healthcare
 Profit and Commercialism
 Research Policy

CHILDREN AND INFANTS

Abortion
 AIDS
 Care
 Children
 Compassionate Love
 Disability
 Eugenics
 Family and Family Medicine
 Future Generations, Reproductive Technologies and
 Obligations to

Genetic Testing and Screening: Pediatric Genetic Testing
 Infanticide
 Infants, Ethical Issues with
 Infants, Medical Aspects and Issues in the Care of
 Infants, Public Policy and Legal Issues
 Life, Quality of
 Life, Sanctity of
 Medicaid
 Pediatrics, Adolescents
 Pediatrics, Intensive Care in
 Pediatrics, Overview of Ethical Issues in
 Pediatrics, Public Health Issues in
 Population Ethics
 Research, Human
 Research, Unethical

CLONING

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