a convincing argument for the importance of trust in healthcare delivery.

Shore is equally convincing in arguing that people have a lack of trust in the healthcare system in the United States. To make this point, he cites studies showing that while many continue to trust doctors and nurses, the trust in healthcare delivery itself has declined at an alarming rate. Confidence in the leaders of medical institutions—for example, declined from 73 per cent in 1966 to 32 per cent in 2004.

A number of factors contribute to this low sense of trust. An overemphasis upon profits and unscrupulous behaviour on the part of such large healthcare players as HealthSouth has certainly had an impact. In addition, the environment of health care is one fraught with difficulties. Newspapers are not sold by reporting that patients are often treated successfully and discharged from hospitals without incident. Nor do television viewers clamour to see reports showing that health insurance companies pay the large majority of claims without question. It is sensationalism that sells. Add this to the bias toward reporting the negative, and it is clear that such stories have an enormous impact upon public perceptions of health care.

One of the strengths of Shore's book, and there are many, is that he spends as much time offering solutions as he does identifying the problems. It may be surprising to some that his remedies focus almost exclusively upon marketing and communications. In fact, nearly half of the book reads like a textbook on such topics as mission/vision, development, and branding. One could almost argue that building trust is simply a marketing ploy were it not for the honesty and good common sense that goes into Shore's recommendations.

Shore argues that healthcare institutions need to focus on both large and small elements to build trust. They must focus on cleanliness in all areas of the hospital, not just the operating room, as part of perception management. Capacity issues should also be managed so that staff/patient ratios stay in line with quality care. Trust building through a patient centred sense of integrity must be seen as being a key part of both the mission and the margin of healthcare facilities.

Shore offers step by step approaches to building trust into the very fibre of an institution. His positive examples include Disney, Coke, and Volvo, as well as Johnson & Johnson and the Mayo Clinic. Each is a leading organisation in its respective field. These companies have a ''power brand'' that captures their essence in ways that are appealing to customers. Healthcare organisations must include trust as part of their power brand in order to be successful.

Given the importance of the trust factor to health care, it is surprising that more has not been written on the topic. Shore's book is a much needed addition to the field, drawing attention to trust and providing solutions that impact the essence of health care—the relationship between the patient and healthcare provider. His suggestions are both succinct and practical. I would heartily recommend this book as a primary tool for a person looking to become a champion of change and improvement in the healthcare delivery system.

R S Mathis

Aiming to kill: the ethics of suicide and euthanasia

Authored by Nigel Biggar. Longman and Todd: Published by Darton, 2004, £10.95 (paper back), pp 220. ISBN 0-232-52406-8

The literature on euthanasia and suicide is substantial and ever growing. In his book *Aiming to kill*, Nigel Biggar, a theologian, adds to this something that is hard to come across, in a concise but comprehensive form. His book explores the theological basis of the sanctity of life doctrine: rather than merely asserting what the doctrine demands, simply citing as authority that it is a traditional and fundamental principle, he offers an account of its historical and modern-day rationale.

The book is divided into four unequal parts, whose quality varies. These chapters are designed to provide: firstly, the appropriate sociolegal and ethical context; secondly, an overview and analysis of arguments relating to the value of life; thirdly, an overview and analysis of arguments on the morality of killing; and finally, a section drawn from the conclusions of previous chapters and expounding the threat of the ''slippery slope''.

Biggar does not claim to come into the debate without prejudices. His standpoint is a conservative one, but he hopes to have taken seriously the concerns of critics of the ''traditional position'' and does not defend every argument that has been advanced in favour of his standpoint. The whole book is written in clear language. The last three chapters are particularly well presented. Each contains a summary of the position that it is to analyse, followed by a list of the main points to be discussed. Then Biggar takes the points one at a time, responding to critics and assessing the various theological arguments. Finally, he spells out his conclusions. Although he may fail to convert the reader, he does not fail to explain his convictions properly.

The book is strong in its presentation, clear language, breadth of sources and the depth of the author's understanding of the ethical subject matter. Regrettably, it also has its weaknesses. It may be asserted that Biggar does not work from a truly neutral account of matters outside of his expertise. The first chapter begins as a disappointing read and may encourage a reasonably cynical reader to take the rest of the book with an unnecessary pinch of salt. The legal analysis is less than balanced. For example, the sweeping statement that suicide is unlawful is a bold and unsubstantiated claim taken from another work whose author could not plead neutrality. It was not necessary for Biggar to do this to strengthen his argument. And he need not have omitted to mention, for example, Switzerland when describing the Western position. This amounts to a real shame, as the chapter ends well, explaining why the arguments are so relevant now, and noting the secular cynicism of life being given by God and killing being inherently wrong. The references to, and analysis of, theological texts throughout the book are gripping. It is a great pity to see the law misrepresented as it is. It serves to make the reader doubt the strength of other points.

The second and third chapters are what make the book worth reading. Not only is the account interesting, it is more plausible than what we often see in arguments on the sanctity of life. Biggar's position does not seek doggedly to attach value to human life no matter what. His reasoning is thought provoking and cleverly justified. Ultimately, some of the arguments are less convincing than others. The chapters would have benefited from some longer responses to critics in some cases, but all in all the second and the third chapters are good.

In the final chapter, having argued that the sanctity doctrine does not require an absolute prohibition on intentional killing, but maintaining the great value of intention and not just consequences in moral judgement, Biggar brings his theory back into context by analysing the slippery slope argument. Informed readers who are not already won over by this argument are unlikely to buy into Biggar's account. It is well constructed but, like the first chapter, is too focused on the bits that suit and ignorant of those that do not. For example, no mention is made of the data that are starting to come from Oregon. The focus on just The Netherlands for empirical data are unfortunate and unnecessarily restrictive. Finally, it must be said, Biggar's position on slippery slopes seems to boil down to consequentialist reasoning. The sting is taken out of this apparent irony by his acknowledgement of such potential criticism, but his attempted refutation of it is not really persuasive.

In addition to the four main chapters, the book contains a useful list of basic terms, a handy glossary, and a good further reading list, referencing texts relevant to all the major issues raised throughout the work.

In some respects this book is to be welcomed. For those interested in this debate, the second and third chapters—particularly chapter three—offer fascinating material on the nature and basis of the traditional position. On the other hand, the legal analysis and use of empirical data do diminish the argument's potency and should be considered far from a definitive account of the subject matter. I would recommend this book to a reader who is able to overlook these problems: the ethical analysis is fascinating.

J Coggon

Medical ethics and law—surviving on the wards and passing exams

Edited by Sokol DK, Bergson G. London: Published by Trauma Publishing, 2005, £14.95, pp 293. ISBN 0-95476-571-0

Yet another medical ethics book has been published, but the difference this time is that I actually like it Sokol and Bergson's handbook *Medical ethics and law—surviving on the wards and passing exams* is for medical students and junior doctors preparing for life in medicine and for the inevitable exams. The format of the book closely follows that of the core curriculum for medical ethics and law set out by the BMA in 2004 in *Medical ethics today*. The book covers a diverse range of topics from staples such as consent and confidentiality through to research, genetics and rights.

The authors use humour well to keep the reader's attention and explain ethical concepts. These concepts are often presented as being more simplistic than they are and at times only scrape the surface of moral argument. This, however, is inevitable when trying to squeeze so much into a limited

space. Although generally a good read, the book is not without its flaws.

On the ethical side there is perhaps an over-reliance on Beauchamp and Childress' "four principles". Although the authors briefly outline the major ethical theories before plumping for principalism, they have not provided the reader with any real alternative framework for their moral deliberations. On the positive side, however, they do point out to the reader that principles on their own do not equate with moral analysis and that any healthcare decisions must be accompanied by justified reasoning.

Although some of the law quoted is no longer up to date, owing to the fast pace of change in the law it is accepted with all legal writing that as soon as it is published it will be obsolete. This problem is redoubled by some of the major changes that have taken place in the discipline of medical law recently. As such, the book is bereft of any mention of the two new Acts of Parliament: the Mental Capacity Act 2005 and the Human Tissue Act 2004. Any one reading this book for examination purposes needs to be especially aware of the 2004 Human Tissue Act, as this replaces the Human Tissue Act 1961 and the Human Organs Transplant Act 1989.

I would certainly recommend this book for the readership at which it is aimed (medical students and junior doctors). It will give them a simple, well laid-out structure to think about the everyday ethical dilemmas that are encountered in medical practice, although further reading will be necessary to examine any of the topics in depth. They will find the section on answering exam questions in this area particularly useful. My recommendation comes with the caveat that the reader will need to do some further study to ensure that they are up to date with current legal developments.

M Quigley

Reference

1 **Beauchamp TL**, Childress CF, eds. *Principles of biomedical ethics*, 4th edn. Oxford: Oxford University Press, 1994.

NOTICE

Organ transplantation: ethical, legal and psychological aspects

Transplantation medicine is a rapidly evolving science. New technologies and transplantation programs raise questions about the ethical, legal and psychological implications of these developments. In various countries these psychological, legal and ethical aspects are evolving in different ways. Because of this there are opportunities for better cooperation between countries. On the other hand, important pitfalls emerge, like unequal access to care.

The purpose of this conference is to encourage the exchange of information, ideas and experiences, at an international level. In addition the aim is to establish a permanent international platform to formulate guidelines and stimulate joint research efforts. To achieve this we have chosen a format of workshops on various topics with the goal of formulating recommendations for the plenary closing session.

Workshops are centered on the following six topics:

1. Commercialisation and trafficking
2. Legal systems for organ donation and allocation
3. Altruism, counselling and psychological aspects of living donation
4. Minorities, religion and gender aspects
5. Expanded post mortem donor criteria, including Non Heart Beating donation
6. Role of patients, media and pharmaceutical industry

The Conference will be held in Rotterdam, The Netherlands from 1–4 April 2007. Deadline for abstract submission is November 1, 2006. For more information about abstract submission and the Conference, please see: www.elpat.eu.