References

GENTIL, V., GREENWOOD, M. H. & LADER, M. H. (1975) The effect of adrenalin on human platelet MAO activity. *Psychopharmacologia (Berl.)*, **44**, 187–90.

—— MCCURDY, L., ALEVIZOS, G. & LADER, M. H. (1976) The effects of adrenalin injections on human platelet monoamine oxidase and related measures. *Psychopharmacology*, **50**, 187–92.

OWEN, F., ACKER, W., BOURNE, R. C., FRITH, C. D. & RILEY, G. J. (1977) The effect on human monoamine oxidase activity of subcutaneous injections of adrenalin. *Biochemical Pharmacology*, **26**, 2065–7.

PRYOR, G. T., SCOTT, M. K. & PEACHE, S. (1972) Increased MAO activity following repeated electroshock seizures. *Journal of Neurochemistry*, **19**, 891–3.

TEACHING OF PSYCHIATRIC ETHICS

DEAR SIR,

Sidney Bloch's account of the teaching of psychiatric ethics to postgradaute trainees in the Oxford University Department of Psychiatry (*Journal*, March 1980, **136**, 300–1) was of considerable interest, for a remarkably similar programme for undergraduates has been undertaken in Edinburgh over the past four years. This has been the result of co-operation between the Department of Psychiatry and the Edinburgh Medical Group Research Project in Medical Ethics and Education, and formed but one part of a general attempt to integrate the teaching of medical ethics into the medical curriculum (Boyd, 1978).

The Chairman of the Department invited the EMG Research Staff to organize appropriate teaching sessions in consultation with those clinical tutors who were willing to co-operate in the experiment. Preliminary methodological investigations suggested the appropriateness of an integrated case-based and multi-disciplinary approach to the teaching of medical ethics (Thompson, 1976). It was proposed that moral philosophers and chaplains (preferably with hospital experience) should be recruited to act as 'ethics tutors', and that these should participate in the ordinary clinical tutorials in psychiatry approximately twice a term—where opportunity would be created to discuss the moral issues raised by the cases under consideration.

The clinical tutors initially expressed misgivings about what "discussion of moral issues raised by specific cases" might mean. It became apparent that the different professionals concerned tended to use 'morals' and 'ethics' in somewhat different ways. Clarification was necessary. It was generally agreed that the teaching of ethics in psychiatry should in no way be concerned with censorious discussion of the private morals of patients. Further, two relevant senses of 'ethics' were distinguished: first, the informal process of negotiation within and between the health-care professions, and between these professions and the public, whereby roles become distinguished, the scope of responsibilities defined, and codes of practice formulated; second, the application of more formal moral theory to the discussion of moral dilemmas in psychiatric practice and to the critical appraisal of the forms of justification offered for particular moral judgments. In general the philosophical rationale adopted was Aristotelian—in the sense that it incorporated an empirical approach to the clarification of ethical principles, was practical rather than theoretical in orientation, and did not pretend to a higher degree of precision than the subject-matter allowed.

The aims of the ethics tutorials were:

(i) to provide students with an opportunity to point out and discuss some of the anxieties felt about moral aspects of the cases examined.

(ii) to encourage moral sensitivity and awareness of moral complexity in the exercise of clinical responsibility in institutional settings,

(iii) to encourage more balanced ethical judgment through the critical appraisal of alternative ethical viewpoints and arguments,

(iv) to encourage students to offer constructive criticism of present provisions for the care and management of the mentally ill.

It has not as yet proved possible to implement any systematic method of assessment—because of the variation in range, type and number of tutorials with these trial groups, and because of student allergy to questionnaires. Nevertheless it is a measure of the success of the experiment that in its fourth year all the clinical tutors in the Department have agreed to participate and supported the continuation of the ethics teaching. Independently the Medical Faculty received formal requests from the Medical Students Council for provision to be made in the new curriculum for more of this kind of medical ethics teaching.

IAN E. THOMPSON

Edinburgh Medical Group,
EMG Research Project,
24 Buccleuch Place,
Edinburgh EH8 9LN

References

BLOCH, S. (1980) Teaching psychiatric ethics. *British Journal of Psychiatry*, **136**, 300–1.

BOYD, K. M. (1978) Teaching medical ethics: University of Edinburgh. *Journal of Medical Ethics*, **4**, 141–5.

THOMPSON, I. E. (1976) The implications of medical ethics. *Journal of Medical Ethics*, **2**, 75–82.