

# Installation costs

by Mitch Paciuk

The University of Alberta inducted their tenth president into office last week. In addition to the traditional installation ceremony, the U of A, in conjunction with the Alma Mater Fund, scheduled a "week of activities" to celebrate the installation.

The week long celebration was offered under the banner of "Share the Excitement" and featured "weekday events which concentrated primarily on individual faculties." These events began on Octob-

er 10 with the faculty of pharmacy which featured a lecture and poster presentation, and finished on Saturday at the faculty St. Jean with a special theatre performance.

In total there were 25 events and according to Halme the total cost was slightly over \$10,000. Almost the full cost of the Installation Week was covered by a donation from the Alma Mater Fund. The remainder of the costs were assumed by the Public Affairs Division of the University.

# Pro-lifers interrupt forum

by Carolyn Geekie

The Law Centre on campus was the location for Edmonton's involvement in the "National Day of Action" which took place on Saturday, October 14.

The Day of Action was sponsored by different chapters of The Canadian Abortion Rights Action League across the country. Abortion By Choice of Edmonton organized a public forum that was another attempt at voicing concerns to parliament over the possible recriminal-

ization of abortion. The forum had four guest speakers who discussed aspects of the pro-choice movement. The forum provided a chance for the audience to submit written questions after they were finished speaking.

The first two speakers, lawyers Ellen Ticoll and Donna Oliver-Dyck were continually interrupted by pro-life members. After repeated warnings from security, the pro-choicers were eventually escorted out of the forum by police.

Also speaking was professor of

philosophy and member of the Bioethics Committee at the Royal Alexandra Hospital, Cameron McKenzie. McKenzie argued that any law restricting abortion should be resisted as it is impossible to discuss "coherently and would be based on abstract conceptions such as the right to life theory." He pointed out that twenty years ago, on the issue of homosexuality, the state concluded it had no business in the bedrooms of the nation. Therefore, today it "has no business in the wombs of the nation."

# Insights on Bio-ethics examined

by Uju Mollel

Ethics is not a specialist subject — everyone is an ethicist, according to Dr. John Dossetor, director of the Joint Faculties Bioethics Project at the University of Alberta.

This branch of ethics — bioethics — considers a wide range of issues involving life matters. Dossetor explained that the idea of a joint faculties bioethics project came out of what he perceived as a gap in the teaching of bioethics and a lack of discussion on the subject.

Dossetor frequently dealt with ethical issues when he was director of the kidney program at the University of Alberta Hospital. He gave the example of difficult decisions that patients with kidney failure have to face regarding prolongation of life — whether to stop dialysis when they feel that their quality of life has fallen to such a point that for them it's a really miserable existence, or how to justify to hospital staff their refusal for treatment. "All these decisions together with decisions relating to transplantation of kidneys, a very scarce resource and the principles of resource allocation made me quite aware that

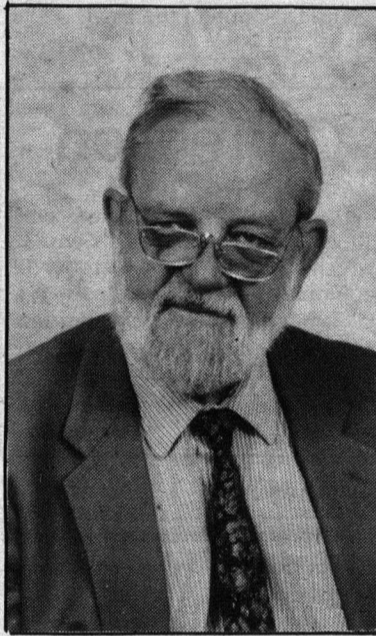
bioethics is a very important subject," he said.

During his sabbatical, Dossetor worked on a proposal which led to the establishment, in 1986, of the Joint Faculties Bioethics Project. "It is multidisciplinary, and involves the full integration of nursing, philosophy, theology and law with a steering committee of professionals from these fields," said Dossetor.

The interdisciplinary approach is the project's strength, but its weak point when it comes to funding. Because the University is structured into faculties it is more difficult to get commitment of funding for multidisciplinary research, and particularly ethics research, said Dossetor. "Bioethics is centered not on universities or academics, it's actually centered on patients. The project is concerned with patient self-determination, fully informed consent and the larger question of allocation of health resources."

Teaching is by far the most successful aspect of the project. Students are given clinical examples in learning the fundamental principles of medical ethics. In explaining the

principles of "quality of life" and resource allocation, Dr. Dossetor cited the example of a quadriplegic



Dr. John Dossetor  
...director of Joint Faculties Bioethics Project

who was on dialysis because of renal (kidney) failure. "She had a really very questionable quality to her life and it cost roughly a quarter of a million dollars to keep herself alive per year and we actually kept her in hospital for two years. We get the students, and this is a bit of deception on our part, to agree with us that this is ridiculous," said Dossetor. "We can't live like this, spending that sum of money. Then we show the video of this patient being interviewed by the hospital chaplain. At the end of it, the students all say, 'well of course you have to keep her alive, she's got a quality of life even though she can't move and she's on dialysis'. She demonstrated that her life through her family is a very worthwhile thing to her."

Dossetor pointed out that unlike the hospital ethics committee, which is reactive, the bioethics project is proactive. The members anticipate problems, discuss them and points of view are passed on to medical students and hospitals ethics committees.

Dossetor has written on a wide range of issues in medical ethics,

from resource allocation in transplantation to ethical basis of concern for animals, and he believes that ethical dilemmas have no right or wrong answers.

The research component of the project is quite limited because they do not receive operating funds. The University covers the salary of the directors, a few support staff, while the University Hospital provides the space for the project. Though a benefactor organization provides partial funding, Dossetor would like to see increased financial support for the project's research activities.

In January of this year, the project sent a request to the government for funding for an institute of healthcare ethics. Dossetor said that because the government also faces big problems with the ethical aspects of healthcare, such an institute could serve as an advisory body. The government may well have to grapple with where to spend the limited resources. "Do you have liver transplants (at enormous expense) or do you have better care for native kids on reservations?" asks Dossetor.

As the government looks at ways to save money by reducing spending for health care programs, the overall cost of medical care increases and along with it the challenge of resource allocation. Dossetor felt that with medical technology growing more sophisticated and more costly and with the aging population, there is a need to examine and address bioethical issues in health-care, because ultimately these issues will affect everyone.

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