

Life at all costs? debate at Pugwash conference

by Cathy McDonald

A longer life is not always a better life. Examining the quality of life under medical therapy and the ethics of euthanasia, were two of the issues raised at a student conference at Dalhousie last weekend, in a workshop entitled "Defining Meaningful Life."

40 students and panelists participated in a three-part conference called "Ethical Questions — Rational Decisions" at the Henson Centre on campus. Dalhousie Student Pugwash, a campus club, organized the two-day event to foster discussion among students around issues in their future careers.

While medicine can now prolong life in the face of many diseases, the quality of that life is a matter for debate. "Having a diagnosis made and starting therapy can alter your life" said Dr. Jean Gray, a professor in the Departments of Medicine and Pharmacology at Dalhousie. For example, diabetics must watch what they eat three times a day, exercise and inject themselves with a needle once or twice a day. "There may be more quantity of life, but the quality is definitely changed" Gray said, noting that some adolescent diabetics rebel against the treatment and end up in the hospital.

Doctors are paying more attention to the quality of life when choosing therapies. Gray cited research which compared two treatments for malignant bone cancer in a leg. One is amputating the leg and part of the pelvis. Another method is chemotherapy. Surprisingly, a male amputee, after he had adjusted to losing the leg, had a better quality of life than he would have had under the other therapy. — He could still have sex. The other method makes a man impotent as his gonads are irradiated.

Euthanasia, emotionally packed

Dr. Gray, along with a lawyer and philosopher, Professors Pucetti and Rozovsky, all tackled the issue of euthanasia.

A non-conscious human is not a "person" as Professor Roland Pucetti defines it. The Philosophy Professor argued that a "person" is a conscious entity. Both fetuses and comatose people do not qualify as persons, and therefore no moral harm is done in terminating their physical existence, he said.

Whatever, one's moral point of view may be on the question of euthanasia, the decision to end a comatose existence is complicated and emotionally packed, warned Dr. Gray.

Gray stressed that whatever decisions might be agreed on by doctors, the larger difficulty lies in helping the family come to a decision.

Gray gave the example of a patient of hers, a 19 year old man who went into coma. Although "there was little doubt as to what was the appropriate thing to do", Gray said the family "had a terrible time" trying to make a decision. Feelings of guilt destroyed the family, driving the father to drink and the brother to criminal activities. The mother removed herself from the family, spending most of her

time at the hospital. The daughter was the only one to carry herself through the trauma to finish her education. After the 10 months the patient died, but eight years later the family is just beginning to pull itself together, she said.

People should avoid such traumatic situations by deciding in advance what they want done to their bodies in a similar situation. "I wish you would think about it now. Decide how you want your life to end and put it in writing. Don't leave the decision to us." Gray said.

Changes in legislation have been made since the well-publicized case of Karen Ann Quinlan, a woman who went into a permanent coma six years ago in New Jersey. Her family labored over the legality and morality of stopping the respirator that was keeping her alive.

Many States have since enacted legislation to define who can legally make the decision to withdraw life support systems. Hospital ethics committees were formed in some states, while in others the decision is left up to the courts, according to lawyer Fay Rozovsky, professor in Health Administration in Dalhousie's School of Public Administration. A working paper now exists in Canada entitled "Euthanasia, aiding suicide and cessation of treatment" which would ease laws and allow doctors, family and patients to decide on the right to die.

"Respirators were not developed to keep those alive who would otherwise die."

Respirators were originally developed to help emergency situations where people "drop dead on the streets" Rozovsky said, not to keep those alive who would otherwise die.

Other technological advances in medicine such as transplants, neonatal surgery, in utero surgery and genetic engineering bring on a whole range of ethical problems which didn't exist before.

For example, decisions must be made when there are more people who need life-saving treatment than there are facilities.

It is near-impossible to find moral guidelines to chose between patients (such as age, contribution to society, or importance to the family) according to Gray.

Cutting funds poses ethical problems

Cutting back on funds for health care is making the necessity to choose between patients more likely. In B.C., the government cut health care, resulting in the reduction from twelve to nine units in the cardiac care centre. The waiting list has increased dramatically, Gray said, and some people have died waiting for treatment. One doctor who made a big "hullaballoo" about a patient who had died, achieved the dubious privilege of his patients being moved to the front of the list. This is a very unacceptable method of deciding who gets treatment, Gray said.

Lack of available facilities has not yet been a problem in Nova Scotia. But Gray anticipates such

difficulties in a couple of years with the province's fiscal restraint program.

However, most of these difficult decisions over allocation of resources could be avoided by a seemingly straightforward method, and

that is prevention. "How do you convince the public to improve their health?" Gray asked. Stopping smoking and losing weight are cheap methods to good health, and would stem the flow of money for "mopping up procedures" she said. Defining Meaningful Life" was

the third Pugwash conference workshop. On the Saturday, students pondered difficulties in transferring technology from developed to underdeveloped countries, and the roots of the international war and conflict.

Disarmament long-term view

TORONTO (CUP) — Few people involved in the peace movement realize how slow progress towards disarmament is, according to a scientist and a veteran disarmament activist.

"One of the things I've learned from going to a number of Pugwash Conferences is that only a small number of people involved in arms control seem to take a long-term view of things," physics professor Derek Paul told University of Toronto students recently.

Pugwash, founded in 1957, is an organization of scientists and

science students dedicated to nuclear disarmament.

Paul said the long-term view of disarmament is necessary "so we don't lose heart, and because things aren't going very well on the international scene".

Paul said the Soviets and Americans agreed in 1961 to negotiate multilateral disarmament. "Since then, some arms control agreements have been signed, but none that require substantial measures by both sides to dismantle weapons as suggested in the agreement."

Paul said the Americans, and

possibly the Soviets, have deliberately chosen to negotiate disarmament piecemeal.

"This, of course, is bound to failure because if the West decides to discuss disarmament only on intermediate range missiles in Europe, where the Russians have vast superiority, there will be no agreement," said Paul. "The Russians would probably be willing to remove their SS-20 missiles in exchange for similar concessions in the West, but not in exchange for missiles we don't have."

Security size still a concern

by Tom Morrison

Security on campus is still a Senate concern.

Professor Doris Boyle, representing the Dalhousie Women's Faculty Association, expressed concern about recent security cutbacks, and particularly their effect on women taking classes at night.

Vice-President Finance and Administration Robbie Shaw said classes at night are centralized, and usually held in the A&A and the LSC. He admitted there had been

some objections to having night classes in the LSC. The maze-like building was the scene of a rape three years ago.

Shaw said the cost benefits of moving classes to other buildings as opposed to beefing up security are being examined. He said patrols at night have "not been significantly affected by staff cutbacks," and had been doubled at night during the Halifax firefighter's strike.

Permanent security staff have been diminished by three since last year — one from the administrative staff and two patrols. Shaw said perceptible coverage had not been reduced dramatically, having been offset in two ways. Formerly where two patrols had used the security vehicle at night, one patrol used it now. He added part-time student patrols had been increased by eight people, although he admitted total hours did not cover hours worked by the two former full-time staff.

The man who makes the donuts

by Esther Dykeman

Do you know the Muffin Man? About the time most Dal students are tottering home from the Grawood or beginning all-night vigils over last-minute assignments, our muffin man (and donut man, and cake man...) is already downstairs in the SUB putting his culinary talents to work.

Bernie Wincey and his assistant, Tim Harris, begin every night at 1:30 a.m. in the Beaver Foods bakery making all the desserts sold on campus the following day. Bernie has been baking for 9 years at Dal. Surprisingly enough, he has never received a threatening message from desperate dieters or psychopathic calorie-counters. As for calories, Wincey says, "I'm not getting into that."

Bernie is willing to divulge some embarrassing campus weaknesses, however, he said. "Shirreff Hall eats a lot of cookies!" (50-60 dozen per day.) "They're heavy on muffins, too. At Howe Hall they go more for cakes and pies," he continued.

Bernie admits to sampling his own baking. "I was up to 200 pounds," he says, "so I cut down. I could eat and eat..."

He quotes some surprising (or alarming) statistics. "We used 50 tons of sugar in the kitchen last year. We use 350-400 pounds of

bread dough per day, make 250 dozen cookies twice a week... Most people like sweets," he says.

Bernie's largest creation was a cake for Beaver Foods' 10th anniversary at Dalhousie. "The cake measured 4 feet square at the bot-

tom and had 3 tiers," he said. "It took 300 lbs. of cake batter and 200 lbs. of icing sugar."

Says one of Bernie's co-workers, "We have the best baker in Nova Scotia." I'd tend to agree. (Thanks for the donut, guys.)

