

References

1. Graumlich JF. Preventing gastrointestinal complications of NSAIDs: risk factors, recent advances, and latest strategies. *Postgrad Med* 2001; 109(5):117-28.
2. Kapral MK, Bondy SJ. Cervical manipulation and risk of stroke [editorial]. *CMAJ* 2001;165(7): 907-8.

Protestant bioethics

Merril Pauls and Roger Hutchinson faced a challenging task in trying to describe Protestant bioethics in a 5-page article,¹ and they certainly did not have the space to provide an adequate account of autonomy and freedom as values for those who are not traditionally religious.

Regarding autonomy, they state: "Many secular formulations emphasize personal freedom and argue that autonomy is best served by minimizing restrictions on individual choice. Protestants would argue ... that individuals must account for their personal relationships and their responsibilities to the larger community."

This implies that the nonreligious (atheists, agnostics) are self-centred hedonists who likely act without regard for their responsibilities to others, including "the larger community." Surely this is an incomplete and unfair representation of the views of a great number of secular ethicists.^{2,3}

Secular humanists have formulated ethical views pertaining to personal freedom and the obligations an individual has to others. The humanist view is that a belief in God is not necessary for the recognition of our responsibilities toward others or for beneficence.^{4,5}

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References

1. Pauls M, Hutchinson RC. Bioethics for clinicians: 28. Protestant bioethics. *CMAJ* 2002;166(3):339-43.
2. Mill JS. *On liberty*. London: J.M. Dent and

- Sons; 1948.
3. Wilson AN. *God's funeral*. New York: W.W. Norton and Co; 1999. p. 45.
4. Kurtz P. Does humanism have an ethic of responsibility? In: Storer MB, editor. *Humanist ethics*. Buffalo: Prometheus Books; 1980. p. 11-25.
5. Bauer K. Freedom, obligation and responsibility. In: Storer MB, editor. *Humanist ethics*. Buffalo: Prometheus Books; 1980. p. 75-93.

In *CMAJ*'s recent article on Protestant bioethics,¹ with regard to Catholic religious traditions, the authors have used the tasteless word casuistry. Does this word show ignorance of the Catholic religion or ignorance of the English language on the part of the authors?

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Reference

1. Pauls M, Hutchinson RC. Bioethics for clinicians: 28. Protestant bioethics. *CMAJ* 2002;166(3):339-43.

[The authors respond:]

We appreciate Paul Hoaken's comments. Classic philosophical conceptions of autonomy present the rational, dispassionate individual as the ideal decision-maker. Many current ethical perspectives recognize and validate the role that emotional, relational and spiritual factors play in autonomous decision-making. We argue that Protestant ideas have played an important role in promoting this broader understanding of autonomy. We did not mean to imply that other traditions and viewpoints, including those advocated by humanists, have not also played an important role, or that acceptance of Protestant beliefs is a necessary prerequisite for the moral life.

With regards to Lynette Sutherland's concerns, we have used the word casuistry in a descriptive manner to refer to a form of moral reasoning that is case-based and is historically associated with the Catholic Church. Our use of the term reflects its current use in the

bioethics literature,^{1,2} and was not meant to carry a negative connotation.

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References

1. Verhey A. Protestantism. In: Reich W, editor. *Encyclopedia of Bioethics*. Vol 4. New York: Simon and Schuster Macmillan; 1995. p. 2123.
2. Beauchamp TL, Childress JF. *Principles of Biomedical Ethics*. 4th Edition. New York: Oxford University Press; 1994. p. 92-100.

Corrections

In the Letters section of the Feb. 5. issue of *CMAJ*, the name of the first author of the first letter was misspelled as the result of an editorial error.¹ The first author's name is Dalia L. Rotstein.

Reference

1. Rotstein DL, Alter DA. Addressing the challenges of queues [letter]. *CMAJ* 2002;166(3):299.

In the Mar. 19 issue of *CMAJ*, an error occurred in Fig. 3 (p. 731) of the article entitled "Comparison of diagnostic decision rules and structured data collection in assessment of acute ankle injury."¹ In the figure, the Ottawa and the Leiden ankle rules are reversed. The Ottawa rules are represented by the dotted line; the Leiden rules are represented by the solid line.

Reference

1. Glas AS, Pijnenburg BACM, Lijmer JG, Bogaard K, de Roos MAJ, Keeman JN, et al. Comparison of diagnostic decision rules and structured data collection in assessment of acute ankle injury. *CMAJ* 2002;166(6):727-33.