VE/PAS? We do not know of course. Nor do we really know why those who attend religious services are more likely to oppose change. Bishops may have featured in the recent House of Lords debate, but their contributions were notable for the lack of any theological content at all – perhaps appropriately in a secular society. Does representation matter? In one sense, the House of Lords represents no one, yet the quality of its debate on this issue has been impressive. McLean states that she has no interest in defending majoritarianism and states that she will not play 'the numbers game'. Arguments based primarily on numbers, she says, are inherently futile. This doesn't prevent the numbers appearing at various points in the book.

The central point in her argument is autonomy. This is defined and explored. Choice has always been the most powerful factor in advocating change and she explores it to the full as she evaluates the arguments for and against. Take, for example, her statement that the choice for death is not *only* (author's italics) a private decision or her question whether 'assisted' dying is ever truly autonomous. These threats to the autonomy argument are not ducked, but met head on and well argued. By contrast her discussion of the sanctity of life is short and largely, (but not exclusively), linked to religion – a posture that short-changes a valuable concept, as shown by another secular supporter of VE/PAS, Ronald Dworkin in his masterly *Life's dominion*.[3]

The chapter on 'choosing death' provides a review of case law surrounding the distinctions between killing and letting somebody die, between acts and omissions – or as some would say, between active and passive euthanasia – and the doctrine of double effect. This includes an account of the Diane Pretty case, whose (legal) outcome she appears to support, yet whose implications provide further ammunition for change. Doctors, I believe, find these distinctions valuable in daily practice, as do some philosophers such as Philippa Foot.[4] But, in general, I think it fair to say that McLean's scepticism about such distinctions is probably shared by a substantial proportion of academic lawyers and certainly most utilitarian philosophers.

The next section of the book is slightly less satisfactory. Her discussion of 'do not resuscitate orders' makes assertions based on American data from 1991 – almost certainly invalid in 2008, an inexcusable lapse in scholarship given the vast amount of easily accessible data. As a member of the BMA medical ethics committee, which was part responsible for the current guidance on not attempting resuscitation, I felt short changed in this section. Nor was I clear of the relevance of the Arthur case – which many might think would have been differently decided today. She then goes on to describe some of the working of the House of Lords Select Committee, the Joffe Bill and the debate upon it. For unelected Lords to declare against 'doctors and divines' expressing their views struck me as ironical. Here the account was too partial and the anti-clerical polemic unhelpful. Is the belief that life is a non-returnable gift from God actually the antithesis of believing that life is for us to control?

But perhaps that is to criticise detail. If you want a single book to review the arguments on VE and PAS, then *Euthanasia examined* is the book for you; but if you want an up to date account advocating legal change from a legal perspective, I doubt if McClean's book can be bettered. It isn't comprehensive, but the case is well made. Try Biggar's book after that for the opposition and I doubt if you will want to read more in reaching your own conclusions. Elsewhere Lord Mustill wrote that 'it is hard to believe that everybody will ever be of the same mind. Rather than broker an unattainable unanimity, what we badly need is for our minds to be informed and alert'.[5] Instant opinions are rarely profound. Reading McClean carefully gives ample opportunity to reflect upon our laws.

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Essays in medical biography

JT Hughes. The Holywell Press Ltd, Oxford 2008. 204 pp. £20.00

During his career as a distinguished neuropathologist in Oxford and then as Emeritus Fellow of Green College, the author's supplementary interests in history have been fostered by contacts and friendships with many notable professional historians. In some measure historians aspire to combine the skills of artist, chronicler, detective and assessor. In this collection of 18 erudite, engaging and wide-ranging essays Hughes amply displays the skills and talents of all four. A particular strength he brings to his research is his ability to explore and unravel previously unknown, obscure or controversial aspects of the lives of many doctors who have made their mark in the past. Archival treasure hunting in the Bodleian Library, the British Library and other great institutions was essential, but he has also sought out local records in many different parts of the country and sometimes abroad, as well visiting the relevant localities. It is such determination and doggedness in pursuing every primary source he can track down that characterises his approach, which lends authority to the suggestions and conclusions he reaches. The reader is able to share something of the pleasures of exploration and the excitement of the chase. But there is more here than a relentless pursuit of the quarry, for the successful medical historian must interpret the data, weigh the evidence and convey the findings in a readable and attractive style.

Medical personalities and events of the 17th century predominate in this collection. Remembered particularly for political and religious upheavals, it was also a period in England of intellectual ferment and individual brilliance and originality. Whereas science advanced through observation, helped by the invention of new instruments like the microscope and measuring devices, and notably by the application of experimental approaches, clinical practice changed little. Three of the 17th century physicians were Fellows of the Royal College of Physicians: Sir Thomas Browne (1605–82), Thomas Willis (1621–87) and William Petty (1623–87). Browne was elected an Honorary Fellow for his literary attainments and not on

account of his great distinction as a physician in Norwich and East Anglia. Through his *Religio Medici*, Browne has fascinated and inspired many doctors, scholars and literary figures through the ages. William Osler was one of those captivated by him from an early age. All the more remarkable then that some parts of Browne's early life were still hidden or uncertain until revealed or elaborated in the historical researches reported here. He is the subject of no less than five essays in this book and a further three deal with the life and contributions of his remarkable protégé, Henry Power (1626–68), physician of Halifax and pioneer experimentalist, who died young but whose work on air pressure preceded and influenced Robert Boyle and whose observations on microscopy were published before those of Robert Hooke. Of particular interest are Power's detailed observations and experiments supporting William Harvey's *De Motu Cordis,* which he recorded meticulously in a manuscript dated 1642, now in the British Library.

'Alas Poor Yorick'! is the title of the only essay set in the 18th century and is about Laurence Sterne, who was not a doctor but a clergyman and late-flowering literary genius. Following his death and funeral in 1758, his body was soon 'resurrected' from the burial ground of St George's, Hanover Square, London, and conveyed to the Theatre of Anatomy in Cambridge, where a former acquaintance recognised his erstwhile friend as the 'subject'. Scholarly attention to the particulars of this case is a prelude to a succinct account of developments in the teaching of anatomy and of the availability of cadavers. Such thematic links so naturally and instructively established between many of these well-researched biographical descriptions and the more general medico-historical lessons that emerge, are an important feature of many of the essays from whatever period. In near contemporary times, the chapter entitled 'Lawrence of Arabia and Hugh Cairns: crash helmets for motor-cyclists' describes the involvement of Cairns in 1935, as a recently appointed neurosurgeon at the London Hospital, with the case of TE Shaw (Lawrence of Arabia) mortally injured after falling from his motorcycle, and the influence this experience had on Cairns in determining future research he led in Oxford and inspired at other centres, developing and validating protective helmets. The last essay in the book is a chilling analysis derived from detailed research and the author's own contacts with a leading and respected senior neuropathologist in Germany, whom he discovered had used many brain specimens, which he knew had been obtained from children during the Nazi programme of 'euthanasia', in this context, murder by the state, for his research in the second world war.

A sample of topics must suffice to convey something of the variety and interest to be found in this collection. The book is attractively presented and profusely illustrated. Those with curiosity and interest in medicine's past, will find these essays enjoyable and rewarding, albeit probably on a selective basis in tune with the reader's own preferences.

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