Margaret Somerville's *The Ethical Canary* is a thorough survey of the most pressing controversies in medical ethics today. As we are faced with unprecedented threats to our most profound sense of humanity, the emphasis that science and ethics must proceed simultaneously, and that both must foresee the impact of present practises upon the quality of life of future generations. Each chapter investigates one issue including reproductive technologies, cloning, infant male circumcision and euthanasia. Somerville's procedure is systematic, and she identifies the legal, social, physical and metaphysical dimensions of each topic, appraising them according to risks, benefits and harms. While medicine and ethics have technical and specialized lexicons, the text is reader-friendly to anyone interested in the complexities of medical ethics.

Somerville's text begins with an overview of Western culture today, in which we find a renewed search for ethics. We suffer from a lack of moral and spiritual leadership, and the loss of shared meaning and values. In this way, there is no consensus for the most fundamental questions. Accelerating scientific and technological advances have become the saving force to which some people turn for alleviation of anxiety over mortality. Yet fear and dread also accompany the faith the public places in science.

Somerville points out that science has turned the mysteries of life into problems solvable within the scientific paradigm. These mysteries then, are stripped of significance and made material for scientific inquiry. This is the crux of the importance of medical ethics: science dominates the most meaningful events of life—birth and death—when they were once ritualized within a community of shared beliefs. It is most urgent, then, according to Somerville, that our actions be guided by a profound respect for life and protection of the human spirit against that which threatens to extinguish it.

The second chapter discusses the ethics of human reproduction, such as abortion, sex selection and preimplantation genetic diagnosis (PGD, or the genetic analysis of an ex utero embryo. If any genetic defects are found, the embryo is “discarded”). According to the author, it is crucial to place the potential child in the centre of this debate. Similarly, in the chapter devoted to cloning, some plan to seek out this procedure to recover a lost child or to “cure” infertility. Yet what is the clone's moral status in his community? Do we have the right to manipulate life? If we can create life, may we also destroy
it, as in the case of "spare" embryos? While cloning is an issue with the power to capture the public's imagination, we must heed our repugnance and moral intuition, according to Somerville.

Concerning early-life medical treatments, infant male circumcision takes up an entire chapter. This issue is controversial, as it is associated with ancient religious traditions. Yet as a routine procedure, Somerville asks that we re-evaluate it to justify the harm done to the unconsenting infant. She argues that since circumcision in unnecessary and non-therapeutic, the pain and suffering inflicted upon the infant must be justified. However, she also insists that those who have religious commitments be exempt from a prohibition against male infant circumcision. In the re-evaluation of the ethics of this traditional practice, Somerville believes we must consider freedom of religion, parental control, respect for tradition, as well as legal protection of the vulnerable.

Finally, the book examines end-of-life issues, which places "the very soul of medicine on trial" (148). Euthanasia is particularly topical, as the Netherlands has recently legalized this practice. Somerville calls us to examine our motives in this case; perhaps we fear death and want to control it by timing it. Yet other alternatives must first be sought. For instance, it is proven that pain relief mitigates the patient's sense of urgency to request death. Palliative care also recaptures some of the traditional rituals surrounding death. In this chapter the author sometimes uses the word "kill," for euthanasia and while admitting that it is a strong word, I would argue that it is inappropriate, as it is judgmental and emotionally exploitive.

Somerville sees the widespread acceptance of the discussed practises as symbolic of an irreversible degradation of societal values. The most basic question is: because we can, should we? Her approach is refreshing, rigorous and accurate. She insists we not suppress our moral anxieties, because otherwise, the harm inflicted may permanently damage civilization and everything we regard as permissible, good and human.

Sarah J. Roebuck
McGill University


For at least the past two decades, one of the most perplexing and frustrating problems facing progressive political movements in the US has been the question: Why have conservatives fared better than progressives in public debates ranging from inner-city poverty to international human rights legislation? In this book, Stephen Hart, a sociologist who has previously written on Christianity and economic justice in the US, takes up precisely this question in his study of various approaches to grassroots organizing. Divulging his general