

# **Sexuality and Medicine**

Volume I: Conceptual Roots

*Edited by* Earl E. Shelp

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# Sexuality And Medicine Vol I Conceptual Roots

**Earl E. Shelp**



## **Sexuality And Medicine Vol I Conceptual Roots:**

*Sexuality and Medicine* Earl E. Shelp, 1987      Sexuality and Medicine E.E. Shelp, 2012-12-06 When confronted by the concerns of human sexual function or dysfunction American medicine finds itself well impaled on the horns of a dilemma. Currently it is acceptable medical practice to treat sexual dysfunctions, disorders or dissatisfactions that arise from psychogenic etiologies, endocrine imbalances, neurologic defects or are side effects of necessary medication regimes. In addition, implantation of penile prostheses in cases of organic impotence is an increasingly popular surgical procedure. These clinical approaches to sexual inadequacies accepted by medicine since 1970 represent one horn of the dilemma. The opposite horn pictures the medical profession firmly backed into a corner by cultural influences. For example, when hospital admissions occur, a significant portion of the routine medical history is the section on system review. A few questions are asked about the cardiorespiratory, the genitourinary and the gastrointestinal systems. But in a preponderance of hospitals, no questions are permitted or if raised, answers are not recorded about human sexual functioning. Physicians tend to forget that they are victims of cultural imposition first and of professional training a distant second.

Institutional Integrity in Health Care Ana Smith Iltis, 2013-03-09 Health care delivery has become institutionalized. As a result, health care organizations now have the power to determine who has access to what kind of health care and under what circumstances. They shape as well the ethics of the various health care professions. These developments have provoked controversies about what kind of obligations such health care organizations have to patients, caregivers and society at large. In order to respond to these controversies, an account of health care organizational ethics has become necessary. The essays in this volume are drawn from an interdisciplinary group of leading scholars in this growing field. Addressing the nature of health care organizational ethics, including such issues as corporate fraud and institutional moral integrity, cover the broad range of issues that must be addressed for a coherent discussion of organizational moral responsibility. Covering the range of theoretical and practical issues like no other volume are of interest to researchers, students and professionals working in the fields of bioethics, health care administration and management, organizational science and business ethics.

The Ethics of Managed Care: Professional Integrity and Patient Rights W.B. Bondeson, J.W. Jones, 2013-03-09 In the culture of medicine, they saw their mission as a generation of profit for stockholders, not necessarily medical care for clients. Cost-effective medicine was the goal in the context of a profit-making enterprise. Although preventive health care programs were promised, very few were realized and they were not nearly comprehensive. The definition of unnecessary testing slowly expanded to mean virtually any high-cost test requiring the service of a medical specialist, and low-priced generalist physicians with limited diagnostic and therapeutic skills were made available to patients with the instruction they should limit their access to high-cost specialists. Managed care organizations tended to reward primary care physicians who avoided specialty referrals and severed contracts with those who persisted in sending their patients to outside consultants. Most notoriously, managed care organizations maintained

veto authority over the provision of complex and expensive care and that veto was often wielded in defiance of a physician's recommendation by managed care employees without medical training or experience. Managed care did indeed slow the rate of increase of medical costs but not without limitations on the care provided to patients and the professional integrity of physicians. Managed care organizations were so successful that they could provide extremely high salaries to their executives even in the context of limiting cost and care. It is these developments that the papers of this symposium addressed. The most fundamental ethical issue is posed in the first paper by Dr Reframing Disease Contextually Mary Ann Gardell Cutter, 2013-03-09. Reframing Disease Contextually will be of particular interest to philosophers of medicine, bioethicists and philosophers. It may also be of value to medical professionals, historians of western medicine and health policy makers who take interest in the conceptual foundations of medicine. This book provides an overview of key debates in the history of modern western medicine on the nature, knowledge and value of disease, illustrates how these debates relate, provides a contextual or localized way of understanding disease, includes case studies of e.g. AIDS, genetic disease and gendered disease, conveys the importance of the intersection and interrelation between and among factors that make up disease, illustrates how bioethical discussions about disease naming, classification, diagnosis, prognosis and treatment are part of a much greater discussion in philosophy of medicine. Cross-Cultural Perspectives on the (Im)Possibility of Global Bioethics J. Tao Lai Po-wah, 2013-11-21. The contributions to this volume grew out of papers presented at an international conference, Individual Community Society Bioethics in the Third Millennium, held in Hong Kong, Special Administrative Region of the People's Republic of China, between 25-28 May 1999. The conference was organized by the Centre for Comparative Public Management and Social Policy and Ethics in Contemporary China Research Group in the Faculty of Humanities and Social Sciences at the City University of Hong Kong. The conference brought together scholars from east and west to investigate the challenges to caring and to traditional moral authorities that would confront bioethics in the third millennium. They explored the implications of moral loss and moral diversity in post-traditional and post-modern societies and how these would shape the character of medical care and bioethics discourse in the new era. A proceedings volume under the same title of Individual Community Society Bioethics in the Third Millennium was published in May 1999 for the conference meeting.

Physician-Assisted Suicide: What are the Issues? L.M. Kopelman, K.A. de Ville, 2012-12-06. Physician Assisted Suicide: What are the Issues offers a detailed discussion of recent supreme court rulings that have had an impact on the contemporary debate in the United States and elsewhere over physician assisted suicide. Two rulings by the U.S. Supreme Court have altered the contemporary debate on physician assisted suicide: *Washington v. Glucksberg* 1997 and *Vacco v. Quill* 1997. In these cases, the Supreme Court ruled that state laws could prohibit assisted suicide and therefore physician assisted suicide. These rulings mark the apex of over two decades of unprecedented litigation regarding end of life care and signal the beginning of a new clinical, ethical and legal debate over the extent of an individual's rights to control the timing, manner and

means of his her death The debate over suicide and assisting suicide is ancient and contentious and intertwined with questions about the permissibility of voluntary active euthanasia or mercy killing Responses to these issues can be divided into those who defend physician assisted suicide and many of these other activities and those who object But those who object may do so on principled grounds in that they regard these activities as wrong in all cases or non principled in that they believe there are more prudent less disruptive or more efficient policies The authors in this book sort out these responses and look at the assumptions underlying them Several of these authors give startling new interpretations that a culture gap deeper and wider than that in the abortion debate exists Ethical Issues in Health Care on the Frontiers of the

Twenty-First Century S. Wear,J.J. Bono,G. Logue,A. McEvoy,2006-04-11 of UB s medical school that UB developed its School of Arts and Sciences and thus assumed its place among the other institutions of higher education Had Fillmore lived throughout UB s first seventy years he would probably have been elated by the success of his university and he should have been satisfied and pleased that UB remained intrinsically bonded to its community while at the same time engrafting the values and standards important to higher education s mission in the region UB and its medical school have undergone many challenging transitions since 1846 Included among them were 1 the completion of an academic campus in the far northeast corner of the City of Buffalo while leaving its medical dental and law schools firmly situated in the core of downtown Buffalo 2 the eventual relocation after the second world war of the law school to the newer campus in Amherst and the medical and dental school to the original academic campus and 3 the merger with the State University of New York System in 1962 Despite these significant transitions any one of which could have changed the intrinsic integrity of UB and disrupted the bonding between community and university that did not happen To this day the ties between community and academe persist Fillmore and White should celebrate their success and important contribution to Buffalo and Western New York

**Bioethics and Moral Content: National Traditions of Health Care Morality** H. Tristram Engelhardt Jr.,L.M. Rasmussen,2013-11-11 This volume explores the plurality of moral perspectives shaping bioethics It is inspired by Kazumasa Hoshino s critical reflections on the differences in moral perspectives separating Japanese and American bioethics It offers a rich perspective of the range of approaches to bioethics and brings into question whether there is unambiguously one ethics for bioethics to apply **Ethical Dimensions of Geriatric Care** S.F. Spicker,S.R. Ingman,Ian Lawson,1987-10-31 There is both a timeliness and a transcendent rightness in the fact that scholars clinicians and health professionals are beginning to examine the ethics based components of decision making in health care of the elderly Ethics as the discipline concerned with right or wrong conduct and moral duty pervades hospital rooms nursing home corridors physicians offices and the halls of Congress as decisions are made that concern the allocation of health related services to individuals and groups in need In particular care of older persons recently has received disproportionate attention in discussions of ethics and clinical care Age alone of course should not generate special focus on ill individuals about whom concerns arise based on value conflicts

tacitly involved in the delivery of health care Having said that age is not the principal criterion for attention to ethics based concerns in health care it must be acknowledged that old people have a high prevalence of conditions that provoke interest and put them in harm's way if value conflicts are not identified and seriously addressed Issues that concern autonomy the allocation of scarce resources inter generational competition and conflict the withholding of treatment in treatable disease and substitute and proxy decision making for the cognitively impaired all have special relevance for older persons

**Infertility** Kevin Wm. Wildes,1996-12-31 Infertility A Crossroad of Faith Medicine and Technology brings together a diverse group of clinicians theologians and philosophers to examine the use of reproductive technologies in the light of the Roman Catholic moral tradition and recent teaching The book provides relevant background information e g Donum Vitae from the Congregation for the Doctrine of the Faith as it explores the psychological social legal and moral contexts of reproductive medicine This book is Volume 3 of Catholic Studies in Bioethics in the series Philosophy and Medicine

**Sexuality and Medicine** John Wiltshire,Paul A. Komesaroff,Philipa Rothfield,2004-07-29 There is no available information at this time *Rights to Health Care* Thomas J. Bole III,W.B. Bondeson,2007-08-23 Human existence is marked by pain limitation disability disease suffering and death These facts of life and of death give ample grounds for characterizing much of the human condition as unfortunate A core philosophical question is whether the circumstances are in addition unfair or unjust in the sense of justifying claims on the resources time and abilities of others The temptation to use the languages of rights and of justice is understandable Faced with pain disability and death it seems natural to complain that someone should do something this is unfair or it just isn't right that people should suffer this way Yet it is one thing to complain about the unfairness of another's actions and another thing to complain about the unfairness of biological or physical processes If no one is to blame for one's illness disability or death in what sense are one's unfortunate circumstances unfair or unjust How can claims against others for aid and support arise if no one has caused the unfortunate state of affairs To justify the languages of rights to health care or justice in health care requires showing why particular unfortunate circumstances are also unfair in the sense of demanding the labors of others It requires understanding as well the limits of property claims After all claims regarding justice in health care or about rights to health care limit the property rights of those whose resources will be used to provide care **Competency** Mary Ann Gardell Cutter,E.E.

Shelp,2012-12-06 Some conferences produce proceedings others an inspiration to labor which finally leads to a published work Such has been the case with regard to this volume In 1984 the Center for Ethics Medicine and Public Issues held a conference with the title When are Competent Patients Incompetent with the support of the Texas Committee for the Humanities a state based program of the National Endowment for the Humanities Assistance was provided by both Baylor College of Medicine and the Institute of Religion This conference evoked a considerable interest in examining further the moral status of competency determinations in the clinical setting This interest is realized in this volume which now affords us

an opportunity to thank all those individuals who made the conference possible only some of whom are acknowledged in this Preface In particular we wish to express our gratitude to Baruch A Brody Rebecca Dresser the Honorable Jerome Jones H Steven Moffic Margery W Shaw Eleanor Tinsley and Albert Van Helden The volume took its shape through the labors of Earl Shelp and Mary Ann Gardell Cutter who inspired the further evolution of the papers presented at the conference and attracted contributions from individuals who had not attended Earl Shelp and Mary Ann Gardell Cutter have produced a volume following extensive reflection and dialogue they were ably assisted in the final preparation of the manuscript by Thomas J Bole III and George Khushf to whom special thanks are due

*The Body in Medical Thought and Practice* D. Leder, 2013-06-29 In the second half of the 20th century the body has become a central theme of intellectual debate How should we perceive the human body Is it best understood biologically experientially culturally How do social institutions exercise power over the body and determine norms of health and behavior The answers arrived at by phenomenologists social theorists and feminists have radically challenged our conventional notions of the body dating back to 17th century Cartesian thought This is the first volume to systematically explore the range of contemporary thought concerning the body and draw out its crucial implications for medicine Its authors suggest that many of the problems often found in modern medicine dehumanized treatment overspecialization neglect of the mind's healing resources are directly traceable to medicine's outmoded concepts of the body New and exciting alternatives are proposed by some of the foremost physicians and philosophers working in the medical humanities today

Japanese and Western Bioethics K. Hoshino, 2013-04-17 The editors of the Philosophy and Medicine series recognize with gratitude the foresight understanding hard labor and patience of Prof Kazumasa Hoshino It is his perseverance that has made this volume a reality It was his faith in ideas that brought together a cluster of scholars in Tokyo on September 24 1994 at Sophia University for a U S Japan Bioethics Congress With the support of the Foundation for Advancement of International Science the Japan Foundation Center for Global Partnership the Foundation of Thanatology the Japanese Center for Quality of Life Studies and Sophia University scholars from Canada Germany Japan and the United States were able to explore the differences and similarities in their approaches to bioethics and health care policy That conference first produced a volume through Shibunkaku Publishers of Kyoto that appeared in 1995 in Japanese *The Dignity of Death* edited by Kazumasa Hoshino Selections from those materials have been reworked for an English audience and now appear along with new essays in this volume The field of comparative bioethics is only in its infancy We are deeply grateful to Prof Kazumasa Hoshino one of the fathers of Japanese bioethics for having made this volume possible

H Tristram Engelhardt Jr Stuart F Spicker VII ACKNOWLEDGEMENTS This volume's editors and Kluwer Academic Publishers wish to thank Shibunkaku Press Kyoto Japan for permission to publish without charge essays derived from the U S

On the Nature of Health L.Y Nordenfelt, 2012-12-06 GENERAL INTRODUCTION This study of the concept of health is an attempt to combine central ideas in modern philosophy of medicine with certain results from analytical action

theory What emerges from the study is a concept of health based on an action theoretic foundation A person's health is characterized as his ability to achieve his vital goals The general conception is not new This study has been inspired by a number of scholars both ancient and modern The most important influences from the latter have been those of Georges Canguilhem H Tristram Engelhardt Jr Caroline Whitbeck and Ingmar Pern The novel aspect of this book consists of elaborations made to the general conception First the action theoretic platform is analysed in some detail The nature of the ability involved as well as the conditions for having that ability are specified Second the vital goals of man are given considerable attention Some previous attempts to define such vital goals are analysed and criticized A new characterization is proposed in which the vital goals are conceptually linked to the notion of happiness A person's vital goals are such states of affairs as are necessary and together sufficient for his minimal happiness Third a number of consequences of this conception are observed and analysed One issue which is particularly emphasized is that of whether the concept of health is a theoretical or a normative concept

### **Germ-Line Intervention and Our Responsibilities to Future Generations**

Emmanuel Agius, S. Busuttil, 2012-12-06 In contemporary ethical discussion widespread concern about the potential risks of genetic engineering is raising new and fundamental questions about our responsibilities towards unborn generations Newly acquired knowledge in genetic engineering techniques has brought about not only potential benefits but also immense risks for the well being of both present and future generations This book raises a number of ethical issues concerning the impact of genetic engineering on generations yet to be born The four topical areas that constitute the focus of the volume namely 1 from laboratory to germ line therapy 2 the concept of human nature theological and secular perspectives 3 genetic intervention and the common heritage view and 4 social responsibilities of geneticists towards future generations raise intriguing ethical and legal questions as well as important policy issues As much as any set of issues they reflect the hopes and fears prejudices and uncertainties that people associate with germ line intervention and the future of human kind

**Ownership of the Human Body** H.A. Ten Have, J.W. Welie, 2013-11-11 This is the first book in healthcare ethics addressing the moral issues regarding ownership of the human body Modern medicine increasingly transforms the body and makes use of body parts for diagnostic therapeutic and preventive purposes The book analyzes the concept of body ownership It also reviews the ownership issues arising in clinical care for example donation policies autopsy and biomedical research Societies and legal systems also have to deal with issues of body ownership A comparison is made between specific legal arrangements in The Netherlands and France as examples of legal approaches In the final section of the book different theoretical perspectives on the human body are analyzed libertarian personalist deontological and utilitarian theories of body ownership

*The Codification of Medical Morality* R.B. Baker, 2007-08-26 Like many novel ideas the idea for this volume and its predecessor arose over lunch in the cafeteria of the old Wellcome Institute On an afternoon in September 1988 Dorothy and Roy Porter and I sketched out a plan for a set of conferences in which scholars from a variety of disciplines would explore



the emergence of modern medical ethics in the English speaking world from its pre history in the quarrels that arose as gentlemanly codes of etiquette and honor broke down under the pressure of the eighteenth century sick trade to the Enlightenment ethics of John Gregory and Thomas Percival to the American appropriation process that culminated in the American Medical Association's 1847 Code of Ethics and to the British turn to medical jurisprudence in the 1858 Medical Act Roy Porter formally presented our idea as a plan for two back to back conferences to the Wellcome Trust and I presented it to the editors of the PHILOSOPHY AND MEDICINE series H Tristram Engelhardt Jr and Stuart Spicker The reception from both parties was enthusiastic and so with the financial backing of the former and a commitment to publication from the latter Roy Porter ably assisted by Frieda Hauser and Steven Emberton organized two conferences The first was held at the Wellcome Institute in September 1989 the second was sponsored by the Wellcome but was actually held in the National Hospital in December 1990

## Unveiling the Power of Verbal Art: An Psychological Sojourn through **Sexuality And Medicine Vol I Conceptual Roots**

In a world inundated with displays and the cacophony of instant conversation, the profound energy and emotional resonance of verbal beauty usually diminish in to obscurity, eclipsed by the continuous barrage of sound and distractions. Yet, set within the musical pages of **Sexuality And Medicine Vol I Conceptual Roots**, a interesting perform of fictional beauty that pulses with natural feelings, lies an memorable journey waiting to be embarked upon. Composed with a virtuoso wordsmith, this magical opus books viewers on a mental odyssey, lightly exposing the latent potential and profound impact embedded within the elaborate internet of language. Within the heart-wrenching expanse of this evocative examination, we can embark upon an introspective exploration of the book is central styles, dissect their captivating writing fashion, and immerse ourselves in the indelible effect it leaves upon the depths of readers souls.

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