

Jason Roach looks at our response to the spiritual death of general medical journals

The death of medical journals?

The *British Medical Journal's* appalling coverage of the end of life debate over the past few months has led many to question what is going on at our flagship journal.^{1,2} The controversy has arisen because the majority of the journal's coverage on physician assisted suicide took a different view to the majority opinion of the medical profession;^{3,4} the BMA recently took a neutral stance and the Royal College of Physicians' membership was clearly against any change in the law.^{5,6} However, despite our frustrations, when journalists fail to meet our expectations, we should respond proactively, not just reactively.

It is hardly surprising that the media industry, of which the *BMJ* is a part, is biased, since literature - and I dare to call news reporting that - often reflects the culture in which it is produced. And it is no secret that many parts of our culture are increasingly convinced that autonomy is an overriding ethical principle. This slide away from a deontological worldview should not surprise us, as 'the secret power of lawlessness is already at work'.⁷ Moreover medical journals are often staffed by a unique, self-selecting and highly trained group. They are (arguably) among the wise of this world and, as such, Paul's words to the Corinthians should echo in our minds as we read their work: 'Has not God made foolish the wisdom of the world?'⁸ In other words, we should expect that some people of influence, whose wisdom should tell them otherwise, will make decidedly foolish decisions. It's a problem that is by no means limited to the *BMJ*.⁹

However, the horizon is not completely bleak. As Colson comments, 'Even postmodernists are beginning to realise the inadequacy of their beliefs as they come face to face with the social chaos the naturalism breeds'.¹⁰ The coverage of other sections of the media regarding the Joffe Bill was remarkably positive, and our message is reaching the front lines both here and elsewhere.^{11,12,13,14} Additionally, the *Care Not Killing* campaign and many others like it proved, among other things, that appealing to logical consequence can be effective at proving Colson right in the battleground of ideas.¹⁵

So there are both positive and negative signs, both victories and losses for the kingdom. And whichever way the tide seems to be turning, our response should neither be to give up in despair and retreat into Christian ghettos, nor to be overoptimistic and expect heavenly change on earth. Instead we should show realistic determination. There is no room for complacency. The quote often employed at this point is that of English philosopher Edmund Burke, 'All that is necessary for the triumph of evil is that good

men do nothing.' I would like to outline three pressing reasons why Christians should act:

- **We should be appalled by what appalls God:** our Lord and saviour wept over the godless city of Jerusalem and said that we are blessed if we do the same.^{16,17}
- **We should desire what God desires:** God longs for all things to be brought under the rule of Christ, for 'all things were created by him and for him'.¹⁸ He tells us to pray that his kingdom rule would be known both now and in the future.¹⁹
- **We should store up for ourselves treasures in heaven:** God promises that if we will devote our resources to the work of the kingdom, he will repay us abundantly with blessing in eternity.²⁰

So here are three powerful reasons why we should be proactive in our response to the negative ethical onslaught of opinion leaders. And we *are* doing this. It was with great joy that I read comments, letters, rapid responses and radio interviews explaining in plain language why medicine should be about caring and *not* killing, showing how God's good, pleasing and perfect will was right and best for the good of all mankind. Let us continue to do this.

The truth is that journals are influenced and run by a very small number of people who, like all of us, have their own agendas aspirations and opinions. They and their readership can be influenced; personally, I hope that my appeal for internal review by the *BMJ* ethics committee might bear some fruit.²¹ For the sake of the name of the Lord we love and serve, let's not just complain, but campaign - not just with placards but with pens, perseverance and prayer - so that, by God's grace, we may stem the tide.

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references

1. Kiehlmann P. *BMJ* 2005; 331:1160-b. 27
2. Keown J. *BMJ* 2005; 331:0
3. Dyer C. *BMJ* 2006; 332:1169
4. Delamothe T. *BMJ* 2005; 331:0
5. news.bbc.co.uk/1/hi/health/4637835.stm
6. www.rcplondon.ac.uk/news/news.asp?PR_id=310
7. 2 Thessalonians 2:7
8. 1 Corinthians 1:20
9. Anon. *Lancet Neurology* 2003; 2:637-643
10. Colson C. *How Now Shall We Live?* Illinois: Tyndale House, 1999:26
11. Anon. *Lancet Neurology* 2006; 5:197
12. Twisselmann B. *Letter BMJ* 2005; 330:1389
13. Lorenz K, Lynn J. *MSJAMA* 2003; 289:2282 jama.ama-assn.org/cgi/content/full/289/17/2282
14. Pellegrino E. *JAMA* 1998; 279:1521-1522
15. www.carenokilling.org.uk
16. Luke 19:40-42
17. Matthew 5:4
18. Colossians 1:16; Ephesians 1:10
19. Luke 11:2
20. Luke 12:33
21. Roach J. *BMJ* 2005; 331:1160-b.17