

00rwp Caplan



UNIVERSITY OF MINNESOTA
TWIN CITIES

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April 7, 1989

Henry Blackburn, M.D.
Director
Division of Epidemiology
UMHC Box 179

4/11/89
bpc R. Keane

Dear Henry:

Thanks for the information on Keys work. I am not going to mention his work until I have had a chance to look at your scrapbooks and talk with him and Kampelman. My only reason for mentioning it at all (and I hope not unfairly) was that some of my students had done some work on human experimentation and mentioned his research. But, I am interested in the research myself and will take you up on the offer to look at the archival materials over the summer.

I hope to get to some of your forums but I cannot promise that I will during the next two months. I have a couple of big grant proposals to write and then I have to run the holocaust conference so I will be out of commission for a few weeks.

Sincerely,

Arthur L. Caplan, Ph.D.
Director, Center for Biomedical Ethics
Professor, Department of Philosophy and
Professor, Department of Surgery

ALC:mn

File - A. Caplan
(corresp)
Caplan

Quotes of Art Caplan "Justification" for human environmental experiments in Nazi Germany:

- 1) Many were helped by the sacrifice of a few.
- 2) Scientists are not responsible for value judgement but for design of experiments. It's not their business to judge what experiments should be done.
- 3) Only the doomed were used.
- 4) Only prisoners were used.
- 5) Research was critical for the safety and health of the State.
- 6) Experiments were done under the orders of legitimate authority.
- 7) Doctors cannot override legitimate requests from authority.
- 8) Moral duties of physicians are different under "total war" conditions.
- 9) Physicians must advance the interests of the State in total war.
- 10) Western nations engaged in similar activities in prison experiments, etc.
- 11) Sacrifice of 10 prisoners for 10,000 soldiers' benefit is justified.
- 12) There is no legal context for crimes against humanity or genocide and no international agreements about genocidal crimes exist.

COneop - Caplan



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October 23, 1989

Arthur Caplan, MD ✓ 10/24
Director
Center For Biomedical Ethics
3-110 Owre Hall
Box 33 Mayo

11/21
✓ pe J. Krakowski
R. Kline
file c ✓
✓ letter only c Caplan's reply
✓ Adv. Comm. Report.

Dear Art:

I am enclosing for you the recurrent issue of implantable hearts at NHLBI where I now sit on the Advisory Council. I was physically fired from a subcouncil of that Institute around 1976 for making an analogy with Nixon's cancellation of the SST (supersonic transport) plane prior to the development of a prototype. I thought that developing a prototype of the permanently implantable heart would create a medica-industrial complex and an empire of vested interests that would not "allow" society to make an appropriate decision about its development or diffusion.

The world is little better off now, many years later. I don't have all the details, but an internal committee of NHLBI recently recommended against NIH pursuing this issue. Senators Kennedy and Hatch then came on strong for obvious porkbarrell reasons to see that the recommendation was not carried out. NHLBI punted to an "independent body", the Institute of Medicine and this report is the result. It asks good questions but would not basically hold up development of this field.

It seems to me we need a strong and consistent reaction from ethics and from Health Services Research on artificial organs development. In general, this country has not met the needs by analyzing the potential impact of preventive strategies or what is actually happening in the prevention and delay of diseases in terms of cost benefit of such high-tech strategies as organ replacement.

Cordially,

Henry Blackburn (inf)

Henry Blackburn, MD
Professor and Director

✓ Enclosure



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October 30, 1989

Henry Blackburn, M.D.
Professor and Director
Division of Epidemiology
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Dear Henry:

Thanks so much for sending along the IOM study on the artificial heart. I have long had my doubts about the wisdom of pursuing large investments in this area. I agree totally with you that porkbarrelling considerations drove Kennedy and Hatch to continue the program in the face of many reasons for doubt.

I think ethicists have been too docile on the issue of high-tech solutions to organ failure. Prevention can surely do more in the short and intermediate runs for those facing organ failure than trying to find organ substitutes. I plan to keep writing and talking about these issues so anything you can share with me on the topic will get put to use!

Will you be put on the IOM study? Do you have any idea who they will recruit? I must say that I am not overly impressed with the group that was assembled to plan the artificial heart study although in fairness I think the study plan they propose is quite solid.

Regards,

Arthur L. Caplan, Ph.D.
Director

*11/10
pc. Confidential to
Christensen.
file correct.*

ALC:pav