
PRESS & TELEVISION

than \$2 million in a libel suit against the *Washington Post*, which had published a story claiming that he had set up his son in a business that had contracts with Mobil. But interviews with five of the six jurors after the trial revealed that none thought the story false. They faulted the original story for failing to *prove* it was true.

Juries also think "media giants can afford hefty damages and might as well pay," according to Lewis. Indeed, a 1982 study shows that media defendants win only 11 percent of the cases decided by juries, but 75 percent of those decided by judges. Such odds scare off journalists contemplating controversial stories about government.

Lewis suggests a remedy. "Public figures," whether officials or private citizens, could sue for libel only when a story did *not* concern government business. Otherwise, libel suits would be barred. Public officials' performance, in particular, should be fair game for press criticism, even inaccurate criticism. "Their recourse is not litigation but rebuttal," Lewis says. Without stronger curbs on officials' right to sue, *Sullivan* risks gagging the press with its own pocketbook.

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Painful Choices For Doctors

"The Calculus of Suffering in Nineteenth-Century Surgery" by Martin S. Pernick, in *The Hastings Center Report* (April 1983), 360 Broadway, Hastings-on-Hudson, N.Y. 10706.

Today's physicians often face an ethical dilemma: whether to prolong life or to spare pain when treating terminal cancer victims and other incurable patients. According to Pernick, a University of Michigan historian, doctors confronted a similar issue 130 years ago.

Until the mid-19th century, practitioners of medicine, lacking anesthesia, often had no choice but to inflict agony to save their patients' lives. Early 19th-century American doctors and surgeons, like their predecessors, steeled themselves to the suffering they caused because they knew it was necessary. An 1824 medical text backed them up: "Severe pain should never be an obstacle in the fight to preserve life."

Then, in 1846, William Morton, a Boston dentist, demonstrated that ether anesthesia made possible painless surgery. But the vapor of diethyl ether posed, then as now, a very real risk to life. Initial reactions to the dilemma were unambiguous. A physician's duty, one M.D. declared, was to preserve life, not endanger it, especially not in order to relieve "mere anguish."

But the profession's attitude toward pain soon changed. By 1850, ether and chloroform were in general use in major medical institutions. In 1855, a Philadelphia surgeon advocated that surgery, with its attendant risks, be used not only to save lives, but to ease pain from incurable

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ble diseases such as breast cancer. During the early 1860s, Silas Weir Mitchell experimented with neurosurgery to relieve chronic pain.

The growth of sentimentalism in Victorian America's literature, art, and religion was partly behind the change. The *Philadelphia Bulletin* echoed popular opinion when it editorialized in 1860 that the man most fit "to officiate at the couch of sickness . . . is kind and gentle."

And as time went on, physicians like Oliver Wendell Holmes, Sr., who prided themselves on their sternly "rational" approach to medicine, were eager to end squabbles within the profession's ranks. Beginning in the 1850s, they looked to medical statistics to compare the risks and benefits of competing remedies. A technical "calculus of safety," they believed, would enable physicians to sidestep touchy ethical questions when prescribing treatment.

But, as contemporary physicians can testify, the question of whether relieving pain can justify steps that may deprive a patient of life has not yet been answered in a way that is acceptable to society. As today's practitioners try to do what is "best" for their incurable patients, asks Pernick, will they again be tempted to search for an illusory technical "fix"?

The Quiet Success Of the Hutterites

"The Certainty of Salvation: Ritualization of Religion and Economic Rationality among Hutterites" by Karl A. Peter, in *Comparative Studies in Society and History* (April 1983), Cambridge Univ. Press, 32 East 57th St., New York, N.Y. 10022.

Few Christian sects are more obscure than the Hutterites, whose 250 tiny but flourishing farm communities dot the plains of South Dakota and western Canada.

Like the Pennsylvania Amish, the Hutterites adhere to centuries-old traditions and religious practices—both sexes are darkly garbed, but women wear distinctive polka-dot kerchiefs. Unlike their Pennsylvania counterparts, the Hutterites fully exploit modern technology. Today's Hutterite farmer is likely to be found chattering on his CB radio from the air-conditioned cab of his power combine.

Ironically, the sect was founded around 1527 by Swiss and German peasants and craftsmen who looked backwards, to prefeudal society, for a communal economic alternative to the crumbling medieval order. Led by Jacob Hutter, explains Peter, a Simon Fraser University sociologist, they embraced pacifism and communal ownership of property and refused to acknowledge the authority of any state.

Unlike other Protestant dissenters of the day, the Hutterites held that individuals could achieve salvation only if the entire *group* were also saved. At first, community life was exemplary. But by the 1590s, Hutterite preachers were chiding some parishioners for sexual promiscuity and for coming to church drunk. Church leaders tightened the rules and redoubled their emphasis on group conformity.

As a result, Peter writes, the Hutterites' social life and religious doc-