

conceptual analysis possible. Moral expertise thus is bankrupt because it becomes nothing more than apologia for the norms of the dominant class. Moral experts, as Hegel once warned, are doomed to be nothing more than conceptual handmaidens to the powerful and dominant within society (Caplan 1992, 26).

The possibility that academic bioethics has routinely been “a conceptual handmaiden” and only occasionally corrupt should concern us no less than the opposite case. ■

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Does Money Make Bioethics go ‘Round?’

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*Money, money, money, money,
A mark, a yen, a buck or a pound,
That clinking, clanking clunking sound
is all that makes the world go round,
It makes the world go round.
“Money, Money,” from Cabaret*

Money is the stuff of life; it is the medium of exchange that we use to buy food, clothes, warmth in the winter, cool in the summer, and the fuel that moves us around the planet. Of course money makes the world go ‘round, but does it, Sharp and his colleagues (2008) want to know, make bioethics go ‘round?

We all agree that there are things money cannot buy – happiness, love, contentment – but are there things money *can*, but *should not*, buy? How about health care? Citizens in the countries of the developed world (with one notable exception) have decided that while the market may work

its magic in producing high quality, low-cost computers, it is not the appropriate mechanism to govern access to the life-giving resources of medicine. How about medical research? Improvements in health care often are the result of the diligent, and costly, labors of medical researchers. Someone has to pay for this important work. But, as we now know, money has a way of corrupting research. An enterprising muckraker could easily sell subscriptions to a “scandal-of-the-month” club newsletter, documenting the many cases where drug and medical device companies put profits before people. Think, for example, of Vioxx, the International Early Lung Cancer Action Program (Resnick, 2008), or Vytorin (Lemmens, 2004).

What about bioethics? We know that money *can* be used to buy bioethics, but *should* it? This is the question that troubles Carl Elliott (2005), Leigh Turner (2004), Virginia Sharpe (2002), and others. Being empirically oriented, Sharp and

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his colleagues rightly note that before we anguish over the proper place of money in the work of bioethics, we should know if anyone is buying what bioethics has to sell. Perhaps reports of bioethicists-for-hire (De Vries, 2004) are exaggerated or anecdotal. The authors are convinced, and we agree, that those concerned with the integrity of bioethics need to know what is happening in the bioethical marketplace – they need to know “Who’s buying bioethics research?”

Sadly, Sharp and colleagues do not answer the important question they pose. They do give us a snapshot of who funded *empirical* work in bioethics in the 15 years 1990-2004, but their data say nothing to allay the fears of those who worry about the influence of government, foundation, and corporate money on bioethics research.

How did this research team miss the point? We concur with other peer commentators who point out that this study suffers from inadequate operationalization of the “the phenomenon in question” (Evans, 2008), which leads, in turn, to limited external validity (Tsai, 2008) and complete disregard of the funding of the important work of *normative* bioethics (Tsai, 2008; Evans, 2008).

The authors’ decision to sample only empirical studies published in bioethics journals is curious for at least two reasons. First, the authors give no adequate justification for their decision to limit their study to articles with empirical content. Their explanation—that funding is a more salient factor for empirical work because these studies “often require considerable financial resources,” as opposed to “conceptual analysis [and] historical reviews [that] can be done with relatively limited funding”—is unconvincing. Many kinds of empirical research (textual analysis, observational studies, interview studies, and some “quick and dirty” surveys) require no more funding than the armchair philosophizing excluded from their study. Indeed, as the authors acknowledge, their own empirical study did not require special, outside funding.

Second, the choice to examine only empirical research underestimates the importance of bioethics. By limiting their study to data-driven research, the authors eliminate from their analysis not just the 94.7% non-empirical articles in their 14-journal sampling frame, but also: 1) bioethics articles in biomedical journals that reach a wider audience such as *JAMA* or *Lancet*, 2) bioethics scholarship published in monographs and anthologies, 3) bioethics instruction to professionals and professionals-in-training, and 4) bioethics consulting work for industry that does not lead to publication. The “empirical turn” in bioethics is a relatively new phenomenon and as such empirical articles are a very small, and as yet unrepresentative, part of the larger interdisciplinary of bioethics. We can imagine normative bioethicists, whose work makes up the majority of the bioethics corpus, asking, “What? Don’t you want to know about *our* conflicts of interest?”

While Sharp and his collaborators do well to ask the necessary question, “Who is buying bioethics research?” they miss a more foundational question: “What is the *value* of bioethics research?” Or, put more plainly: What are bioethi-

cists selling? For the sake of simplicity we can divide research done by bioethicists into two categories: the empirical research that is the focus of the article by Sharp and colleagues., and research that explores moral theory and its appropriate application to real world events. Each type of research has a market value.

Sharp and colleagues (2008) report that the majority of empirical research in bioethics is “bought” by the government, private foundations, and universities. Much of this research describes attitudes toward moral issues or the (real or imagined) consequences of ethical policies. What is the value of this research? Should we care when non-profit agencies pay for bioethics research? Well, yes. Often this kind of research is what sociologist C. W. Mills (1959) referred to as “abstracted empiricism:” “. . . studies of contemporary facts [that] become a series of unrelated and often insignificant facts of milieu.” Mills worried that research of this type is shaped by “concern for the problems of the interests that have paid for them,” making it unlikely that research will generate a “true accumulation of results” about substantive problems. We need not look far to confirm Mill’s concern. Consider the several large-scale surveys of public attitudes about complicated bioethics issues that respondents know nothing about. Asking Americans their opinions about pre-implantation genetic diagnosis, or genetic tests for prostate cancer that are not yet available is akin to asking them about the blue butterflies of Paraguay: while this type of bioethics research may meet the needs of funding institutions—concerned about public reaction to a new line of research or medical therapy—they have no bioethical or sociological value.

The second kind of bioethics research—research that explores moral theory and its application to real world events—is now frequently done in response to requests for advice from corporations. Why do companies wish to “hire a conscience?” We have no doubt that bioethicists who do research on behalf of industry seek noble goals: e.g., better oversight of company research, the prioritizing of investments toward diseases with major public health impacts, improving the recruitment of research subjects and the quality of consent. While such work can be conducted with integrity and independence, there remains the uncomfortable concern that the questions posed by industrial sponsors may be narrow and designed to produce a particular finding. Bioethicists have been hired by industry to define the ethical use of homeless people in phase one trials (Beauchamp et al., 2002), convene advisory boards on rationing to support the use of activated protein C in sepsis (at a cost of \$6,000–10,000 per patient) (De Vries, 2004), and to serve on commercial and proprietary IRBs (Lemmens and Freedman, 2000).

Bioethicists working as corporate consultants are forced to delimit the nature of their research and the conclusions that flow from it. In addition, those who hire bioethicists are savvy enough to handpick experts whose decisions will suit the goals of the company. As Michael West, a scientist-turned-biotech entrepreneur notes, “There is, I think, a misunderstanding that if you set up an ethics panel there are

some sorts of ground rules, like principles of accounting, and everyone knows what those rules are. In the field of ethics, there are no ground rules. . . . It all depends on who you pick" (quoted in Hall, 2003).

Fifty years ago, Mills noted the conflict between the "economics of truth" (i.e., the costs of research) and "the politics of truth" ("the use of research to clarify significant issues and to bring political controversy closer to realities"). Can bioethics find a way to live with this tension, to serve two masters—truth and money? Sharp and colleagues. conclude that: "... widespread concern about the cooption of bioethics research by industry is not supported by available empirical data." But the scope of their data—limited to voluntary disclosures of conflicts of interest in a small and unrepresentative fraction of the published bioethics literature—leaves this "widespread concern" unresolved and their question – Who's buying bioethics research? – unanswered. The debate about the influence of money on the work of bioethics, about what is being sold, to whom, and for what purposes, continues. ■

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