

# The Mixed Promise of Genetic Medicine

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In the early decades of the 20th century, most Americans considered cosmetic surgery to be just a few steps removed from quackery. Many observers saw the desire for cosmetic surgery as a mark of vanity, and physicians tended to believe that such surgery violated their ethical injunction to do no harm. Yet by the end of the century, cosmetic surgery had become a multibillion-dollar business, and it is now an accepted part of mainstream medicine, with its own professional journals and associations. Cosmetic-surgery clinics are sponsored by elite academic centers such as Stanford, Johns Hopkins, and the Mayo Clinic. Even some feminists embrace cosmetic surgery as a tool for self-fulfillment. What happened to produce such a dramatic change?

One relevant development may have been the rise of academic psychology and its acceptance by consumer culture. By midcentury, at least some Americans had been persuaded that cosmetic surgery could be seen as a medical treatment for psychological problems such as the inferiority complex. According to this view, cosmetic surgery was not quackery or vanity or even merely cosmetic; as historian Elizabeth Haiken writes, it was “psychiatry with a scalpel.”<sup>1</sup> This view lined up nicely with a more expansive, holistic conception of medicine itself. If a legitimate purpose of medicine is to improve a patient’s psychological and social well-being, why not accomplish that purpose with surgery?

The transformation of “enhancements” into “treatments” is now a familiar part of medicine, of course, and it has been accelerated

by medicine’s move into the consumer marketplace. Physicians today prescribe drugs to lengthen attention spans, strengthen erections, and smooth out wrinkled brows, even when they are not entirely convinced that what they are treating is a medical need rather than a consumer desire. Many others write prescriptions for conditions that blur the boundary between pathology and ordinary human variability: synthetic growth hormone for idiopathic short stature, antidepressants for social anxiety disorder, and hormone-replacement therapy for the effects of menopause. The line between what consumers want and what patients need has become very hard to draw.

It may become even more difficult with the advent of genetic medicine, which, according to its advocates, promises us even greater control over our own constitutions. Not only will we be able to eliminate genetic disorders, claim the advocates, but we will produce genetically superior people. With the new “liberal eugenics,” the genetic lottery will be replaced by a genetic supermarket, and genetic choices will be orchestrated not by an authoritarian state, but by providers and consumers. It sounds like science fiction, of course; and perhaps it is. But at least one U.S. infertility clinic currently allows parents to choose the sex of their child for “family balancing,” and most clinics make a profit by allowing clients to choose donor sperm or oocytes on the basis of the donor’s characteristics. And choice does not always mean improvement in any commonly accepted sense: a few years ago, a deaf couple fulfilled their desire to

have a deaf child by seeking out a sperm donor with five generations of deafness in his family. Could such cases represent a glimpse into our genetic future?

Many of us feel uneasy about such a future, without being quite able to say why. Michael Sandel’s graceful and intelligent new book, *The Case against Perfection*, is an extended effort to diagnose that unease. What troubles Sandel is not so much the particular kinds of traits and abilities that consumers might choose (deafness rather than super-hearing, for example) or even the possibility that these procedures will be bought and sold in the marketplace. It is the fact of choice itself. Sandel worries that more genetic choice will undermine our appreciation of the gifted character of human life — our sense that the way we are is not solely the product of our own doing. For Sandel, the effort to bring our genetic constitution under our voluntary control represents a kind of hubris. Standing face to face with a marvel of biology, one produced by eons of natural selection, we decide we can do better.

Many Americans see choice as an unalloyed good: the more we have, the better off we are. But as Sandel points out, choice is a mixed blessing. The more control we exercise over our identities, the greater our responsibility for the results. Flaws we could once blame on nature, fate, or God, we may soon be able to blame only on ourselves (or perhaps on our parents). The converse is true as well: more genetic control may encourage the fortunate to see their talents as achievements they have earned, rather than gifts for which they

