Dear Editor,

In response to Dr Cooley I should like to make the following points.

If I have misinterpreted Dr Cooley and his position is indeed closer to mine then I extend an apology to him and I thank him for his clarifications. However, his own words should be noted in this response “...I am willing to reject the distributive justice principle. I cannot see how it can be made plausible for a number of reasons.” This is indeed the main thrust of his message as I interpreted it in his previous article.

I cannot accept that the pursuit of distributive justice should be rejected in relation to clinical research in developing countries, merely because of the alleged philosophical vagueness of its formulation by CIOMS. In my view, the extent of injustice in clinical research requires those from wealthy countries who undertake research in developing countries to accept the moral obligation to use opportunities offered by such activities to improve health care and to redistribute resources [1, 2]. I acknowledge that this is an ambitious goal. It is not one that appeals to many who have lived their entire lives in privilege and who seem unaware of the extent to which their own privileged lives are sustained by unjust processes of economic accumulation and exploitative research in developing countries [3, 4]. My justification for a new and more ambitious set of goals in research in developing countries is that I do not see any significant potential for reversal of the injustice in research through such arguments as Dr Cooley puts forward.

When a theory of justice is advanced that actually promotes greater justice in practice this will be wonderful! Until this is achieved we may have to be content with the application of common sense and good will to the “vague” ideals espoused in various guidelines. However, it is not difficult to envisage contextual interpretations of such ideals in ways that allow significant reversals to be made to injustice in medical research and health care in developing countries [2]. Lack of an explicitly clear principle of justice need not induce paralysis.

Essays on controversial topics can be expected to generate numerous critical responses, each addressing different aspects of the authors’
arguments. Therefore it can be anticipated that a range of responses could follow Dr Cooley’s provocative article on the important topic of distributive justice in international clinical research.

Yours sincerely

Solomon R. Benatar

REFERENCES