

FRONT RUNNERS

Bargain Basement

Plea bargaining may be the most widely deplored practice in our generally unpopular judicial system. Law-and-order enthusiasts complain that it lets criminals off the hook. Defenders of due-process rights fear that it substitutes expediency for justice. And now this already smoky debate is likely to be thrown into even deeper obscurity by a study that grandly concludes that "plea bargaining may actually reduce crime." The average plea bargainer, noted the Law Enforcement Assistance Agency in announcing the results of the study in August, receives no discount in either charge or sentence in exchange for his plea.

These findings, derived from a study of 5,000 felony cases in Washington, D.C. utterly contradict not only public wisdom, but the experience of prosecutors. Ex-D.A. Nicholas Scopetta, now director of the Institute for Judicial Administration, was "very, very surprised" to hear of the results, as, he added, were other prosecutors familiar with the study. Even the report's author, William Rhodes, is at a loss to explain why a defendant would enter a guilty plea without getting a reduced charge.

But Rhodes does make one point that the LEAA, in its zeal to reassure a hostile public that plea bargaining isn't half as bad as it seems, neglected to mention. In Washington *the most serious charge* in cases involving burglary, larceny, robbery, and assault characteristically leads to a suspended sentence, not a jail term. Copping a plea without a bargain, seems less surprising if the worst a defendant can get is probation.

Of course, the knowledge that convicted felons generally face such mild punishment might not mollify most law-and-order proponents. It also might not be true outside of Washington, D.C., which would make the study a good deal less useful. Herbert Miller, director of a second LEAA-funded study involving six different jurisdictions, notes that the behavior of prosecutors and habits of charging and sentencing vary widely from county to county. And Cheryl Martorana, who oversees LEAA's plea-bargaining studies, admits, despite her own agency's claims to the contrary, that the findings "may not be generalizable." She also notes that 16 more regional studies are in the works. It is to be hoped that the LEAA will report these with a little less bravado and a little more attention to detail.

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FRONT RUNNERS



Reading Can Be Hazardous to Your Health

Although the influence of newspapers has long been waning because of television, the printed media recently came in for a nasty distinction usually reserved for the electronic: that of inducing violent acts by consumers. An article appearing in the August issue of *Science* magazine demonstrates a high correlation between the incidence of murder-suicide accidents and stories of such accidents in newspapers several days beforehand.

The author of the study, David P. Phillips, a sociology professor at the University of California at San Diego, had previously written articles drawing a connection between front-page reports of suicides and subsequent suicides and car accidents. In his most recent study, Phillips examined 18 murder-suicide stories between 1968 and 1973, and the incidence of noncommercial plane crashes for a week after the reporting of each story. Theorizing that accidents in small aircraft, as in cars, might be disguised forms of suicide, Phillips found that the number of crashes three days after the reporting of murder-suicides was double what would normally be expected.

Furthermore, he discovered, the number of crashes rose with the intensity of the newspaper reports of the previous incident.

Despite his findings, Phillips is no enemy of newsprint. Though he feels that bold newspaper accounts of violence increase the incidence of suicide, Phillips never suggests that editors hide the stories in back pages. "That's not for me to do," says the author. "One of the greatest things we have in this country is a strong First Amendment, and it mustn't be violated." But Phillips does note with satisfaction that some newspapers try to place stories of violence in the inside pages, where, he says, they do no harm.

Lawyer, Teach Thyself

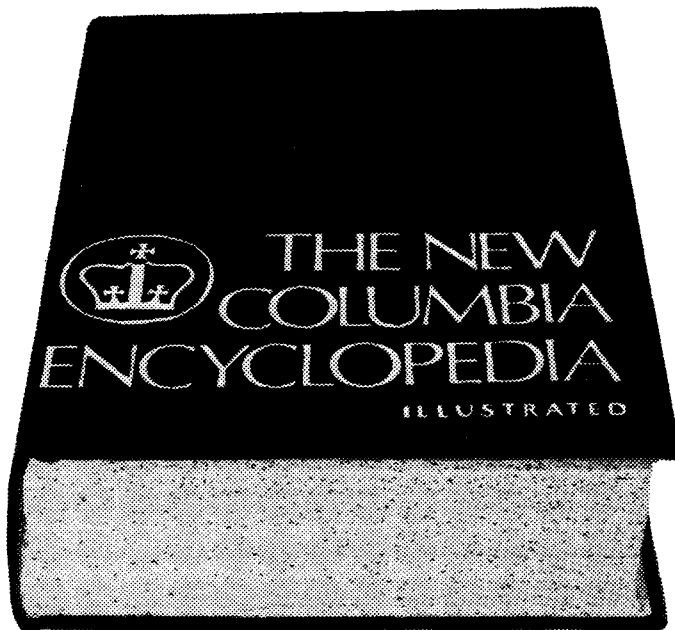
Although regard for lawyers has never been high, the litigious profession has fallen to particularly woeful depths of ill repute in the last few years: President Carter knew that he had a sitting duck when he lashed into them last May. In an effort to knock out some of the dents in this battered public image, bar associations in a number of states are now requiring that all licensed attorneys go back to school once a year.

The system, called mandatory continuing legal education, requires that lawyers spend at least 15 hours a year taking approved courses in recent developments in law. The courses are administered by the American Bar Association's Committee on Continuing Professional Education, and taught by a combination of law professors, lawyers, and judges. Course titles include "Affirmative Action After Bakke" and "Estate Planning for the Dying Client," a touchy subject combining law, religion, and medicine.

So far, the education program has

been approved by six state bar associations, with as many as 10 more prepared to follow suit in the near future. But even this modest effort, chosen over such more serious reforms as a regular retaking of the bar exam, has been resisted in most of the major states. California and Michigan have already rejected the plan; New York is likely to do the same. Lawyers don't cotton to claims of incompetence. But then, most people object to lawyers not because they seem inept, but because they're so adept at milking the client. And they needn't give a course in that.

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SCIENCELETTER

The Case for Test-Tube Babies

by Albert Rosenfeld

THE MERE MENTION of "test-tube babies" triggers instant repugnance in most of us. Visions arise, from Aldous Huxley's *Brave New World*, of moving assembly lines of glassware out of which babies are decanted at each terminus by a detached and impersonal technician. Procreation thus becomes reproduction in the full factorylike connotation of that word. And as we conjure up the distasteful (at the least) scene, words like *mechanization* and *dehumanization* reverberate through our neuronal networks.

Nevertheless, despite the offense to our sensibilities provoked by even the thought of artificial wombs, there is a valid case to be made for test-tube babies in the full Huxleyan image—not mass-produced on an assembly line, perhaps, but nevertheless wholly and "artificially" grown in a scientifically monitored environment without ever being carried in the uterus of a human mother. Such a case can be made (which does not mean that I personally advocate it) on the basis not merely of bizarre and exotic speculations but of purely humane, down-to-earth considerations having to do with the health of individual babies.

As reproductive biologists proceed with further research on animals, there should be sufficient time (if we don't waste it) to continue thinking about and debating the essential questions: whether or not we wish to utilize these biotechnologies for the creation of human beings, and if so, for what purposes. The ethical implications are profound and far-reaching, and each of us should make a contribution to the final decisions. Let us not proceed the way we have until now—letting each banner headline provoke us into a spate of concern that dissipates as soon as the event-of-the-moment has passed.

The test tube is, of course, the symbolic, not the actual, container employed in the world of *in vitro* procreation. *In vitro* means "in glass," though the laboratory container or device may be plastic, ceramic, metal, or any combination of materials, of any shape, size, or complexity. The common theme is that babies are created—or started on their way—outside the human body, by means that bypass the conventional sexual channels. Though the offspring of artificial insemination

(AI) are loosely referred to as test-tube babies, the "test tube" in this instance holds only the sperm—which is not usually contributed by the husband of the prospective mother, but more often by an anonymous donor selected by the doctor. In some cases, the sperm is taken from deep-frozen storage.

Tens of thousands of babies are estimated to be born each year in the U.S. via AID (artificial insemination, donor; in contrast to AIH—artificial insemination, husband). Our present population probably includes more than 100,000 test-tube adults, indistinguishable from anyone else, who were conceived by AID. Exact numbers of AI births are hard to come by, since the technique's legal status still hovers in a fuzz of ambiguities and the method of conception is not always recorded on the birth certificate. But the practice is so widespread, and has been with us for such a long time, that we have obviously made our uneasy *de facto* peace with at least this type of test-tube baby.

In artificial insemination, when fertilization occurs, it does so in the usual manner, in one of the fallopian tubes of the would-be mother. The kind of test-tube baby recently making international headlines, however, entails *in vitro* fertilization. The radical difference between AI and this method is that, with *in vitro* fertilization, the egg is removed from the woman's body—usually because the tubes leading from ovary to uterus are blocked. Insemination (in this case usually with the husband's sperm) and conception both take place *in vitro*. Only after the egg is fertilized and has, after several days, divided repeatedly to become a cluster of cells called the blastocyst, is the incipient embryo transferred back into the woman, where it will implant itself into the wall of her hormone-prepared uterus in a normal manner.

The issues about test-tube babies are not new; what has made them controversial today is the fact that they have resurfaced with new credibility, and therefore with greater intensity, because of the historic birth in Britain. This event was ironically juxtaposed in the news with a lawsuit in New York brought by the couple who might themselves have become the parents of the world's first test-tube baby six years earlier. In 1972 Dr. Landrum Shettles, of

the Columbia-Presbyterian Medical Center in New York, removed an egg from a Florida woman, Doris Del Zio, and fertilized it *in vitro* with her husband's sperm—much as Drs. Patrick Steptoe and Robert Edwards were to do with Lesley Brown and her husband in 1978, when the state of the art was considerably more advanced. But Shettles's experiment was aborted—in both its meanings—when his superior, Dr. Raymond Vande Wiele, destroyed it. Perhaps Vande Wiele was indignant that Shettles was "playing God" in this fashion; but in the view of the Del Zios, it was Vande Wiele himself who was playing God by destroying their potential baby. Surprisingly, Mrs. Del Zio was awarded \$50,000 in damages (she was suing for a million and a half), which suggests that the jurors were at least convinced that the "test-tube" attempt was neither preposterous nor immoral.

My purpose is not to repeat all the details of this by-now-familiar story, nor the ethical arguments pro and con; I want to proceed directly to the topic of the ultimate test-tube baby, à la Huxley—the all-the-way *in vitro* baby, conceived *in vitro* and brought through all its embryonic and fetal stages *in vitro* to its full-term birth or "decantation." This is not to say that the bioengineering knowhow for this feat is anywhere in sight, yet there seems little doubt that it could be accomplished—and probably sooner than most people think—if anyone were sufficiently motivated to bring it about. But why would anyone want to?

For one thing, more than 200,000 babies with birth defects are born in the United States every year. Of these defects, probably not more than one in five is purely genetic in origin; the others are largely congenital in nature, the result of something gone wrong during a critical stage of development. It has been argued that, if the potential baby could be visible during the whole of its development—in its "womb with a view," as it were—and its growth monitored daily in detail, hundreds of thousands of birth defects might be averted. The embryo-fetus, which has always been on its own in its dark isolation ward for the nine-month-long prenatal period, could thus become as accessible to medical intervention as any other ailing patient.