New tools generate new products; new products may require people to modify their behavior. Our newly found ability to manipulate and use genes, coupled with advances in medicine that enable the transplantation of whole human organs have resulted in a need to review and revise the way we behave with regard to the use and application of these recently acquired talents. This situation is both thoroughly documented and examined in a recent publication of the Nuffield Council on Bioethics entitled “Human Tissue - Ethical and Legal Issues”. This report focuses on five issues relating to human medicine: the removal of tissue, acquisition and supply of tissue, use of tissue, patents, safety and quality. In so doing it introduces legal issues relating to both existing legislation (primarily of UK origin with excursions to Europe as appropriate), the way existing law is used in practice, and a discussion of the ethical principles that can be brought to bear on questions of human tissue, its procurement and use. It is these ethical principles that catch one’s attention. In developing these principles the writers of the text state;

“Much valuable theoretical writing in moral philosophy has approached issues to do with human bodies and tissue either from the perspective of human rights or from the perspective of utilitarianism (more broadly consequentialism). Neither of these two approaches has reached incontrovertable conclusions on the practical issues that we are concerned with. We have therefore thought it best to take a more practical ethical stance. We set out below ethical principles that are intended to command general support and that can be clearly and effectively applied to the laws and professional codes of conduct”. (#6.3, p. 39; italics and emboldening done by this author)

The basic ‘ethical’ principle would seem to be to determine a *modus operandi* that can command general support or general acceptance or acceptability. Clearly, once acceptability can be obtained or ascertained it is a relatively minor task to transform such acceptances into the laws of the land, professional institutions or of the institutions in which practices involving human tissues occur. But can
acceptability be the chief criterion for ethicality? Let us consider situations in which we might regard acceptability, unacceptable.

One of the accepted practices of war in biblical times led to the total slaughter of the men, women and children of the unfortunate tribe of Amorites (Deut2:34: 3;6). It was also acceptable by the populace at large during the French Revolution to round up and decapitate the nobility of France. It was clearly acceptable to much of the population of late nineteenth century America to comply with the dispossession of the native Indian population. In the 20th century, we have the episode of the Nazi Germans who destroyed the homes and businesses of Jews and were party to the rounding up of Jews, homosexuals, gypsies and the mentally subnormal for their deportation. In the China of the Cultural Revolution, it was acceptable for members of society to denounce their neighbours for behaviour or ‘thought crimes’ that we would regard as the normal cut and thrust of social debate. The present acceptability of judicial killing of humans, the abortion of foeti, the treatment of animals (transportation, cage rearing and eating) are all issues that can command a great deal of acceptability....in certain quarters, but are regarded as totally unacceptable in others. Are we then to adopt acceptability as a criterion for the determination of ethical principles? And if we do not adopt acceptability, then what do we do?

Of course it is important to obtain the consent of patients when some of their tissue is to be removed; of course it is necessary to work always for the benefit of the patient and not to cause injury or hurt except in the regrettable circumstances that such sacrifice will ultimately be to the patient’s benefit; of course we should not take undue advantage of those who are not competent to look after their own affairs adequately (the young, old and severely ill), and of course we should not seek to generate profit at source from excised cells and tissues that will become genetically transformed into ‘hot properties’. But transpose such decisions into a war situation or the kind of environment that pertained in the concentration camps, Gulags or Stalags of recent memory; where protein, whatever its source might hold off malnutrition and where you did what you were told and not what you considered acceptable. We may infer that the principle of acceptability is a principle limited to the special situations in which life threatening events are not imminent.

Additionally, we must not forget that acceptability is a manipulable property of the human mind. Propaganda, advertising, education and social pressures (styles, trend setters, fashion) can all be brought to bear to make acceptable that which we would otherwise have found unacceptable or vice versa. Also, when like minded people consort, acceptance is relatively easily obtained. To some extent those who seek to promote ethical principles might be so selected that agreement is anticipated from the previous and thoroughly examined reputations of the invitees.

Clearly, to take account of such special circumstances (imminence of death, probability of likemindedness) we can modify the principle of acceptability in the way a scientist might change a hypothesis that has failed to meet a particular test.