

**dr.**  
**mendelsohn**



## *Laying guilt on a patient*

**DEAR DR. MENDELSON:** In a recent column, you advised a Mrs. M. M., whose child was born with a series of congenital malformations after she had ingested a large number of drugs, that it is "not unlikely" the deformities resulted from the taking of the drugs. You said you saw no point in advising her family to go through genetic counseling. I feel your reply did a great injustice both to this woman and to genetic counseling in general.

The infant in question clearly has what is known as Poland's syndactyly, a well-defined birth defect. We have seen numerous cases of this problem, and there is no evidence that this condition is associated with drug ingestion. Likewise (and in this you are correct), there is no evidence that the condition is hereditary. I'm afraid you have set this woman up to carry a terrible burden of guilt for the problems her son has.

While I would certainly agree that avoidance of drugs during pregnancy is to be encouraged, I am not sure it is useful to list all the warnings concerning the various drugs when their effects during pregnancy are uncertain. There is no evidence that these drugs are not safe during pregnancy, and there certainly are going to be situations in which some of them will be justifiably administered. I think reasonable precautions are one thing, but inciting unnecessary anxiety is quite another.

One of the purposes of genetic counseling is to attempt to arrive at a diagnosis for situations such as this in which etiologies are not clearly understood. Genetic counseling, like other branches of medicine, is concerned with establishing a correct diagnosis before attempting to give prognostic or genetic information. You ought to emphasize that it is in just this type of case that the appropriate information might be obtained through genetic counseling. —Charles J. Epstein, M. D., Professor of Pediatrics and Biochemistry, director of the Birth Defects Center and Center for Medical Genetics, University of California, San Francisco

**DEAR DR. EPSTEIN:** Thank you for letting my readers and me know that the birth defects described by Mrs. M. M. have a name attached to them. You point out that the cause of this condition, like many other rare syndromes, is unknown. Yet more and more fetal damage IS being attributed to drugs ingested by the pregnant woman. So, I believe that all these rare (and certain not-so-rare) conditions deserve not just a name but much more thorough investigation. Medications, X-rays, intrauterine devices (IUDs) and nutritional deficiencies should be studied extensively to see how they affect the fetus.

This seems particularly applicable in this kind of case, because it has no genetic pattern and because medications the mother took during her first four months of pregnancy already have been suspected of causing birth defects.

**PROPER PATIENT EDUCATION**, including informed consent, often **DOES** introduce feelings of guilt. While physicians do not hesitate to utilize guilt and fear in some areas (i.e., telling smokers to stop smoking and obese patients to lose weight), they often are understandably reluctant to point out such potentially hazardous factors as the adverse conditions produced by a patient's taking prescribed medications. After all, this kind of causative factor may lead not only to guilt on the part of the patient but also to responsibility on the part of the doctor.

I am puzzled by your advice that this mother and her younger brothers should seek genetic counseling even though there are no genetic, hereditary or familial aspects to this baby's deformities. All branches of medicine are concerned with diagnosis, and I see no need to add unnecessarily to the genetic counselors' patient load.

Too many professionals, including speech pathologists, hypertension screeners and, most recently, "acne specialists," seem to be defining their clients so broadly that practically the entire population of the country would seem to be in need of their services. This is sometimes referred to as a treatment in need of a disease — I would not want to see genetic counseling fall into this trap.

*Dr. Mendelsohn welcomes questions from readers. While he cannot reply to them all individually, he will answer those of general interest in his column. Write to Dr. Mendelsohn, Chicago Daily News, Chicago 60611.*

*You can hear Dr. Mendelsohn on WNIS-FM every Monday, Wednesday and Friday at 9:39 a. m. and 7:34 p. m. and Tuesday and Thursday at 4:34 a. m.*