

Isabella, negligently treated his daughter, Holly Ramona, for bulimia, and during the treatment allegedly implanted false memories wherein he sexually abused her. He also sued Ms. Ramona's psychiatrist, Dr. Richard Rose, who gave Holly sodium amytal and encouraged her to believe that her memories were true. Ms. Ramona's revelations led to her father's dismissal from his job—a high paying executive position with Mondavi vineyards—and irretrievably destroyed relations between him, his wife, and his two daughters, one of whom is Holly.

The jury found both Ms. Isabella and Dr. Rose guilty of negligence, and Mr. Ramona was awarded damages for his lost wages. However, Mr. Ramona's multimillion dollar suit for emotional distress was denied.

This third party suit against a health care professional for negligence is distinguished from *Tarasoff v. Regents of University of California* (551 P.2d 332 (1976)) and its progeny, because physicians negligently failed to take action to prevent harm to third parties. In the Ramona case, the health care professionals were accused of negligence based on the course of treatment they undertook.

Mr. Ramona claimed that Ms. Isabella used suggestive techniques to create the false memories of events Holly Ramona claimed took place. One of the principal suggestions made

to her was that 80 percent of bulimia cases result from childhood sexual abuse, and this suggestion encouraged Ms. Ramona to believe that such abuse in fact took place, despite the lack of physical evidence. Mr. Ramona also claimed that Dr. Rose's use of sodium amytal, a so-called "truth serum," unfairly led his daughter to believe in the truth of her recovered memories, and that the physician did not dissuade her from this belief.

Some news commentators believe that the verdict in this case represents a serious setback for the health care profession, and that psychotherapists will have to be more careful in treating patients using repressed memories of sexual abuse. Other commentators argue that the therapists' errors were not planting false memories, but, instead, helping Holly Ramona determine whether her memories were true or false. In any event, this decision indicates that psychiatrists and therapists must not attempt to create memories for their patients in their therapeutic endeavors or they face the possibility of liability by those affected.

K.M.F.

Letters to the Editor

To the Editor: Dr. Thomas A. Preston's article "Professional

Norms and Physician Attitudes toward Euthanasia" (*JLME*, Vol. 22: 1), targets often ignored issues of the euthanasia debate. Covering one's posterior is understandable for most people in most professions. Physicians, however, must answer to a higher calling, because they are entrusted by law and society with great power over how we live and how we die. For doctors, the luxury of avoiding treatment ceases when they must deal with terminal illnesses and end-of-life situations.

At no other time is it so crucial to listen and respect the wishes of patients. Dr. Preston is on the mark in affirming that patients support doctors who honor their wishes and who do not extend a patient's existence simply because the physician cannot accept the futility of sustaining treatment.

Doctors work valiantly to help all of us have dignity, integrity, and self-respect in our living. Should the same values not be afforded to us in our dying? Should we be penalized because we are dying from terminal or hopeless illnesses? Now is the time for doctors to provide their patients with the same kind of end-of-life care that they would like to give themselves and those dear to them.

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