

## FROM THE EDITOR'S DESK

This issue of the *New Zealand Bioethics Journal* focuses on the topic of Methadone Maintenance Therapy (MMT), a topic that does not often appear in a Bioethics journal. The provision of MMT raises many interesting and difficult ethical problems. Some of these are fundamental. The very idea of maintaining an addict on a substitute, dependence-inducing drug raises ethical questions. In addition, society is faced with a question of how we should understand addiction and respond to addicts who are living a lifestyle that others may view as somehow immoral, or at least not optimal. How addiction has been viewed in the past has informed social and personal ideas about how drug addicts should be dealt with in our community. A more recent shift to addiction as illness has led society down a path that has a clinical response. And while undoubtedly the view that an addict is a product of individual moral failure still exists within society, research into the genetics of addiction may lead to considerations of a genetic predisposition to addiction, which may change our view and response to addiction yet again. However society may view the origins of addiction, there is still a need to assist people with addictions. This may be based on a need to help the individual, but also to minimise the harms that their addiction may cause to the rest of society. How this is to be achieved is a source of even more ethical issues.

The two articles by Kermack and Townshend *et al* published in this issue of the Journal discuss the ethical issues raised by MMT. Having two articles on the same topic provided an opportunity to examine this topic in greater depth, and with this in mind we invited responses from people involved in MMT as providers and consumers. From these responses it is clear that MMT has both its defenders and critics. Those who do support MMT also identify problems regarding the provision of this service within New Zealand; these problems may be addressed in new national protocols currently being developed.

As well as MMT we are also pleased to be publishing an article in the New Developments section on waiting lists for surgery. This article, written by Dr Sarah Derrett, reflects upon the booking system implemented in 1996 and the implications of this for patients waiting for access to surgery.

**Lynley Anderson, Editor**