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Philosophical wisdom and bioethical expertise: a wittgensteinian approach^[a]

Sabedoria filosófica e expertise bioética: uma abordagem wittgensteiniana

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Abstract: This paper explores the interconnections between philosophical wisdom and bioethical expertise, arguing that the latter can be enlightened by the former. First, it analyses the arguments of those who think that philosophy has nothing to say to bioethics, and afterwards, it shows that philosophical wisdom has an irreducible ethical component, which in turn helps bioethics to reach its aims. Thus, this paper shows that some Wittgensteinian commentators (e.g., Paul Johnston) did not grasp the contributions the author of the *Tractatus Logico-philosophicus* and even his later work made to ethics (and potentially to bioethics as a subfield) as an autonomous domain of investigation independent of logic, the empirical sciences, and metaphysics.

Keywords: Bioethics, Wisdom, Expertise, Wittgenstein.

Resumo: Este artigo explora as interconexões entre a sabedoria filosófica e a expertise bioética argumentando que a última pode ser iluminada pela primeira. Primeiramente, analisa os argumentos daqueles que pensam que a filosofia nada tem a dizer à bioética e, a seguir, mostra que a sabedoria filosófica tem um componente ético irreduzível, que, por sua vez, ajuda a bioética a atingir seus objetivos. Assim, este artigo mostra que alguns comentaristas wittgensteinianos (por exemplo, Paul Johnston) não compreenderam as contribuições do autor do *Tractatus Logico-philosophicus* e mesmo de sua obra posterior para a ética (e potencialmente para a bioética como um subcampo) como um domínio autônomo da investigação independentemente da lógica, das ciências empíricas e da metafísica.

Palavras-chave: Bioética, Sabedoria, Expertise, Wittgenstein.

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Introduction

In his chapter “Bioethics, Wisdom, and Expertise” of the book edited by Carl Elliott, *Slow Cures and Bad Philosophers: Essays on Wittgenstein, Medicine, and Bioethics*, Paul Johnston argues that since there is no independent adjudication of conflicting moral claims, there can be no experts in bioethics. In this paper, I reject Johnston’s skeptical views. In doing so, I show that philosophy—particularly a Wittgensteinian approach that is based on wisdom—may in fact lead to some kind of bioethical expertise. In turn, this expertise can help researchers/doctors

(in their dual role) and research participants/patients to take decisions when faced with tensions and apparent dilemmas in their professional lives.

To achieve this goal, I will divide this paper into three parts: in the first, I will reconstruct Johnston's arguments in detail and examine his main assumptions and conclusions; in the second, I will defend a "return to Wittgenstein," critically examining Johnston's views; in the third, I will illustrate how a Wittgensteinian approach to philosophy may help bioethicists to achieve their objectives by providing theoretical instruments for researchers/doctors and participants/patients to reach better decisions.

My aims in this work are modest: namely, I intend to make a small contribution to the centenary of Wittgenstein's seminal work *Tractatus Logico-philosophicus* by showing that its main conclusion "Wovon man nicht sprechen kann, darüber muss man schweigen," (normally translated as "What we cannot speak about we must pass over in silence") can be read as an expression of Socratic wisdom, which is of crucial importance for current bioethical debates.

Wisdom and Expertise in Bioethics

Paul Johnston has made significant contributions both to Wittgensteinian scholarship (JOHNSTON, 1989; 1993) and to our understanding of moral philosophy (JOHNSTON, 1999). Without wishing to oversimplify, I would argue that Johnston's main work in ethics amounts to the meta-ethical view according to which there is no way of resolving conflicting moral claims since judgments of human action simply reflect the different dispositions or preferences of the people who make them. This is clearly an epistemologically non-cognitivist and ontologically antirealist meta-ethical view. However, some problems emerge in both Johnston's interpretation of Wittgenstein's late work and his conception of what modern morality amounts to. In this paper, I will mainly focus on Johnston's skepticism regarding philosophy's possible contributions to bioethics.

To assess the work "Bioethics, Wisdom, and Expertise," it is crucial to first make a detailed reconstruction of Johnston's main arguments. Before doing that, however, I would like to stress that I do agree with Johnston's reading of Wittgenstein as someone who, throughout his life, held that *ethics cannot be a science*. More specifically, I agree that "The essence of [normative] ethics is the claim that there are ways of acting that everyone should recognize as right and wrong." (JOHNSTON, 2001, p. 150). However, *pace* Johnston, from the fact that moral claims cannot be derived from *logic* or be supported by *empirical evidence*, it does not follow that ethics cannot be an autonomous field of enquiry with specific methods and its own standards of justification. And it does not follow that moral judgements cannot be seen as objective and thereby apply to every person.

I would like here to recall briefly the *Tractatus* to illustrate this point: both logic and ethics are said to be transcendental even though there are no ethical (and logical) propositions, that is, pictures of states of affairs. Ethics does not deal with facts but with (absolute) values—which can be *shown*, although not propositionally. Moreover, from the fact that ethics cannot be derived from logic or supported by empirical evidence, neither does it follow that there are no objective *moral* judgements. Now, quoting the *Tractatus*, Johnston insists upon there being no *propositions* in ethics. This is quite clear, but it does not follow that moral judgements are absurd or nonsensical, nor that there is no way of talking about conflicting moral views. On the contrary, as we will see below, they express absolute values. Indeed, Wittgenstein himself was a moral rigorist—not only regarding himself, but towards other persons as well. As Monk has beautifully shown (1990), Wittgenstein took as categorical throughout his life “the duty to be a genius” (a kind of perfectionist goal) and was considered intolerant towards other people’s misbehavior. I will illustrate this point with further examples in the next section.

To start assessing Johnston’s arguments against bioethical expertise, it is essential to quote his own definition of expertise: “...an expert is someone who claims authority on the basis of having mastered a body of knowledge.” (JOHNSTON, 2001, p. 151). To show that there are no experts in bioethics, Johnston refers to some conflicting views on contraception, abortion, and infanticide. He argues that since people strongly disagree, for instance on abortion, there is no place for an expert to say: “I have studied these matters deeply, and these are the conclusions I have reached,” since people would continue to perform abortions or decline to have abortions irrespective of the expert’s views. According to Johnston (2001, p. 152), this makes any talk of expertise problematic and, consequently, “the bioethicist cannot claim to be the purveyor of a body of knowledge arrived at by an approach or method accepted by everyone, not can she demonstrate the correctness of what she says.” As we can see, Johnston’s first argument relies on the well-known problem of *moral disagreement*. And I will return to this later.

Johnston’s second argument recognizes that valid medical moral problems exist and need to be solved, but it denies that an expert in bioethics could help in any way. He illustrates his point using the following examples (2001, p.153): first, he argues that scientific researchers are best placed to decide what sorts of experiments with human embryos are acceptable; second, he states that doctors or hospital administrators should decide when it is right for a hospital to refuse treatment. I seriously doubt whether this is the case. Examples of scientists’ anti-ethical behavior abound, and bioethics itself was born as an independent field in the 1970s -separately from *medical* ethics- exactly because of a medical scandal (the infamous Tukesgee case, to which I will return soon). If I asked Johnston why bioethicists should not decide, he would simply reply by questioning what *proper training* might be in this area. To make his point, he asks (2001, p.154): “does not twenty years of studying the arguments surrounding euthanasia or a lifetime

or working with the terminally ill give someone a special qualification for speaking about this issue?” And his response is simply that the bioethicist’s judgments would have no special status—without further debate. Again, his reason is that there is no body of moral knowledge to be mastered by the expert; therefore, she has no moral authority. Johnston’s meta-ethical view, then, amounts to holding a non-cognitivist moral epistemology, which I will scrutinize further in sections two and three.

The third argument relates to how philosophy (assuming here a distinction between *knowledge* and *wisdom*: the sciences and philosophy) could contribute to helping bioethicists. To mark the difference, Johnston calls a “moralist” the person who holds that ethics (and bioethics as its subfield) deals — as the above definition made clear— with the correct way of acting and can thereby differentiate the *wise* (ethical) decision from the *foolish* one. Thus, according to the moralist, not all moral judgements are merely a matter of opinion or simply express the preferences of the person who makes them. A moralist is, meta-ethically speaking, a cognitivist (epistemically) and realist (ontologically). Johnston, however, argues that while the bioethicist could claim to have wisdom rather than expertise, this assertion is not one people in our society are encouraged to make, or — at least — there are no universally accepted wise persons since there is no single morality.

Finally, and closely related to the third argument, Johnston explores the idea that bioethics can be seen as involving not wisdom, but *the mastery of a technique*. That is, the bioethicist would be an expert in helping people to develop their powers of moral reflection. For this argument, he suggested the example of a bioethicist saying that prescribing drugs that have been tested on animals is something a doctor needs to think deeply about, but that prescribing drugs produced from genetically modified animals is not (JOHNSTON, 2001, p. 157). Again, Johnston rejects this kind of expertise as having special moral weight and reaffirms the view that there are no moral authorities or moral experts (bioethicists).

Before assessing Johnston’s arguments, I would like to point out that he in fact believes that there is a modest place in our society for a bioethicist (obviously, not someone claiming moral expertise) in some institutions including those which debate medical ethical issues. The two main tasks would be: (i) contributing to the debate by arguing in favor of a particular moral approach or by criticizing other approaches, and (ii) recording what the debate is all about and the different views that are being put forward (JOHNSTON, 2001, p. 159). These functions are restricted because our society has no single or dominant moral code—so no one can be seen as having the role of solving difficult moral issues.

To finish this section, I would like to say that the two limited tasks Johnston reserved for bioethicists (a role that anyone could really perform without any expertise!) contrasts with what scientists expect from philosophy and with the birth of bioethics as a discipline. It is worth recalling that one of the first authors to use the word ‘bioethics’

explicitly related it to wisdom (von POTTER, 1971, p. 1). The American oncologist held that we need *a new kind of wisdom*, namely, “the knowledge of how to use knowledge’ for man’s survival and for the improvement in the quality of life.” Potter’s main idea was — in a context where life itself was in danger of disappearing because of pollution, nuclear threat, and so on—to reunite facts and values: the knowledge of sciences and the values of the humanities. There is no doubt that a doctor needs scientific training, but neither is there much doubt that she needs education in the humanities, including in philosophy. The question then turns out to be: what kind of contribution can philosophy make to helping bioethics achieve its aims? I believe Wittgenstein can help us here.

Back to Wittgenstein

In this section, I would like to return to Wittgenstein in order to briefly discuss some of Johnston’s (mis)appropriation of his ethics both from the *Tractatus* and the *Philosophical Investigations*. The intention is to show that a real Wittgensteinian approach to philosophy can help bioethics to reach its aims by supporting people to take wise moral decisions. That is, I would like to show that Wittgenstein is, in Johnston’s terms, a moralist.

First, I will discuss the ethical sense of Wittgenstein’s first book — and perhaps of his entire work. The positivistic reading was that the *Tractatus* allowed only for meaningful discourse in the natural sciences by showing that all the rest was nonsensical. As I have argued elsewhere (XXX), this is mistaken since Wittgenstein indeed held that there are no *propositions* in ethics (...*keine Sätze der Ethik* ..., 6.42), but *not* that moral judgements are unspeakable. Understanding the difference is of paramount importance. Thus, consider metaphysical attempts to ground ethics either by postulating some kind of deity (and holding some kind of divine command meta-ethical theory) or by holding a naturalistic approach to ‘good,’ ‘right,’ and so on (and trying to reduce their *normative* meanings to the *descriptive* ones of the natural sciences). According to Wittgenstein’s *Tractatus*, both are trying to say more than can be said.

It is exactly against these metaphysical attempts to ground morality that Wittgenstein directs the last remark of the *Tractatus*. It does not follow, however, that ordinary moral judgements cannot be uttered. To illustrate this point, it is sufficient to give an example from the *Lecture of Ethics*. Johnston (strangely enough) is well aware of this text, and indeed the lecture presents similarities with some remarks in the *Tractatus*. I quote Wittgenstein (1965, p. 5):

Supposing that I could play tennis and one of you saw me playing and said “Well, you play pretty badly” and suppose I answered “I know, I’m playing pretty badly but I don’t want to play any better,” all the other man could say would be “Ah, then that’s all right.” But suppose I had told one of you a preposterous lie and he came up to me and said, “You’re behaving like a beast” and then I were to say “I know I behave badly, but then I don’t want to behave any better,” could he then say “Ah, then that’s all right”? Certainly not; he would say “Well, you ought to want to behave better.” Here you have an absolute judgment of value, whereas the first instance was one of relative judgment.

The same view clearly appears in the *Tractatus*: a moral judgment of the form “thou shalt ... [e.g., not lie]” is not a *proposition* in the technical sense. Rather, it is an absolute judgment of value showing that there must be some kind of ethical reward and punishment and that “they must reside in the action itself” (... *in der Handlung selbst liegen*, 6.422). Ethical judgements that try to ground morality metaphysically go against the limits of sense (they are *unsinnig*), but day to day moral judgments are simply categorical ones (*sinnlos* only in the way of logical tautologies) *showing what to do*. Consequently, from the fact that there is no metaphysical foundation for ethics, it does not follow that in our daily lives we cannot express a moral judgement.

If this interpretation is right, then Johnston’s insistence that there is no way of solving conflicting moral claims since judgments of human action simply reflect the different dispositions or preferences of the people who make them is mistaken. It conflates, using Wittgenstein’s distinction, judgements of *relative* value with judgements of *absolute* value. As Wittgenstein illustrates in his *Lecture*, if a person lies and is reprehended, she “**certainly**” (to stress Wittgenstein’s original word) cannot just say: “I know I behave badly, but then I don’t want to behave any better.” Therefore, there are no substantial, deep moral agreements but only disagreements about whether one should play tennis well or not. To practice a specific sport or to subscribe a particular metaphysics is a matter of taste, not morality: no one may choose to invent a preposterous lie about another person. According to Wittgenstein, then, metaphysics is ungrounded. Thus, if a person justifies her moral judgements by appealing to a deity or to nature, she is trying to say more than needs to be spoken since morality only shows itself. I will explore the bioethical implications of this agnostic stance in metaphysics below, arguing that it provides sound reasons to respect the bioethical principle of respect for autonomy.

Before doing that, I would like to better specify the ethical sense of the *Tractatus*. There is, as Laraway showed (1992), a close similarity between a Socratic approach to *wisdom* and Wittgenstein’s late philosophy. I believe, however, that we can also read Socratically the *Tractatus*’ main (ethical) conclusion “what we cannot speak about we must pass over in silence” as a moral imperative not to say more than we know. To illustrate this, it is sufficient to recall Socrates’ conclusion regarding his own wisdom:

“I am wiser than this man; it is likely that neither of us knows anything worthwhile, but he thinks he knows something when he does not, whereas when I do not know, neither do I think I know, so I am likely to be wiser than he to this small extent, that I do not think I know what I do not know.” (PLATO, *Apology*, 21d)

According to Socrates, there are things he knows well and there are things he does not know; to be wise is to recognize the difference between them and to be honest about it. Thus, for both Socrates and Wittgenstein, it is a moral imperative “to say no more than we know.” As the author of the *Das blaue Buch* wrote: “In der Philosophie liegt die Schewierigkeit darin, nich mehr zu sagen, als was wir wissen.” (WITTGENSTEIN,

1989, p. 75) This (*to say no more than we know*) shows that wisdom has an irreducible ethical ingredient as well as an epistemic one.

One bioethical implication I would like to draw here—which relates to another of Johnston's confusions, this time regarding *modern* moral philosophy—concerns the special status of the principle of respect for autonomy. It is exactly because many metaphysical attempts to ground morality exist (and all fail) that we must assume a common principle: to respect a person's choice of whether or not to participate in scientific research, or to refuse an experimental medical treatment to keep oneself alive at all costs, and so on. Since metaphysics is irrelevant to ethics, it is not only logic that must, according to Wittgenstein, take care of itself ("Die Logik muss für sich selber sorgen."), but ethics too. That is, ethics is an autonomous field of knowledge. As Johnston correctly saw, ethics cannot be derived from logic, empirical sciences or metaphysics, but that does not matter since values show themselves. This implies that respecting a person's decision is the only ethical way of pursuing scientific and technological knowledge. Recognizing this point is a piece of philosophical wisdom, which leads to an important consequence for understanding that a bioethicist also has expertise: she knows what can be scientifically known and what cannot and, therefore, it must be left to the persons involved to decide. Consequently, there is no longer any place for an autocratic and paternalistic view in modern bioethics.

The challenge, then, is to understand that despite metaphysics (and indeed because of metaphysics' failure), we are still capable of justifying common (bio)ethical principles. There is nothing paradoxical in denying knowledge in metaphysics while also arguing that there is moral knowing-how (e.g., acting virtuously). In this sense, Laraway (1992) is right in pointing to a Socratic and Wittgensteinian conception of the moral life as a kind of *techne*.

This point requires further exploration. In his paper "Wittgenstein's Method and Socrates's Craft: The Moral Life as a *Techne*," Laraway writes (1992, p. 6):

Without offering an extended defense of the claim, I would like to suggest that elenchus activity is a sort of craft for Socrates, and insofar as he possesses this sort of practical knowledge, we may take him to be something of a "craftsman of virtue." By knowing how, through his execution of the elenchus to remind himself and his interlocutors of the limits of their own knowledge, he is continually able to reclaim the only piece of knowledge that he is willing to explicitly profess, "human" wisdom (Ap, 20d7-8), which is precisely the recognition of one's own ignorance.

Laraway then goes on to show that Socrates' elenchus is a meta-ethical cognitivist approach based on *knowing how* or being capable of showing how to be moral. I would like to add that having moral expertise is *knowing-how* to act (e.g., how to take care of a patient respectfully). This, however, shows that Johnston is just mistaken in using Wittgenstein's late philosophy as if the latter held a non-cognitivist perspective.

The clearest evidence is that Wittgenstein has some practical aims his work; that is, he wants to get rid of metaphysical confusions to reach a "sound human understanding." Therefore, his *method* in the *Philosophical*

Investigations is a kind of Socratic' elenchus which aims at providing a therapy with an ethical aim, namely *knowing how to live better*. This shows, again, that Johnston' non-cognitivist approach is mistaken and that Wittgenstein's late work can be reconstructed in cognitivist (and universalist) meta-ethical terms.

I would here like to develop further this interpretation in order to later extract some bioethical implications. Wittgenstein's notion of 'form-of-life' (*Lebensform*) may seem ambiguous, but it receives—in the first part the *Philosophical Investigations*—a meaning very close to that of 'species,' when he mentions dogs, lions, humans, and so on. Now, the predominant use is the one related to humans. As he points out in paragraph 241: "it is what human beings (*Menschen*. say that is true and false; and they agree in the *language* they use. That is not agreement in opinions but in form of life (*Lebensform*).” Humans have *propositional* language; other animals may have a kind of Augustinian language-game to communicate with each other, but if a lion could speak, we would not understand him because we do not *share* his form-of-life.

We can now recognize why Johnston's non-cognitivist reading of Wittgenstein's late philosophy is ungrounded. It is not only the case that we can, based upon the notion of *Lebensform*, speak of "the common behavior of mankind" (Die gemeinsame menschliche Handlungsweise... § 206), but we can also point to some moral behaviors that nobody would deny. For instance, we can state that caring is essential in medical contexts, that pursuing the truth (e.g., by not falsifying data) is paramount in scientific research, that patients and doctors must respect one other, and so on. The common behavior of mankind is a reasonable ground for the objectivity of moral judgements. More specially, however, it opens the door to arguing for a special kind of cognitivist approach to morality. To give another trivial example: any normal human being would feel pain if subjected to surgery without anesthetic. Consequently, doctors must *know* the proper means not to let patients suffer, but they must also know-how not only to relieve pain and, more importantly in moral terms, to *know-how* to take care of their patients. To do otherwise is to infringe the most basic principles of biomedical ethics.

Although it is not the goal of this paper to enter into meta-ethical discussions, it is worth quoting a passage from the *Philosophical Investigations* to illustrate the above point. In paragraph 151, Wittgenstein wrote: "The grammar of the word 'knows' is evidently closely related to that of 'can', 'is able to'. But also closely related to that of 'understands'. ('Mastery' of a technique.)" I have developed this idea by showing that moral knowledge involves not only knowing-that, for instance, cancer is a disease that requires treatment, but also *knowing-how* to do it: first by examining the patient, then treating the disease or performing a surgery, and above all, *knowing-how* to take care of the patient all the way though, for instance, *respectfully*. I have called this approach Practical Cognitivism. Unfortunately, I cannot pursue this approach here (see: XXX for further details), but it fits well with Laraway's characterization of Socrates' views.

We can, then, conclude that the late Wittgenstein gave us valuable philosophical methods, including conceptual analysis, which can be applied in bioethics. In the next section, I will illustrate this by means of some real applications of how philosophical wisdom may inform bioethical expertise.

Can Philosophy help Bioethics?

Practicing bioethicists (in hospital committees, institutional review boards [IRBs], etc.) may have different academic backgrounds, and most of them will be aware of the need for an interdisciplinary approach (sociological, juridical, medical, philosophical, etc.) to moral issues. Most have a good philosophical education or show a clear interest in the area, and some are even professional philosophers. Thus, I would, in this section, like to reject Johnston's skepticism by showing how philosophers can contribute in substantial ways to educating people into bioethical expertise.

I will start by giving some examples of real contributions that philosophers have already made. The clearest case of successful involvement was several philosophers' participation in the *National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research* and the resulting Belmont Report. Albert Jonsen was an effective member of the commission, while Tom Beauchamp was an assistant, and Stephen Toulmin, Tristram Engelhardt, and so on all acted as occasional contributors. The report established the *prima facie* principles of respect for persons, beneficence and justice as the bases of bioethics in the US and around the world. The national commission was instituted in 1974 following the Tuskegee scandal in which black men were denied treatment for syphilis "just" to study how the disease would progress with the aim of preventing future cases. It is clear, then, that scientists do not always stick to ethical standards in their research—as the COVID-19 pandemic has shown once again (e.g., in the use of Chloroquine in Manaus and by Prevent Senior's "early treatment" etc.). Bioethics was born to make them accountable. Consequently, Johnston's optimism regarding scientists' morality and his pessimism concerning philosophers' contributions seem to be based on bias.

After the publication of the Belmont Report, Beauchamp and his colleague Childress wrote the book that is now the classical approach to biomedical ethics. In their book, they proposed the principles of respect for autonomy, non-maleficence, beneficence, and justice—which are now the basis of Brazilian legislation in the area (Res. 466/12). Since the concept of 'person' may have a metaphysical assumption, they prefer to use respect for the agent's autonomous choices. This work made significant contributions to bioethics, some of which will be illustrated below. As we can see, philosophers may help to format the basic principles for specific subfields of ethics, not only bioethics, but also ecoethics, zooethics, roboethics, and so on.

Additionally, following their contributions to the commission, the Wittgensteinian Stephen Toulmin co-authored a book with Albert Jonsen proposing a casuistic approach to bioethics. But I will not comment on this nor on other particularist interpretations (e.g., LITTLE, 2001) of the late Wittgenstein. My remarks in the previous section on the concept of *Lebensform* (and the common behavior of mankind or even the sound understanding) should be sufficient to reject these particularistic readings.

I would now like to illustrate some significant *methodological* contributions. Let us, for the sake of argument, assume the principle of respect for autonomy (given the non-metaphysical grounding of morality, there is in fact no alternative). The first relevant philosophical question would then be: under which necessary and sufficient conditions is an action really autonomous? Beauchamp and Childress's answer (2019, p. 102) is this: "We analyze autonomous action in terms of normal choosers who act (1) intentionally, (2) with understanding, and (3) without controlling influences that determine their action." Of course, each of these necessary and supposedly sufficient conditions deserves scrutiny: for example, what are intentionality, understanding, and noncontrol? The authors do provide further examination, but I will not comment on that here.

The materialization of autonomy is the signing of a document called "informed consent." Thus, let us ask under which necessary and sufficient conditions an *informed consent* form is a valid one. Beauchamp & Childress' (2019, p. 122) answer involves several ingredients:

I. "Threshold elements (preconditions)

1. Competence (ability to understand and decide)
2. Voluntariness (in deciding)

II. Information elements

3. Disclosure (of material information)
4. Recommendation (of a plan)
5. Understanding (of 3 and 4)

III. Consent elements

6. Decision (in favor of a plan)
7. Authorization (of the chosen plan)."

These two conceptual analyses ('action' and 'informed consent') are real contributions that philosophers have made to a theory and practice which became predominant around the world—proposing ethical principles in scientific investigations dealing with human beings. During the current pandemic, many informed consent forms related to the so-called "covid kit" in Brazil did not meet these conditions and were, therefore, subject to penal processes.

We can now clearly see the interconnections between bioethical expertise and philosophical wisdom. Anyone sitting on an IRB knows

that she must *check* whether the conditions of the informed consent are really met, whether the benefits override the harms, and whether social justice is fostered. That is, she must know-how to check whether the principle of respect for autonomy (justified by the wisdom regarding the impossibility of metaphysics) is really applied skillfully in actual research proposals examining the informed consent form submitted. This is clearly a bioethical expertise derived from the kind of philosophical wisdom Socrates and Wittgenstein supported. The very same that I reconstructed in the previous section.

This does not imply that philosophers always make real contributions and change how things are in the real world. Sometimes, they are just trying to justify some piece of legislation or some decisions that society has already made. For instance, Dworkin's book *Life's Dominion. An argument about abortion, euthanasia, and individual freedom* is a sound defense, based on the principle of autonomy, of the American Supreme Court's decision regarding the Roe v. Wade case. But sometimes philosophers argue also for changing some piece of legislation, which then takes time to become accepted. For instance, the "Philosophers' Brief" written by the eminent authors Ronald Dworkin, Thomas Nagel, Robert Nozick, John Rawls, Thomas Scanlon, and Judith Jarvis Thomson (cf. references) is a clear example of that. And sometimes philosophers sit on other kinds of committee helping to draft new legislation, for instance, Warnock's report on research involving stem cells. There are of course other cases, but I do not need to multiply examples here.

As can be seen, there is, *pace* Johnston's skepticism, a clear place for wise philosophers in making a bioethicist's expertise useful for society. Of course, philosophers also need to deal with their own subject by asking, for example, what 'wisdom' is all about. In this sense, some employ conceptual analysis to specify under which necessary and, hopefully, sufficient conditions we can say that "A is wise." To present such an analysis goes beyond the limits of this work. But I would like to point out that epistemic humility (a Socratic/Wittgensteinian ethical requirement to say no more than one knows) seems to be a necessary, though not a sufficient condition, to be capable of contributing to bioethical expertise (see RYAN, 2013, for a further discussion of this point.)

Final Remarks

Wittgenstein would not, *pace* Johnston's views, prevent philosophers concerned with bioethical issues from sitting on a committee (including IBRs) that aims to contribute to reaching wise decisions. On the contrary, he would be sympathetic to such a practical engagement. Of course, bioethicists with a philosophical background must also learn legislation; they must learn to see things from an interdisciplinary perspective; and so on. But they can make significant contributions in defending objective principles such as respect for autonomy by explaining that the failure of metaphysics requires equal respect among all humans (doctors and patients alike), that what counts as benefits/harms needs to take into

consideration the person's will, and therefore, that a doctor or scientist must not act in a paternalistic or autocratic way.

"Wittgensteinians" sometimes turn against philosophy and hold a pessimistic stance, but Wittgenstein was only against metaphysical views (e.g., those involving category mistakes, conceptual confusions, etc.). He reserved a positive therapeutic task for real philosophers with clear ethical aims—as he himself was and had. He even built up a conceptual framework (e.g., language-games, family-resemblances, etc.) to criticize the metaphysician's errors (e.g., the assumption of private language), and he gave us a *method* requiring particular skills so we could continue philosophizing on many topics, including bioethical issues.

To finish this paper, without defending a conclusive view, I would like to point out that between the *Tractatus* and the *Investigations* there is a kind of Socratic continuity. That is, not only can the last remark of the first book can be read as showing that one must not say more than one knows, but also the later work can be seen as an example of epistemic humility in showing that one must not pretend to know something one does not know. This piece of philosophical *wisdom* needs to be incorporated into bioethical *expertise*, for instance, by applying the principle of respect for autonomy and knowing-how to check whether the conditions to respect a person's choice of whether or not to participate in a scientific experiment are really met.

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Notes

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Notas de autor

- [b] DDA is Professor of Philosophy, PhD in Philosophy