**TAKING SIDES ANALYSIS REPORT (LONG FORM)**

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Course: Human Biology 1090

Book: Taking Sides: Clashing Views in Health and Society, Ninth Edition

Issue number: 7 Title of issue: Should Doctors Prescribe Drugs Based on Race?

1. Author and major thesis of the *Yes* side: Sally Satel, believes a patients race is important because many diseases and treatment responses cluster by race and ethnicity.

2. Author and major thesis of the *No* side: Gregory Michael Dorr and David Jones, feel that there is a risk to using race and ethnicity in choosing treatment options.

3. What fallacies of question-framing are made by the authors of the text? The authors of the no side use multiple essays in order to put the focus on the social context of race and discrimination, instead of the success or lack of success of treatments and medications.

4. Briefly state in your own words two facts presented by each side. Yes side: the Human Genome Project found that 99.9% of the human genetic complement is the same in everyone, regardless of race. Sickle cell anemia is more common in blacks, and multiple sclerosis and cystic fibrosis is more common in whites.

No side: The idea that people of different races and backgrounds should receive different medical treatments is ancient, dating back to the Hippocratic authors of ancient Greece. BiDil was the first prescription drug approved by the Food and Drug Administration for a race-specific indication.

5. Briefly state in your own words two opinions presented by each side. Yes side: when it comes to the practicing of medicine, stereotyping often works. Doctors look forward to the day when they can be colorblind.

No side: the authors of the no side feel that the author of the yes sides position is politically incorrect.

6. Briefly identify as many fallacies on the *Yes* side as you can. I wasn’t able to find any.

7. Briefly identify as many fallacies on the *No* side as you can. The no side uses the different failures that the prescription drug BiDil experienced during its process to gain approval from the FDA in order to distract from the drug’s successes.

8. All in all, which author impressed you as being the most empirical in presenting his or her thesis? Why? I feel that the no side of the argument was more empirical because they have multiple references and citations of research that they used in support of their position.

9. Are there any reasons to believe the writers are biased? If so, why do they have these biases?

As a doctor, the author of the yes side could be biased because of their personal experience with what they feel are effective medications and treatments. The authors of the no side, as a historian and a professor could already be disinclined to things that they feel are inequalities between races and population demographics.

10. Which side *(Yes* or *No)* do you personally feel is most correct now that you have reviewed the material in these articles? Why? After reviewing both arguments, I feel that I agree with the yes side. I agree with the yes side because there is research supporting that different races and ethnicities respond differently to medical treatments, and I think that doctors need to take into account all factors that can affect whether a diagnosis and treatment is successful for a patient.