

and the Medical Profession in Istanbul. This conference issued a declaration against torture and specifically against any physician's involvement.

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I. TURKEY [ADDENDUM]

Bioethics is a burgeoning area of research interest in modern Turkey, an outcome of increased medical professionalization, awareness of patient and human rights, political discussions of women's bodies, and the study of applied ethics in various university philosophy departments.

TURKISH BIOETHICS ASSOCIATION

Marking the increased prominence of the subject, the Turkish Bioethics Association (TBA) was founded in November 1994 in Ankara under the leadership of the philosopher and physician Yaman Örs and the physician Yasemin Oğuz. The TBA's objective is to contribute to the development of bioethics in Turkey and to improve its connections with health care sciences (such as medicine, nursing, dentistry, pharmacy, and veterinary medicine), other biological sciences, and major professions. The TBA organizes biannual symposia on bioethics and since 2001 has sponsored a national congress of medical ethics. The members of the association also work toward creating the medical ethics curriculum in medical schools. It has published a number of books and reports, including the proceedings of symposia and congresses.

CONTEMPORARY DEBATES: REPRODUCTIVE RIGHTS

Since the end of the twentieth century women's reproductive rights and freedom have been particularly

contentious topics in Turkey with religious, moral, cultural, and political dimensions. Abortion became legal in 1983. Turkish law allows abortions until the tenth week after conception. According to 2008 figures, 10 percent of pregnancies in Turkey were terminated through abortion (the European average rate is 30 percent), but abortion is one of the major causes of death among women of reproductive age in Turkey (İgde, Gul, İgde, and Yalçın 2008). Despite its legal status, access to safe abortion is causing increasing concern. For one, the number of legal abortions (up to ten weeks) performed in the country has been constrained by the requirement that the procedure be carried out only by or under the supervision of a gynecologist. This factor is especially problematic in rural Turkey, where expert health service providers are rare or nonexistent. As a consequence, many rural health facilities without a trained specialist are excluded from providing services, and a rural Turkish woman seeking an abortion in the first ten weeks of pregnancy may not be able to obtain one.

In addition, although public health services are widely available, only 25 percent of the abortion services are in the public sector, with the rest provided by private hospitals, making such services inaccessible for women not from privileged backgrounds. Some public health institutions, such as state hospitals, refuse to perform abortions, because they fear the increased stigma. Others that do provide this service are unable to provide a safe environment for women due to heavy caseloads and the lack of trained personnel and equipment. Despite lobbying efforts by several women's organizations, these barriers to women's control over their fertility have not been eliminated by the legal system. In fact since the early 2000s access has significantly deteriorated, largely because a conservative religious party has controlled the government.

Recep Tayyip Erdoğan, the Turkish prime minister who was installed after the elections of 2002, advocates large families (with at least three children), expressing a worry that the Turkish population will decrease and Turkey will vanish as a nation. Women's rights groups have protested Erdoğan's assertion that "there is no difference between killing a baby in its mother's stomach and killing a baby after birth" and that he considers "abortion to be murder" (Aira 2012). He is also on record as being opposed to birth by "unnecessary," elective cesarean sections. The Turkish Medical Association has warned that restricting abortion would only encourage illegal practices, pushing women to use "primitive methods" to abort and increasing maternal mortality (Aira 2012). International criticism of Erdoğan's position on abortion has included that of the US-based Human Rights Watch, which has warned that restrictions on abortion would threaten "women's human rights to life,

health, equality, privacy, physical integrity, and freedom of religion and conscience” (Aira 2012).

Although Turkey’s health minister, Recep Akdag, followed on Erdoğan’s controversial comments by proposing new legislation to restrict or ban abortions “except in cases when they are medically necessary” (Aira 2012), the proposal was soon dropped. Nonetheless Erdoğan’s stance has influenced popular opinion about abortions in the mainly Muslim nation, increasing the stigma and having an effect on women’s access to abortion. For instance, in most public health institutions family doctors who encounter a patient who is pregnant or who is interested in having an abortion notify either her husband or her father. Men in modern Turkey generally have the final say over women’s bodies and reproductive rights.

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II. IRAN

Iran, a vast country in southwest Asia, was long called Persia by Europeans until 1935, when its government requested that the common indigenous name, Iran, identifying the nation as the “land of the Aryan people,” be used internationally. The extensive Iranian Plateau and surrounding lands have been the site of many powerful political regimes during its long history, beginning with the empire of Cyrus the Great, the first Achaemenid emperor, in 549 B.C.E. Located along a highway for the movement of people and ideas from the prehistoric period on, Iran’s indigenous Aryan culture has been an important link between Hellenic, Indic, and Semitic intellectual and religious traditions.

PREHISTORIC PERIOD

Little is known about the healing practices or beliefs of the earliest inhabitants of Iran. An epic poem written in the

tenth century C.E., *Shāhnāmāh* (Book of Kings), relates ancient myths, legends, and stories that may reveal something of the ancient past. Surgery is mentioned in the tales of the superhuman exploits of the heroes Rostam and Isfandiyar. Rostam himself is said to have been delivered by an operation much like that now known as a cesarean section while his mother was anesthetized with wine. Abortifacients were known. The Elamite civilization, centered around Susa in southern Iran from the third to the first millennium B.C.E., had cultural contact (and often political enmity) with Babylon, and it is likely that the medicine of the Mesopotamian world was known by the Elamites (Sigerist). The Code of Hammurabi, ruler of Babylon (ca. 1750 B.C.E.), which contains strict injunctions and penalties regarding surgical practice and malpractice, is known primarily from a stela found at Susa in 1902.

THE ARYAN PERIOD (NINTH–FOURTH CENTURY B.C.E.)

The nomadic Aryan peoples migrated from central Asia, north and east of the Caspian Sea, to the Iranian Plateau around the seventeenth century B.C.E. By the ninth century, they dominated the region, and in 549 B.C.E., Cyrus consolidated rule over its inhabitants and established the Achaemenid Dynasty, the first Persian Empire. He and his successors, Cambyses, Darius, and Xerxes, extended the boundaries of Persian rule from the Ionian Sea in the west and to the Indus River in the south. During this period, Persian medicine was undoubtedly in contact with Greek medicine. A story related in ancient texts tells of an invitation from the Persian king Artaxerxes to Hippocrates, on the advice of a Persian physician, to become physician to the Persian army during a plague; Hippocrates refused, saying, “I have no right to share the wealth of the Persians or to liberate from disease barbarians who are enemies of the Greeks” (Temkin 1991).

In the seventh century, the mysterious religious figure Zoroaster appeared in eastern Persia. Very little is known of his life, and the writings attributed to him are brief. However, by the first century B.C.E., a defined cosmogony and theology attributed to his influence had been collected in the vast literature called *Avesta*, of which his own *Gathas*, or hymns, are a small part. The doctrine is basically constructed around a cosmic duel between good and evil, of which light and darkness, and life and death, are the material symbols. The powerful spirit of good and light, Ahura Mazda, the wise and greatest god, battles Ahriman (or Angra Mainyu), spirit of evil and darkness, and the world is the battlefield. Humans participate in the battle through their free choices. As individuals, humans are to maintain purity of life through moral goodness, pursuit of truth and physical cleanliness, and avoidance of