

John Portmann. *The Ethics of Sex and Alzheimer's*. Routledge 2014. 224 pp. \$155.00 USD (Hardcover ISBN 9780415641647); \$44.95 USD (Paperback ISBN 9780415641654).

This book is a timely one. As human life expectancy continues to grow, there are some difficult puzzles that emerge concerning age-related illness. John Portmann's focus is Alzheimer's, specifically the sexual and romantic relationship between spouses when one partner suffers from the disease. Relatively little attention has been paid to the healthy spouse; Portmann argues for their 'ongoing emotional needs' (iii). This can include sexual needs, even if this means seeking fulfillment outside of the marriage. The virtue grounding this analysis is one of sexual generosity. The book contains 8 chapters, not all of them as successful as others. I briefly summarize the chapters then offer some general thoughts.

Chapter one focuses on sexual entitlement from the perspective of Judeo-Christian marriage. Although geriatric sex was not an overt problem for Ancient thinkers, there were issues of illness, physical disability, and military commitments. Such situations constitute obstacles to sexual and romantic engagement. Indeed, for both religions, sexual satisfaction is absolutely central to marriage. In Judaism, there is *onah*, which stipulates that sexual relations must occur, even if procreation is impossible. Christianity emphasized the role of conjugal debt. Even in cases where the female's health was at risk, she was nevertheless obliged to submit to her husband's sexual advances. In fact, 'marital rape made no sense to many Christians in previous ages' (22). Divorce, at least as outlined in the Gospel of Matthew, is only permitted in cases of adultery or desertion. Portmann acknowledges the gap between theology and concrete religious practice. Just because the Vatican outlaws artificial birth control does not mean that many practicing Catholics abide by it. Given the lack of available data about marital practices in the Ancient and Medieval world, Portmann's analysis is cautiously speculative. His aim in this chapter is to ground the inter-relationship between sex and marriage.

Chapter two examines selflessness, specified as a willingness to live without sex while still married. When living with Alzheimer's, the healthy spouse often feels pressure to abstain from sex and romance outside the marriage. Both Christianity and Judaism consider selflessness a virtue. It is also worthwhile to note that in the Catholic tradition, there was a transition from the canonization of martyrs to individuals who abstained from sex. But according to Portmann, the marital commitment—'till death do us part'—may be unjustifiably severe. This is exasperated by the fact that life expectancy has increased 30 years in the last century. Note that Portmann's argument is confining itself to the claim that for some spouses, the selfless act of forgoing sexual relations may be too taxing.

In chapter three, the unitive aspect of sexual relations is examined in the context of Alzheimer's. How can sex be unifying when one person is no longer themselves? Portmann points out that many people married to spouses with Alzheimer's feel hollow when they have sex with their ailing spouse. But, at the same time, they also feel guilt withholding it. Portmann successfully draws out the implications of this dilemma. It is not like sex between strangers. Strangers can become familiar to us; they can also consent to sex in a way that the person with Alzheimer's cannot. Portmann concludes that spouses who provide sexual satisfaction to their ailing spouses, especially when they are in late-stage Alzheimer's, are morally praiseworthy.

Disgust is the central theme of chapter four. Popular opinion thinks geriatric sex is disgusting. This conviction even exists among seniors, which is an example of the internalization of subordination. Nevertheless, Portmann emphasizes that popular opinion is shifting. This may in part

be due to activism, or visibility, or the introduction of drugs like Viagra, but there is no doubt that seniors are increasingly embracing sexual activity.

Chapter five engages with the notion of desertion. Portmann argues that sexual infidelity is preferable to desertion. He gives four reasons to justify this. First, sufferers from Alzheimer's enjoy periods of lucidity, even in advanced stages. Second, it is possible for sufferers to lose access to health-care benefits, if the benefits stem from the spouse. Third, remaining in the marriage protects against elder abuse. Finally, desertion suggests that '[p]eople with Alzheimer's have little or no moral worth' (xiii). Citing the work of Jeff McMahan, Portmann suggests that a case can be made that desertion cannot even occur, for the spouse suffering from Alzheimer's is no longer present. Such a person has psychologically died – they have lost their personality—and only live now as a biological organism.

One important question that underlies Portmann's analysis is the need for sexual relations. How deep and urgent is this need? In chapter six, Portmann critically evaluates sexual deprivation as it functions in the American prison system. Federal prisons prohibit conjugal visits; six states allow them. Some have argued that the frequency of prison rape is the result of sexual deprivation. This latter notion, sexual deprivation, is the salient factor. What prisoners expect in terms of sex can inform how we conceptualize the sexual needs and expectations of seniors. Some prisoners have stated that the most difficult part of prison was sexual deprivation.

In chapter seven, Portmann engages with examples from popular culture. He does not seek to merely rehearse various films and novels, but to see how some features 'affect the substance of what is depicted' (114). He identifies two distinct types of twenty-first century artistic depiction. First, there are films where the main character attempts to get back a spouse that suffers from Alzheimer's. An example of this is 'The Notebook'. By contrast, there are films where the main character finally releases their ailing spouse. Portmann's main example is the film 'Away from Her'. Incidentally, both films are fictional.

In the final chapter, sexual generosity takes center stage. It is situated between two vices—hedonism and Puritanism. Such an approach, according to Portmann, sidesteps the issue of whether the sufferer of Alzheimer's constitutes a new person or changes sufficiently that marital fidelity no longer applies. A sexually generous person 'has pushed back the boundaries of acceptable sharing to include his or her own body' (141). This can include allowing one's partner to enjoy flirtations and even short sexual encounters with another person. Importantly, generosity does not necessitate obligation. Nothing should be expected in return. Portmann proceeds to examine two problems with this account. First, he recognizes that in a sexually generous society, people who are physically attractive will 'bear more of the burden' (144) than others. The second issue is sperm donation, which Portmann uses to represent other practices of a similar nature, such as adoption, egg donors, and surrogates, all of which involve more time and effort. So, if the sperm donor can be deemed sexually generous, then so can the others. Portmann notes the current shortage of sperm donors as well as the fact that men sometimes donate sperm in order to make money. Nevertheless, he argues that if a man donates sperm for the exclusive benefit of others, then he deserves moral praise. Both beauty and sperm donation underscore the voluntary nature of generosity. It is never obligatory. In the chapter's final section, Portmann speculates about how far one could extend the concept of generosity. Could it, for example, 'open up the marital circle' (155)?

Portmann is inspired by Rorty's comment that twenty-first century philosophy should concern itself with identifying and analyzing 'new forms of suffering' (159). Alzheimer's disease certainly satisfies this criterion. I am in general sympathetic to Portmann's project but too often I was left in need of more conceptual analysis and fewer analogical arguments and examples. Sexual generosity means, in part, not morally condemning the romantic activity of the healthy spouse outside the marriage. Such activity is better than desertion. But one of the major dilemmas of late-stage Alzheimer's is the incongruence between what the formerly healthy spouse thinks and what he or she thinks once Alzheimer's has taken hold. Which set of preferences and convictions deserve priority? The answer is by no means obvious, but it seems crucial to developing an answer about extra-marital sexual and romantic activity. To this end, it would have been worthwhile if Portmann had engaged with Dworkin's argument about respecting the autonomy of the person's prior judgments. This would seem to have direct import on the strength and scope of sexual generosity as a virtue to be cultivated.

Aaron Landry, Humber College