

Bioethics

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Obstetrics and Gynecology

Reproductive Endocrinology and Infertility

Gynecologic Endoscopy and Hysteroscopy



References



- Textbook of Obstetrics and Gynecology, 3rd ed. Sumpaico, et al.
- Methods and principles in biomedical ethics by T L Beauchamp . J Med Ethics 2003;**29**:269–274
- Adinma J. Bioethics in Obstetrics.
<https://www.researchgate.net/publication/221921729>
- ACOG Committee Opinion. Ethical decision making in Obstetrics and Gynecology. Number 390. December 2007.

+ outline



- Definition
- Origin: Belmont report
- 4 basic bioethical principles
- Other bioethical principles



What is Bioethics?

- Bioethics is an interdisciplinary field that examines the moral dimensions of decision making in health care and the life sciences.



Samuel Gorovitz,
Professor of
Philosophy

“Bioethics is the critical examination of decision-making in health-related contexts and in contexts involving the biological sciences”.

An Introduction to Bioethics

+ Bioethics: definition



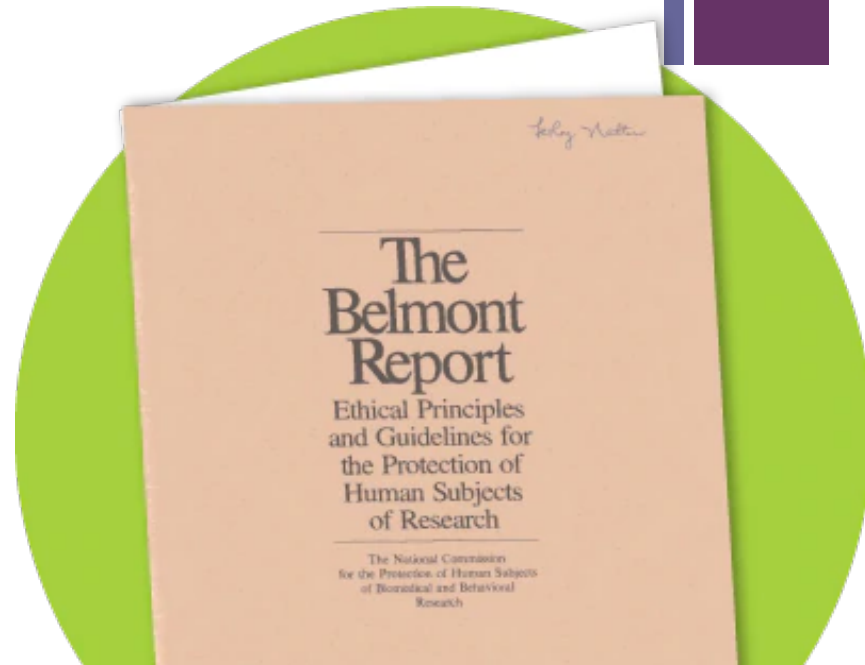
- Bioethics is a subset of ethics that provides reasoned and defensible solutions that incorporate ethical principles for actual or anticipated moral dilemmas facing clinicians in medicine and biology
- bioethics deals with relationships between practitioners and patients, practitioners and society, and society and patients



Bioethics: the Belmont report

- The development of the principles of modern bioethics is inextricably linked to the contents of the **Belmont Report**
- The Tuskegee Alabama public health service funded **syphilis research** over the 40 year period, 1932 – 1972, involved inhuman experimentation on 400 indigent black American males

Adinma J. Bioethics in Obstetrics. <https://www.researchgate.net/publication/221921729>



Tuskegee Syphilis Study - 1932-72

Public Health officials studied the progression of NOT treating syphilis on 399 uninformed American citizens.

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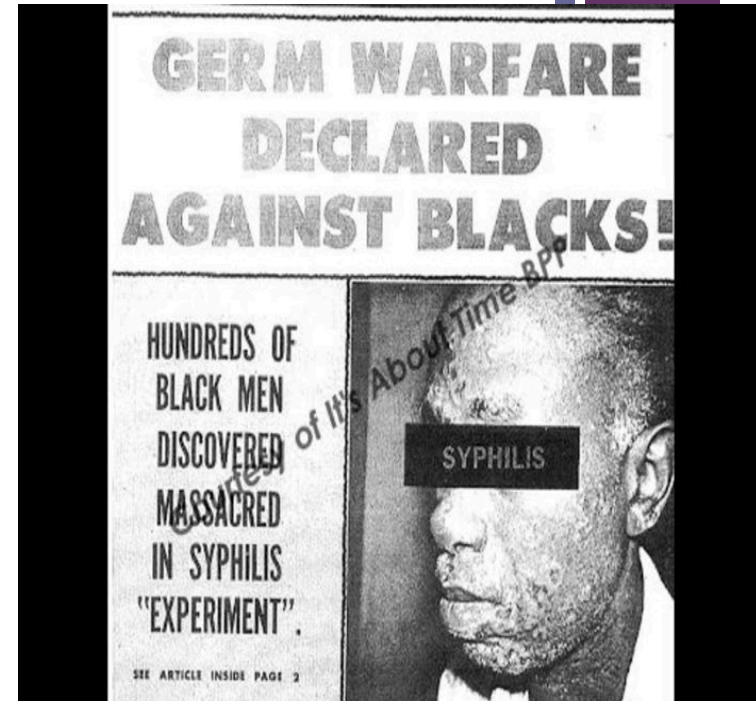




Tuskegee Syphilis Study (1933-72)

- official name **Tuskegee Study of Untreated Syphilis in the Negro Male**
- American medical research project that earned notoriety for its unethical experimentation on African American patients in Alabama
- conducted by the U.S. Public Health Service (PHS) from 1932 to 1972, examined the natural course of untreated Syphilis in African American men
- The research was intended to test whether syphilis caused cardiovascular damage more often than neurological damage and to determine if the natural course of syphilis in black men was significantly different from that in whites.

<https://www.britannica.com/event/Tuskegee-syphilis-study>



Tuskegee Syphilis Study - 1932-72

Public Health officials studied the progression of NOT treating syphilis on 399 uninformed American citizens.

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Tuskegee Syphilis Study (1933-72)

- The subjects were not told that they had syphilis or that the disease could be transmitted through sexual intercourse
- Penicillin was denied to the infected men after that drug became available in the mid-1940s, and it was still being withheld from them 25 years later,
- The Tuskegee syphilis study finally came to an end in 1972 when the program and its unethical methods were exposed in the *Washington Star*. A class action suit against the federal government was settled out of court for \$10 million in 1974.





Bioethics: the Belmont report

- The termination of this research led to the establishment of the United States National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research
- → published its findings and recommendations known as the **Belmont Report (1979)**





Bioethics: the Belmont report

- The Belmont Report provided an analytical frame work to guide the resolution of ethical problems arising from research involving human subjects.



+ Bioethics: definition

- regulates the relationship between the healthcare provider and the beneficiary of healthcare.
- addresses ethical issues in clinical practice and healthcare, biomedical research involving humans and animals, health policy and the environment

The 4 basic Bioethical Principles in Health care

Beauchamp and Childress (2008)

Principle of beneficence

Principle of nonmaleficence

Principle of respect for autonomy

Principle of justice.



1. Principle of Beneficence

- Physician's obligation to give highest priority to his patient's welfare and provide competent health care that maximizes health benefits for the patient
- ethical responsibility to do and maximize good.
- emphasizes what is best for the patient with respect to preventive and curative healthcare.



example



- When the patient is **incapacitated by the grave nature of accident or illness**, we presume that the reasonable person would want to be treated aggressively, and we rush to provide beneficent intervention by stemming the bleeding, mending the broken or suturing the wounded.
- in the treatment of **suicidal patients** who are a clear and present danger to themselves. → physician should intervene on behalf of saving the patient's life or placing the patient in a protective environment, in the belief that the patient is compromised and cannot act in his own best interest at the moment.



Examples:



You save a patient's life despite the circumstances in these situations....

- A patient who comes to the emergency room, bleeding profusely from a gunshot wound, lost consciousness due to massive blood loss, with no other relatives seen accompanying the patient....
- A man came to the emergency room at 2 am, needing emergency treatment from a hacking wound to the face and head, and massive bleeding. You learned that this patient is the same suspect who killed a close relative a few days ago...

+ Examples



- giving of episiotomy to a parturient woman to prevent a third degree laceration of the perineum



2. Principle of Non-Maleficence

- Refers to the ethical duty of the health practitioners to do no harm or cause pain to the patient
- Physician recommends treatment option which poses minimal or no harm to his patients
- The Hippocratic imperative to physicians, “*Bring benefit and do no harm*”
- Example:
 1. Sensitivity test prior to IV drug administration
 2. Prescribing oral antibiotics for which the patient has no known allergy to
 3. giving and suturing of episiotomy without local anesthesia (?!!) in a parturient woman (violation of principle!)

+ Examples



4. Performing cesarean section on a term pregnant patient for no medical indications (...physician or patient's convenience? → violation)
5. Referring the patient to a specialist who can adequately manage your complicated case, instead of managing the patient on your own
6. Referring patient to other competent healthcare providers, when you refuse to perform a requested medical procedure.



2. Principle of Non-maleficence



According to Beauchamp and Childress, the principle of nonmaleficence supports a number of more specific moral rules, including the following:

- Do not kill.
- Do not cause pain or suffering.
- Do not incapacitate.
- Do not cause offense.
- Do not deprive others of the goods of life.



3. Principle of Respect for Autonomy



According to Beauchamp and Childress, the principle of respect for autonomy supports a number of more specific rules, including the following:

- Tell the truth.
- Respect the privacy of others.
- Protect confidential information.
- Obtain consent for interventions with patients.
- When asked, help others make important decisions.



3. Principle of Respect for Autonomy



- Requires the physician to respect the rights of patients to make independent decisions as an expression of their self determination
- basis for the practice of "informed consent" in the physician/patient transaction regarding health care.

+ Examples...



- Terminal patients with painful gastrointestinal obstruction due to stage 4 cancer, who choose to forego chemotherapy or CPR
- Terminal cancer patient from a poor family, decides to forego life-sustaining medical technology (breathing support/apparatus)
- Informing the patient about his prognosis, or disclosing all details of treatment he will undergo
- A VIP patient requests that his case not be divulged to media or his relatives

+ 4. Principle of Justice



- Justice in health care is usually defined as a form of fairness, or as Aristotle once said, "giving to each that which is his due."
- ethical responsibility to uphold fairness and equity in medical care. It refers to the equitable distribution of potential benefits and risks.
- The question of distributive justice also seems to hinge on the fact that some goods and services are in short supply, there is not enough to go around, thus some fair means of allocating scarce resources must be determined.

+ 4. Principle of Justice

- Justice is the principle of rendering to others what is due to them.
- It is the most complex of the ethical principles to be considered because it deals not only with the physician's obligation to render to a patient what is owed but also with the physician's role in the allocation of limited medical resources in the broader community.

+ 4. Principle of Justice

- underlies concerns about how social benefits and burdens should be distributed.
- For example, is it fair that two patients, otherwise similarly situated, are treated disparately by the health care system because one is rich and the other is indigent?

+ 4. Principle of Justice

■ Subdivided in to 3 categories:

1. Distributive justice: fair distribution of scarce resources
2. Rights-based justice: respect for people's rights
3. Legal justice: respect for morally acceptable laws

Example:

Equal access to treatment

Dilemma: reproductive technologies (IVF) not equally available to all

+ Examples...



- Who should get a priority in organ transplant?
 - Should it be on a “First come- first served basis”?, OR
 - Case to case basis? (re: ensure that limited resources are used sensibly and fairly)

EX:

2 patients need to have kidney transplant: one is a 24 yr old with kidney failure due to chronic glomerulonephritis; 2nd px is an 80 yr old man with stage 4 kidney cancer....WHO WOULD YOU PRIORITIZE?

- Should you recruit poor patient for your research because they badly need the monetary compensation?

+ Examples...



- During the COVID pandemic, where the number of severe COVID patients needing ventilator machines overwhelmed the capacity of the hospitals to provide for patients...
- HOW DO YOU DECIDE WHICH PATIENTS WILL BE GIVEN THE VENTILATOR?
- WHO DECIDES?
- ISSUE: Allocation of scarce resources in crisis situations / scarce-resource situations
 - crisis standards of care
 - Medical futility



- In crisis standard of care, the goal is to provide the BEST possible CARE to the population as a whole
- A designated hospital panel (with recommendations from the health care team) make the choice to provide a particular therapy to a patient, under the crisis standard of care.



+ Other Bioethical Principles



5. Principle of Human Dignity



- Requires that all health care decisions must aim to promote human dignity, and result not only in physical health, but also satisfy the patient's psychological, social, spiritual and cultural needs as an individual, and as member of the community he belongs.
- Examples:
 - Patient has the right to choose or refuse treatment depending on his preference/culture/religion



6. Principle of Free and Informed Consent



- Derived from the basic principle of ***respect for autonomy***
- This is the concrete expression of respecting the patient's autonomy
- 2 levels:
 1. autonomy of capable persons which upholds patient's right to voluntary informed consent, and choice based on comprehension of available options.
 - Ex: patient's right to family size determination.



6. Principle of Free and Informed Consent



- 2. The second level: protection of persons incapable of autonomy.
 - the unconscious, the mentally sub-normal and the child – all of whom require the protection of their autonomy.
 - Ex: the decision on the treatment of an unconscious pregnant woman; genital mutilation of an infant.



6. Principle of Free and Informed Consent



■ Elements of a “valid” informed consent:

1. Competence of patient
2. Adequate information
3. Comprehension and understanding of information presented
4. Free, voluntary consent



6. Principle of Free and Informed Consent



- The information that should be included in recommending a diagnostic/therapeutic procedure for a patient are:
 1. Complete description of the procedure
 2. Reason for the proposed procedure
 3. Benefit/s of the procedure
 4. Risk/s of the procedure
 5. Alternative diagnostic/therapeutic options
 6. Freedom to ask questions



6. Principle of Free and Informed Consent



- In cases of incompetent patients who cannot provide consent, proxy decision-makers (husband, parents, relatives, guardians) should make the decision according to the patient's best interest
- **WHO ARE THE INCOMPETENT PATIENTS INCAPABLE OF AUTONOMY?**
 1. unconscious
 2. mentally sub-normal/ mentally challenged
 3. child / minor



6. Principle of Free and Informed Consent



- protection of the INCOMPETENT requires either;
 1. the presence of a living will especially in the case of the unconscious patient
 2. OR obtaining of consent from the surrogate/ proxy decision-makers (husband, parents, relatives, guardians)
 3. or if option #2 is not feasible: a clergyman, or the ethical committee of a health institution
 4. or as a last resort, the law court.



6. Principle of Free and Informed Consent



- the attending physician can invoke “therapeutic privilege” and give consent based on his obligation to provide health care

Example: ruptured ectopic pregnancy in shock with no available relatives



6. Principle of Free and Informed Consent



- Medical paternalism refers to the overriding of autonomy.
- Strong paternalism is the overriding of the autonomy of a capable person, and is not ethically permissible.
- Weak paternalism is the overriding of the autonomy of an incapable person which is permissible if performed for the overall well-being of the person.



7. Principle of a Well-formed conscience



- Requires that physicians, as responsible health care providers, have the following obligations:
 1. Inform themselves as fully as possible about evidence-based medical facts and ethical norms
 2. Form a morally certain judgment of conscience based on above information
 3. Make health care decisions according to this fully informed conscience
 4. Accept responsibility for their actions

+ 8. Principle of Totality

- Requires that all persons should develop, use, care for and preserve all his physical functions in such a way that lower functions are never sacrificed, except for the better functioning of the whole person, or to preserve life
- Example:
 1. Atonic uterus causing heavy postpartum bleeding may be removed to preserve the life of the patient
 2. A gangrenous foot may be amputated to prevent spread of infection



9. Principle of Professional Communication



- Requires that health professionals have the following responsibilities:
 1. Establish and preserve trust in their patients
 2. Share medical facts they possess that are legitimately needed by patients to have an informed conscience
 3. Refrain from lying or providing misinformation
 4. Keep secret information not legitimately needed by others that if revealed will harm patients or destroy patient's trust



10. Principle of Confidentiality



- Requires the physician to keep the privacy of patients about those aspects of life which do not directly affect others
- Not absolute → may be broken by the need to protect the patient or others from harm



11. Principle of Double Effect



- Derived from the basic principle of “*non-maleficence*”
- Refers to actions which may have both good and bad effects.
- 4 conditions that must be fulfilled for the principle to be allowed are the following:
 1. The action must not be intrinsically contradictory to one's fundamental commitment to God and neighbor the action must be good or at least indifferent
 2. The intention of the agent must be directed towards the beneficial effect, the harmful effect is only allowed, never directly intended



11. Principle of Double Effect



3. The foreseen beneficial effects must be greater than or equal to the harmful effects

4. The beneficial effect must proceed from the action ahead or simultaneous with the harmful effect

It is important to note that in general the mother should be of prime consideration and therefore decision on her well-being takes precedence over that of the foetus.

+ Principle of Double Effect

Example:

Breast cancer patient who is pregnant (25 weeks AOG),
given chemotherapy

Cervical cancer patient(stage 2B), pregnant 28 weeks,
undergoes CS and hysterectomy thereafter



12. Principle of Stewardship



- Refers to man's limited dominion over nature and his own life.
- These things were entrusted to him to care for and improve as responsible steward
- Health professionals have ethical responsibilities to use intelligence and available technology to prevent and cure diseases

+ 13. Principle of Fidelity

- refers to the ethical responsibility of the health practitioners to carry out whatever promises made to a patient in relation to activities for which he or she has been employed. \
- Ex: pregnant woman used for the purpose of a clinical examination for professional medical students' exams may have been promised free further antenatal care and delivery.



14. Principle of Scientific Validity



- medical practitioners have responsibility to ensure professional competence and scientific soundness in the conduct of medical care or research on patient.

+ 15. Principles of veracity

- enjoins health practitioners to tell the truth - explaining the potential benefits and risks alike involved in whatever treatment being giving to, and procedure being carried out on the patient.

+ Summary

4 basic principles

- Principle of beneficence
- Principle of nonmaleficence
- Principle of respect for autonomy
- Principle of justice.

Other bioethical principles

- Principle of human dignity
- Principle of Free and Informed consent
- Principle of Well-formed conscience
- Principle of Totality
- Principle of Professional communication
- Principle of confidentiality
- Principle of Double effect
- Principle of Stewardship
- Principle of Fidelity
- Principle of Scientific validity
- Principle of Veracity