

Which Patients Should Receive Priority? Triage and the Ethical Allocation of Scarce Resources

Erica Carlisle, MD
Assistant Professor Surgery, Pediatric Surgery
Affiliate Faculty in the Program in Bioethics and Humanities

1

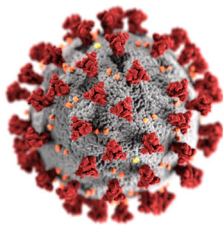
Objectives

1. Review the ethical principles that guide the allocation of scarce resources.
2. Discuss the ethical challenges of triage.
3. Explore the moral distress that may occur during triage.

2

Perhaps you've seen this image before?

- Who should get the vaccine?
- Who should get the ventilator?
- Should health care workers be prioritized? What's a health care worker?
- What about kids?



We've thought a lot about triage and allocation of scarce resources these past couple of years...

3

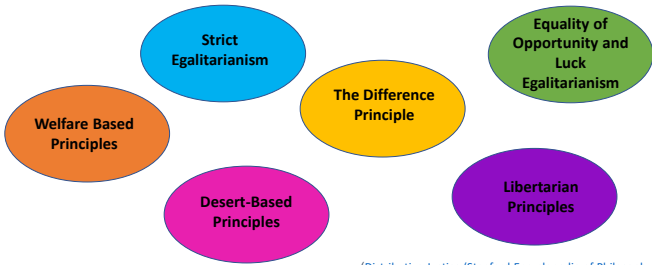
Taking a step back...what's the actual issue?



Definition: principles that provide moral guidance for the political processes and structures that affect the distribution of benefits and burdens in societies
(Distributive Justice (Stanford Encyclopedia of Philosophy))

7

Multiple Frameworks Guide Our Understanding of Distributive Justice

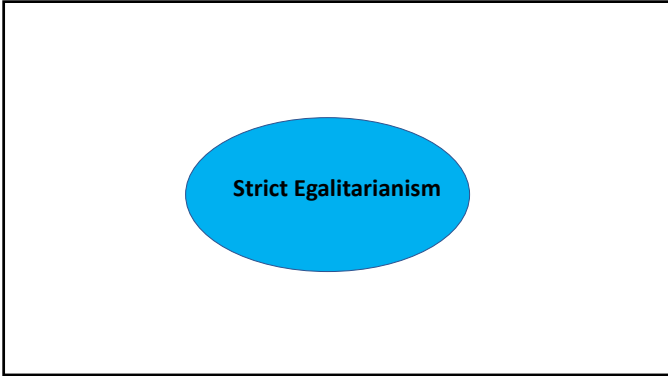


8

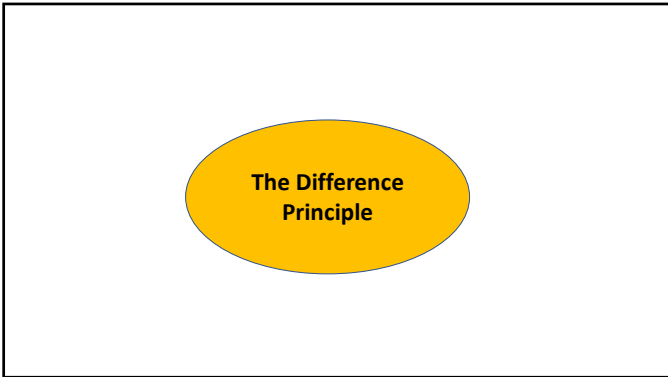
A Brief Caveat...



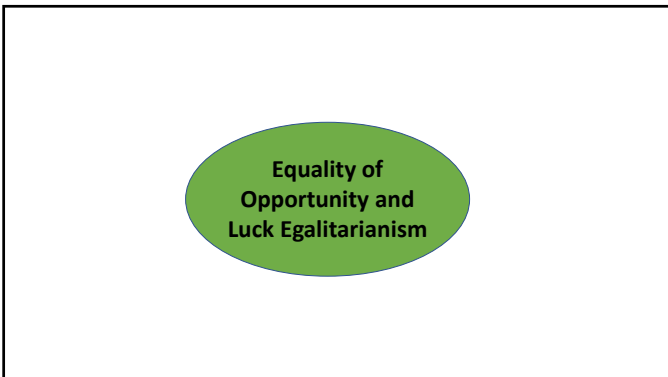
9



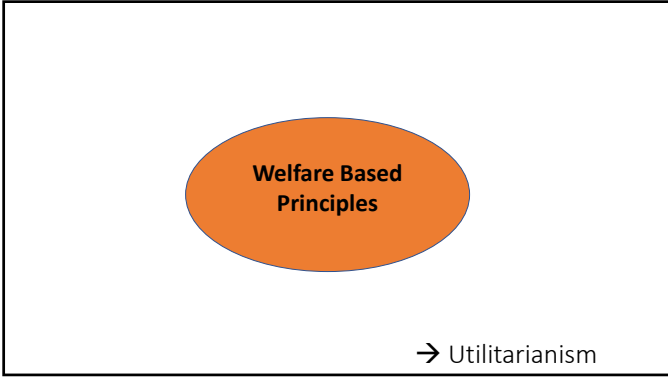
10



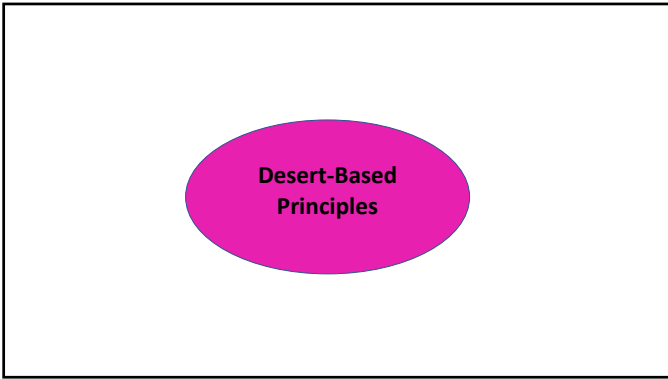
11



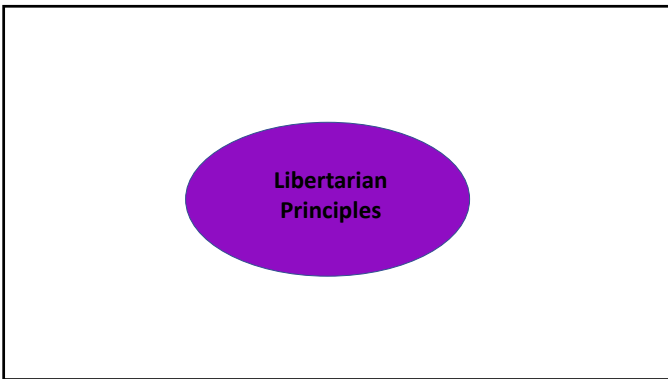
12



13



14



15

Should patients who use IV opioids be denied repetitive heart valve replacements for endocarditis?

Strict Egalitarianism: Yes, if valve replacement is indicated it should be offered

Welfare-based Principle (Utilitarianism): No, this would fail to maximize welfare

Libertarian Principle: No, IV opioid users are at liberty to continue self-harming behavior, but there is no obligation on others to provide treatment

Horizontal lines for notes

16

Given the varying frameworks, it makes sense that we may differ in how we practically integrate principles of distributive justice.

Is prioritization of a given framework context dependent?

Reflective equilibrium

Horizontal lines for notes

17

Discussion

How do we choose between the different distributive justice frameworks and respond to the criticisms of each?



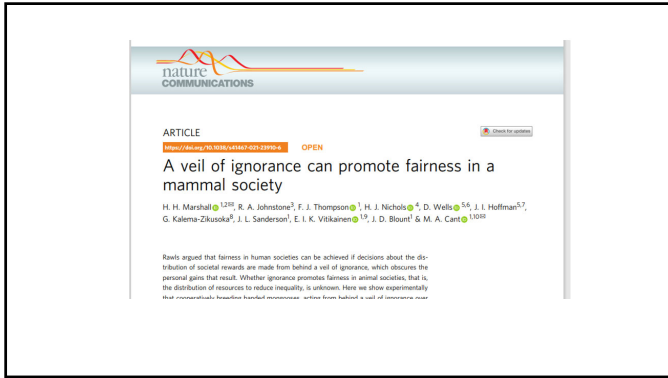
How have you seen conflict with prioritization of various frameworks of distributive justice arise?

How have you overcome these conflicts?

Comments?

Horizontal lines for notes

18

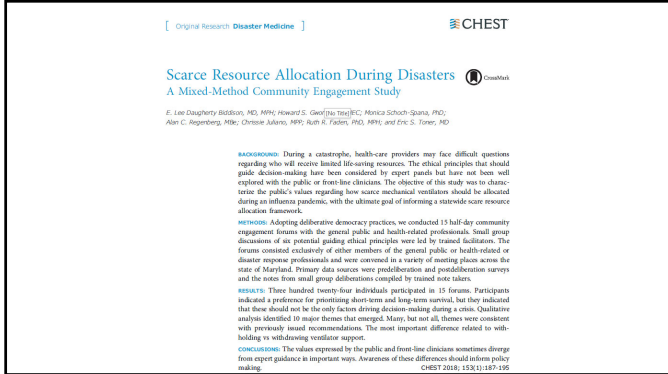


25

The previously mentioned studies did not account for limitations in resources...

Considerations regarding allocation of resources may be even more challenging when resources are scarce

26



27

CRITICAL CARE PERSPECTIVE

Mitigating Inequities and Saving Lives with ICU Triage during the COVID-19 Pandemic

Douglas B. White¹ and Bernard Lo^{2,3}

Program on Ethics and Decision Making in Critical Illness, Department of Critical Care Medicine, School of Medicine, University of Pittsburgh, Pittsburgh, Pennsylvania; Department of Medicine, School of Medicine, University of California San Francisco, San Francisco, California; and The Greenwall Foundation, San Francisco, California

Abstract

The burden of the coronavirus disease (COVID-19) pandemic has fallen disproportionately on disadvantaged groups, including the poor and Black, Latinx, and Indigenous communities. There is substantial concern that the use of existing ICU triage protocols to allocate scarce ventilators and critical care resources—most of which are designed to save as many lives as possible—may compound these inequities. As governments and health systems revisit their triage guidelines in the context of impending resource shortages, scholars have advocated a range of alternative allocation strategies, including the use of a random lottery to give all patients in need an equal chance of ICU treatment. However, both the so-called coin-toss approach and random allocation are seriously flawed. In this Perspective, we argue that ICU triage policies

should simultaneously promote population health outcomes and mitigate health inequities. These ethical goals are sometimes in conflict, which will require balancing the goals of maximizing the number of lives saved and distributing health benefits equitably across society. We recommend three strategies to mitigate health inequities during ICU triage: introducing a correction factor into patients' triage scores to reduce the impact of broader structural inequities; giving heightened priority to individuals in essential, high-risk occupations and restricting use of triage term life expectancy and categorical exclusions as allocation criteria. We present a practical triage framework that incorporates these strategies and attends to the twin public health goals of promoting population health and social justice.

Keywords: COVID-19; ethics; critical care; triage; public health

31

Discussion

Do you think White and Lo's effort to balance population health and social justice is appropriate?

Table 2. Strategies to Promote Justice in ICU Triage

- Modifications to existing triage guidelines:
1. Use a correction factor to reduce the impact of structural inequities.
2. Give heightened priority to all frontline essential workers, not just healthcare workers.
3. Do not use quality of life, long term life expectancy, broad social worth, gender, race, ethnicity, disability status, or sexual orientation as triage criteria or categorical exclusion criteria.
Procedural justice considerations:
1. Engage diverse communities when developing triage policies.
2. Ensure that triage teams receive training in implicit bias, health equity, and anti-racism.
3. Blind triage teams to ethically irrelevant patient characteristics.
4. Establish a real-time review of triage decisions to monitor for bias or inequitable outcomes.
Considerations at the state level:
1. Prioritize safety net hospitals and others that serve disproportionately disadvantaged populations to receive additional ventilators from the state and national stockpiles.
2. Ensure that robust interhospital transfer mechanisms are used to transfer patients from overwhelmed safety net hospital to better-resourced hospitals.



Comments?

32

PERSPECTIVE

WHAT COVID HAS TAUGHT THE WORLD ABOUT ETHICS

What Covid Has Taught the World about Ethics

Emmett J. Emanuel, M.D., Ph.D., Ross E.G. Upshur, M.D., and Maxwell J. Smith, Ph.D.

The Covid pandemic has posed substantial challenges to societies and health systems globally. Many of these challenges have been technical, such as the development of vaccines and therapeutics.

Although global leaders have frequently invoked "solidarity," "equity," and "fairness" during the pandemic, they seemed unsure technical, such as the development of vaccines and therapeutics.

Table 1. Role of Values in Decision Making during Public Health Emergencies

Table with 3 columns: Point at Which Values Enter into Public Health Decision Making, Explanation, and Sample Policy Questions. Rows include: When explicitly involving stakeholders, When establishing policy objectives, When navigating trade-offs, and When navigating uncertainty.

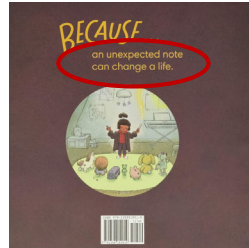
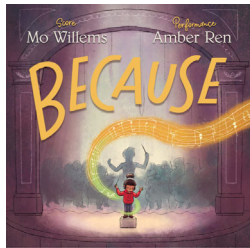
Identifying the values that can guide future decision making

33

Fundamental goals to apply the next time we allocate scarce resources...

Table 2. Fundamental Values Affecting Allocation of Scarce Medical Resources.	
Value	Definition
Maximizing benefits and preventing harms	Prioritization of a good or service should maximize benefits and minimize harms. Harms may be broad and include both health harms (e.g., morbidity and mortality) and non-health harms (e.g., poverty). They can also derive directly from the disease or indirectly, as health system functioning is compromised.
Mitigating disadvantage	Special concern and prioritization should be given to people who are disadvantaged because of their income or because of discrimination based on their race, ethnicity, religion, or other factors.
Reciprocity	Preferential allocation of medical resources should be given to people who, in the past, have mitigated harm for others and faced a disproportionate burden (e.g., research participants and food-processing workers).
Instrumental value	Benefits should be provided and harms mitigated for people who can, in the future, mitigate harms and disadvantage for others. Instrumental value is not an independent value but facilitates realizing the other values, particularly maximizing benefits.
Equal moral concern	People should be treated as moral equals, and discrimination on the basis of morally irrelevant characteristics such as race, ethnicity, or religion should be avoided. People in different circumstances (e.g., in communities with higher or lower burden of disease) can typically be treated differently given unique needs.

34

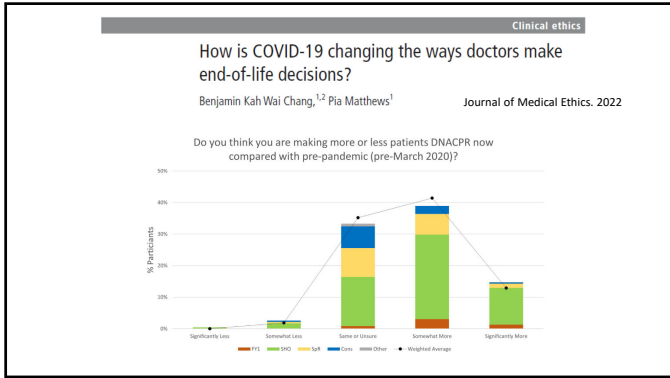


The music changed her...and the pandemic changed us...

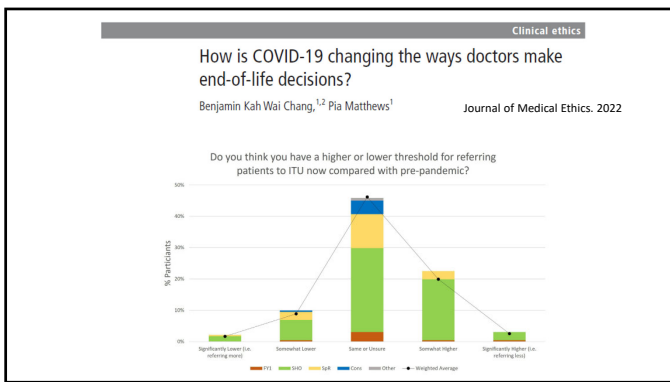
35

Changes in our clinical practices are well documented

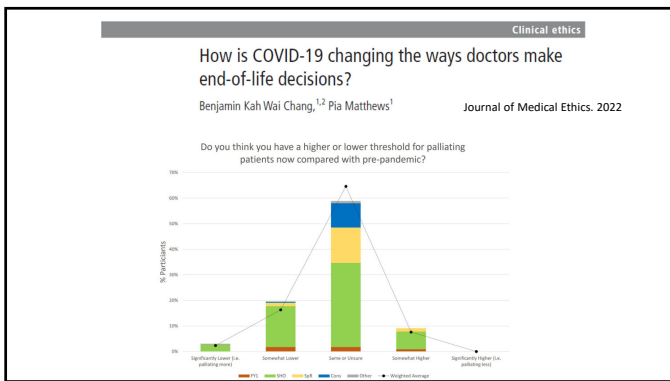
36



37



38



39

ARTICLE IN PRESS
 JID: YJSU [mNE, September 4, 2022, 11:52]
 Journal of Pediatric Surgery xxx (xxxx) xxx
 Contents lists available at ScienceDirect
 Journal of Pediatric Surgery
 ELSEVIER
 journal homepage: www.elsevier.com/locate/jpedisurg.org

Management of pediatric appendicitis during the COVID-19 pandemic:
 A nationwide multicenter cohort study

Brittany Hegde^{a,b,c}, Elisa Garcia^{a,c}, Andrew Hu^d, Mehul Raval^d, Sanyu Takirambudde^e,
 Derek Wakeman^f, Ruth Lewit^g, Ankush Gosain^h, Raphael H. Parrado^h, Robert A. Cina^h,
 Krista Stephensonⁱ, Melvin S. Dassinger III^j, Daniel Zhang^k, Moiz M. Mustafa^l, Donna Koo^l,
 Aaron M. Lipskar^l, Katherine Scheidler^l, Kyle J. Van Arendonk^l, Patrick Berg^l,
 Raquel Gonzalez^m, Daniel Scheeseⁿ, Jeffrey Haynes^o, Alexander Mina^o, Irving J. Zamora^o,
 Monica E. Lopez^o, Steven C. Mehl^o, Elizabeth Gilliam^o, Katrina Lofberg^o, Brianna Spencer^o,
 Afiif N. Kulajlat^o, Brian C. Gulack^o, Matthew Johnson^o, Matthew Laskovoy^o,
 Pavan Brahmamdam^o, Aoi Shimomura^o, Therese Blanch^o, KuoJen Tsao^{b,d,e},
 Bethany J. Slater^{a,c}

40

🎵 The Times They Are A-Changin' 🎵

"Any change, even a change for the better, is always accompanied by drawbacks and discomforts." –Arnold Bennett

"It's not the strongest of the species that survive, nor the most intelligent, but the one most responsive to change." -Charles Darwin

"The secret of change is to focus all of your energy, not on fighting the old, but on building the new." -Socrates

"Life is about change. Sometimes it's painful. Sometimes it's beautiful. But most of the time, it's both." –Lana Lang

41

Change can be uncomfortable...

Moral Distress

42

APSA ETHICS AND WELLNESS COMMITTEES
PEDSURG.TV SERIES: WHAT IS MORAL DISTRESS?

PedSurg.TV
Saving Lifetimes

APSA Ethics, Wellness, and Benji Brooks Committees Continue Their Popular Series on
Wellness and Moral Distress Management: Connect and Share

Tune in for a LIVE APSAcode
March 22, 7:50 PM ET

As pediatric surgeons, we all face challenges balancing our role of caring for patients in the hospital with our roles of caring for loved ones outside of the hospital. We look forward to using this discussion as a time to reflect upon how we can identify the drivers of moral distress that challenge and violate our values as well as how we can recognize and

46

Discussion

What are some ideas for mitigating moral distress related to resource allocation that you have or that you have implemented at your institution?

Comments?

47

Final Thoughts

- Develop intentional frameworks grounded in principles of distributive justice to help consistently, transparently, and equitably determine which patients to prioritize when resources are scarce
- Mitigate moral distress at the personal, local, and national level
- Remain thoughtful, reflective, and flexible to modify allocation frameworks

48
