Program in Bioethics and Humanities Carver College of Medicine

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BIOETHICS & HUMANITIES NEWSLETTER



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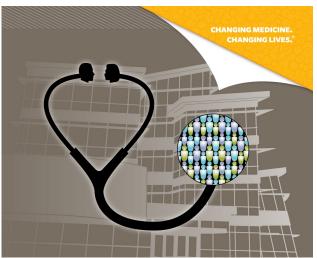
Welcome to the monthly Bioethics and Humanities Newsletter provided by the Program in Bioethics and Humanities at the University of Iowa Carver College of Medicine.

Program in Bioethics and Humanities: Our Mission

We are committed to helping healthcare professionals explore and understand the increasingly complex ethical questions that have been brought on by advances in medical technology and the health care system. We achieve this through education, research, and service within the Carver College of Medicine, University of Iowa Health Care, University of Iowa, and the wider lowa community.

More Details About The Program





5th Annual Ethics in Healthcare Conference

Friday, May 19, 2023

We are excited to announce that after a three-year pause the Ethics in Healthcare Conference will return in 2023!

About the Conference:

With the steady introduction of more treatment options and biotechnologies, an increasing number and range of ethical challenges in health care are emerging. This conference is designed to help professionals meet these challenges through their work as clinicians, members of ethics committees or ethics consult teams, and administrators.

This one-day conference for collaborative dialogue and inter-professional exchange seeks to provide up-todate information in healthcare ethics relevant to clinical practice; provide approaches to ethical reasoning that clarify ethical problems; facilitate professional discussion of ethical challenges and decision making in healthcare; and encourage professional networking for ongoing dialogue, support, and collaboration.

Additional information will be coming in the next few months.

PUBLICATION HIGHLIGHT

The Religious Character of Secular Arguments Supporting Euthanasia and What it Implies for Conscientious Practice in Medicine

John Tambakis, Lauris Kaldjian, Ewan C. Goligher

Theoretical Medicine and Bioethics

Contemporary bioethics generally stipulates that public moral deliberation must avoid allowing religious beliefs to influence or justify health policy and law. Secular premises and arguments are assumed to maintain the neutral, common ground required for moral deliberation in the public square of a pluralistic society. However, a careful examination of non-theistic arguments used to justify euthanasia (regarding contested notions of human dignity, individual autonomy, and death as annihilation) reveals a dependence on metaethical and metaphysical beliefs that are not universally accepted in a pluralistic society. Such beliefs function in non-theistic arguments in the same way that foundational beliefs justify moral convictions in religious frameworks of belief. This parallel is apparent when religious belief is defined broadly (a la John Reeder) as 'the search for the good in light of the limits and possibilities of the real.' Seen through this interpretive lens, frameworks comprising Secular foundational commitments function, in ethically relevant respects, like the guiding beliefs found in the comprehensive frameworks of traditional religions. When conscientious practice in healthcare is reconsidered in light of this foundational similarity between the religious and the secular, it is clear that those who object to the foundational beliefs underpinning Secular arguments for euthanasia should not be required to provide, participate in, or refer patients for euthanasia (or other ethically controversial practices similarly dependent on contested frameworks of belief) in pluralistic societies that prize moral freedom as a primary human good.

To read the full article, <u>click here</u>.



BIOETHICS IN THE LITERATURE

- ⇒ Bardosh K, Krug A, Jamrozik E, et al. Covid-19 vaccine boosters for young adults: A risk benefit assessment and ethical analysis of mandate policies at universities. J Med Ethics. 2022 Dec 5. [Epub ahead of print]
- ⇒ Berlacher M, Abousaab C, Chen C, et al. ICD knowledge and attitudes at end of life in a diverse and vulnerable patient population. J Health Care Poor Underserved. 2022; 33: 1793-1808.
- ⇒ Blumenthal-Barby J, Aas S, Brudney D, et al. The place of philosophy in bioethics today. <u>Am J Bioeth</u>.
 2022 Dec; 22: 10-21.
- ⇒ Botros-Brey S, Dyurich A, Pfeiffer A, et al. Addressing peer-to-peer resident mistreatment through the use of forum theatre: A pilot intervention. <u>Acad Med</u>. 2022 Dec 1; 97: 1780-1785.
- \Rightarrow Byyny RL. Restoring the joy in caring. <u>Pharos</u>. 2022: 2-5.
- ⇒ Chang BKW, Matthews P. How is covid-19 changing the ways doctors make end-of-life decisions? J <u>Med Ethics</u>. 2022 Jul 25. [Epub ahead of print]
- \Rightarrow Colace A. The courage to live. <u>Narrat Ing Bioeth</u>. 2022; 12: 131-134.
- ⇒ Felder RM, Magnus D. A rejection of "applied ethics": Philosophy's real contributions to bioethics found elsewhere. <u>Am J Bioeth</u>. 2022 Dec; 22: 1-2.

"Take as an example our experiences of theoretical under-determination of theories of justice in the context of COVID resource allocation committees. We were asked to assist in applying theories of justice and principles of bioethics to concrete problems of allocation of scarce vaccines and drugs, but we soon discovered that any attempt to apply a theory required us to move so far away from the theory itself that we weren't so much "applying" a theory as we were simply offering a morally-flavored answer to the allocation questions."

(Felder and Magnus)

- ⇒ Gotlieb R, Praska C, Hendrickson MA, et al. Accuracy in patient understanding of common medical phrases. JAMA Netw Open. 2022 Nov 1; 5: e2242972.
- ⇒ Kirsch TD. Heroism is not a plan-from "duty to treat" to "risk and rewards". <u>Am J Bioeth</u>. 2022 Dec; 22: 3-6.
- ⇒ Leitman IM, Muller D, Miller S, et al. Implementation of an online reporting system to identify unprofessional behaviors and mistreatment directed at trainees at an academic medical center. JAMA <u>Netw Open</u>. 2022 Dec 1; 5: e2244661.

BIOETHICS IN THE LITERATURE (CONTINUED)

- ⇒ Li J, Braun RT, Kakarala S, et al. How should cost-informed goals of care decisions be facilitated at life's end? <u>AMA J Ethics</u>. 2022 Nov 1; 24: E1040-1048.
- ⇒ Liaw W, Kueper JK, Lin S, et al. Competencies for the use of artificial intelligence in primary care. <u>Ann Fam Med</u>. 2022 Nov-Dec; 20: 559-563.
- ⇒ Linzer M, Jin JO, Shah P, et al. Trends in clinician burnout with associated mitigating and aggravating factors during the covid-19 pandemic. JAMA Health Forum. 2022 Nov 4; 3: e224163.
- ⇒ Muaygil R, Aldekhyyel R, AlWatban L, et al. Ethical uncertainty and covid-19: Exploring the lived experiences of senior physicians at a major medical centre. J Med Ethics. 2022 Dec 8. [Epub ahead of print]
- ⇒ Seetharam S, Gunderman R. The importance of face-to-face encounters in medical education.
 <u>Pharos</u>. 2022; Autumn: 12-15.
- ⇒ Shaw D, Manara A, Dalle Ave AL. The ethics of semantics in medicine. <u>J Med Ethics</u>. 2022 Dec; 48: 1026-1031.
- ⇒ Shearer E, Baruch J. Decision aids, doorknob moments, and physician-patient solidarity in EDs. <u>AMA</u> <u>J Ethics</u>. 2022; 24: 1129-1134.
- ⇒ Shireman R. For-profit medical schools concerns about quality and oversight. <u>N Engl J Med</u>. 2022 Dec 3.20221203.
- ⇒ Thompson SM. Health information technology: Ethical concerns in nursing practice and research. Nursing. 2022 Dec 1; 52: 40-43.
- ⇒ Yusof M, Teo CH, Ng CJ. Electronic informed consent criteria for research ethics review: A scoping review. <u>BMC Med Ethics</u>. 2022 Nov 21; 23: 117.



BIOETHICS IN THE NEWS

- ⇒ Hundreds of incarcerated people are dying of hep C—even though we have a simple cure. <u>STAT News</u>, December 15, 2022.
- ⇒ 'Out of control': Dozens of telehealth startups sent sensitive health information to big tech companies.
 <u>STAT News</u>, December 13, 2022.
- ⇒ For patients with sickle cell disease, fertility care is about reproductive justice. <u>Kaiser Health News</u>, December 8, 2022.
- \Rightarrow 'Doctors fitted a contraceptive coil without my consent.' <u>BBC News</u>. December 8, 2022.
- \Rightarrow Speedier drug approvals hit slowdown as FDA faces scrutiny. <u>Associated Press</u>, December 7, 2022.
- ⇒ Latest updates: Stanford president under investigation for research misconduct. <u>The Stanford Daily</u>, December 7, 2022.
- \Rightarrow Medical bills remain inaccessible for many visually impaired Americans. <u>NPR</u>, December 1, 2022.
- ⇒ Stanford president's research under investigation for scientific misconduct, University admit 'mistakes.' <u>The Stanford Daily</u>, November 29, 2022.
- ⇒ How hospice became a for-profit hustle. The New Yorker, November 28, 2022.
- ⇒ WHO, Uganda plan to test three candidate Ebola vaccines in outbreak. <u>STAT News</u>, November 16, 2022.



BIOETHICS OPPORTUNITIES

UPCOMING

- ⇒ The Hastings Center: Upcoming Webinars and Events
- ⇒ Michigan State University: 2022-2023 Bioethics Public Seminar Series

ONGOING

- ⇒ The Hastings Center: <u>Recent Webinars and Events</u>
- ⇒ American Journal of Bioethics: <u>YouTube channel</u> containing previous webinars
- ⇒ The MacLean Center for Clinical Medical Ethics: <u>YouTube channel</u> containing previous lectures
- ⇒ Children's Mercy Kansas City: <u>Pediatric Ethics Podcast series</u> and <u>Webinars and Workshops</u>
- ⇒ Office for Human Research Protections <u>Luminaries Lecture Series</u>

BIOETHICS SERVICES AT THE UIHC

ETHICS CONSULT SERVICE

This service is a clinical resource for UI Health Care personnel who would like help addressing an ethical question or problem related to a patient's care. Consults can be ordered through EPIC or by paging the ethics consultant on call. For more information, <u>click here</u>.



CLINICAL RESEARCH ETHICS SERVICE

We provide free consultation on ethical issues related to research design, tissue banking, genetic research results, informed consent, and working with vulnerable patient populations. In particular, we assist clinical investigators in identifying and addressing the ethical challenges that frequently arise when designing or conducting research with human subjects. These include ethical challenges in sampling design; randomized and placebo-controlled studies; participant recruitment and informed consent; return of individual-level research results; community engagement processes; and more. For more information, <u>click here</u>.