

BIOETHICS & HUMANITIES NEWSLETTER



WELCOME...

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 Iowa community.

[More Details About
The Program](#)

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EDUCATIONAL OPPORTUNITIES FOR STUDENTS AT CCOM

FALL 2024 BIOETHICS AND HUMANITIES SEMINAR

MED:8076

A one-credit hour elective course directed and taught by Lauris Kaldjian, MD, PhD.

The purpose of the Seminar is to provide an introduction to topics and themes that are central to bioethics and the humanities in the context of medicine. The course covers a diverse but inter-connected range of topics, including ethical theory, different approaches to ethical reasoning (principles, consequences, virtues), clinical ethics, professionalism and humanism in medicine, moral agency, ethical pluralism, ethics in relation to cultural diversity and global health, historical examples of research abuses, technology and the future, narrative ethics, and the use of stories in medicine. The course provides 'breadth' through the number of topic areas it covers, and it offers opportunities for dialogue afforded by small-group discussion.

The Seminar will meet in person every Monday from 12:00-12:50 PM in room 1121 MERF. Class size is limited to 12 students. Priority for enrollment is given to medical students but the course is also open to other students at the University of Iowa, as space allows. Students wishing to enroll in the Fall 2024 Seminar should email the [Course Coordinator](#).

FALL 2024 FOUNDATIONS IN HEALTHCARE ETHICS

MED:8416:0400 (medical students) MED:5416:0100 (graduate students)

A three-credit hour elective course directed and taught by Lauris Kaldjian, MD, PhD. Open to medical students and graduate students throughout the University of Iowa.

In this 15-week, reading-intensive course, students review major ethical traditions, ideas, and frameworks that have shaped contemporary approaches to healthcare ethics in morally pluralistic Western cultures. Topics include four prominent frameworks in healthcare ethics (virtue-based, principle-based, circumstance-based, and consequence-based) that emphasize four aspects of ethical decision making (agent, action, context, outcome). Through written reflections, weekly class discussions, and a final paper, students engage ethical concepts, translating from ethical theory to ethical practice by applying foundational beliefs and values to concrete challenges in clinical practice.

The course will meet virtually every Tuesday from 4:50-6:30 PM. Students wishing to enroll in the Fall 2024 semester should email the [Course Coordinator](#).

EDUCATIONAL OPPORTUNITIES FOR STUDENTS AT CCOM (CONTINUED)

PERSONAL-PROFESSIONAL COMPASS (PPC)

A one-credit hour elective course co-directed by Brittany Bettendorf, MD, MFA, Katherine Harris, MD, and Lauris Kaldjian, MD, PhD.

The purpose of the Carver College of Medicine Personal-Professional Compass program is to help medical students understand, articulate, and integrate their personal and professional values and goals as they navigate their way through the four years of medical school. This program will promote students' growth as humanistic professionals through written reflections on personal experience, readings from the literature of medicine and the humanities, and ongoing dialogues within a community of peers and mentors. Written reflections will culminate in the capstone project of writing a fourth-year personal statement for residency applications.

Objectives

- 1) To encourage students to integrate their personal and professional values and goals.
- 2) To encourage students to reflect on and learn from their personal experiences in training.
- 3) To encourage students toward virtues needed for the humanistic practice of medicine.
- 4) To facilitate peer and mentor relationships that can enhance personal-professional integration.
- 5) To prepare students to write an authentic and compelling personal statement for residency applications.



Interested students should plan to enroll in the PPC by the end of the first semester of their M2 year, but later enrollment is also possible.

For more information, [click here](#) or email the [PPC Coordinator](#).

PUBLICATION HIGHLIGHT

“I Didn’t Know What I Didn’t Know:” Assessment of Adolescent Oncology Patient Engagement in Decision-Making

Gloria Chen, Maxwell T. Lieberman, Laura A. Shinkunas, Erica M. Carlisle
[Journal of Surgical Research](#)

Introduction: Little is known about the best way to engage an adolescent oncology patient in decision-making. To integrate adolescent oncology patients most effectively in decision-making, it is important to understand their perceptions not only as adolescents but also as adult survivors who have had time to reflect upon their experience. The purpose of this study is to explore perceptions of survivors of pediatric cancer to better understand their attitudes toward participation in decision-making, decisional regret, and use of decision-support tools.

Methods: An electronic survey tool, containing open- and closed-ended responses, was distributed to adult cancer survivors diagnosed and treated for cancer between the ages of 9 and 18 at a Midwestern, Comprehensive Cancer Center within a tertiary care academic hospital.

Results: Seventy responses were received. Nearly all respondents (96%) reported that decisions made on their behalf were consistent with their desires most/all the time. Almost one-fifth felt that increased involvement would have intensified their anxiety. Eighty-five percent did not regret choices made about their cancer treatment, and 88% would have made the same choices again. Respondents desired more targeted information on the long-term impacts of treatment (i.e., infertility, memory difficulties, mental health concerns), and they highlighted the importance of communication in the decision-making process.

Conclusions: Adolescents want to participate in the decision-making process in a way that accommodates their understanding of the pathology and potential impacts of treatment. Our results suggest that developing a simple intervention to help facilitate provision of such anticipatory guidance may be helpful.

To read the full article, [click here](#).

HUMANITIES CORNER

This month's spotlight is on **Matthew Kigin, a fourth year medical student**. His creative work is a haiku and a reflection. He completed this creative work as part of the *Ethics and Humanities Sub-Internship Seminar*. During this Seminar students are asked to complete a written reflection or creative work that responds to a situation they encountered during their sub-internship that illustrated values in ethics, professionalism, or humanism.

*Warriors grow frail,
Stories etched in hearts and scars—
Duty meets their end.*

Working in the VA hospital for my sub-internship has given me an eye-opening experience into the world of veteran healthcare, and a healthcare system that operates quite differently than that of most American hospitals. The opportunity to care for veterans has allowed me to connect with individuals who have given much for our country, often at great personal cost. Each veteran that I've seen so far have fascinating and at times horrifying stories, but stories none the less. These stories are shown through the damage their bodies have endured, their injury scars, and their surgical scars. Witnessing their health decline is not just a clinical observation but a reminder of the sacrifices they have made. The decline in their health, whether due to age, injuries sustained in combat, or the long-term impacts of service, underscores the physical and emotional toll that their duty has exacted. Our team at the VA often sees similar medical conditions from veterans: heart disease, lung disease, substance use disorders, and mental health concerns. While these conditions alone are common, the constellation that we often see reflects the shared experiences that these veterans endured.

This experience has also reinforced the importance of providing compassionate, comprehensive care. Veterans, like all other patients, deserve not only our respect and gratitude but also our unwavering commitment to their well-being. The stories shared by these veterans have taught me about resilience, bravery, and the importance of empathy in medicine. They have shown me that healing involves more than just treating physical ailments; it requires understanding and addressing the emotional and mental scars as well. These veterans commonly experience psychiatric conditions and require support. Through my time at the VA, I have come to appreciate the undercurrent of bond between providers and veterans. Many of these providers/hospital staff are veterans themselves and have a unique connection with patients. It's not uncommon for me to walk in on a conversation of staff and patient reminiscing on their service experience. It is a relationship built on trust, respect, and a shared experience of honoring their service by ensuring they receive the care and dignity they deserve.

BIOETHICS IN THE LITERATURE

- ⇒ Andersen SK, Yang Y, Kross EK, et al. Achieving goals of care decisions in chronic critical illness: A multi-institutional qualitative study. [Chest](#). 2024; 166: 107-117.
- ⇒ Ashana DC, Welsh W, Preiss D, et al. Racial differences in shared decision-making about critical illness. [JAMA Intern Med](#). 2024; 184: 424-432.
- ⇒ Blackler L, Scharf AE, Matsoukas K, et al. 'If you build it, they will come...to the wrong door: Evaluating patient and caregiver-initiated ethics consultations via a patient portal.' [BMJ Health Care Inform](#). 2024; 31.
- ⇒ Blumenthal-Barby J, Fletcher FE, Taylor L, et al. Ethical complexities in utilizing artificial intelligence for surrogate decision making. [Am J Bioeth](#). 2024; 24: 1-2.
- ⇒ Earp BD, Porsdam Mann S, Allen J, et al. A personalized patient preference predictor for substituted judgments in healthcare: Technically feasible and ethically desirable. [Am J Bioeth](#). 2024; 24: 13-26.
- ⇒ Eisenberg LR. When "next of kin" isn't "who knows best": The ethics of choosing a surrogate decision maker. [Am J Bioeth](#). 2024; 24: 123-124.
- ⇒ Fleisje A. Four shades of paternalism in doctor-patient communication and their ethical implications. [Bioethics](#). 2024; 38: 539-548.
- ⇒ Goldberg CB, Adams L, Blumenthal D, et al. To do no harm - and the most good - with ai in health care. [Nat Med](#). 2024; 30: 623-627.
- ⇒ Hager P, Jungmann F, Holland R, et al. Evaluation and mitigation of the limitations of large language models in clinical decision-making. [Nat Med](#). 2024 July 4. [Epub ahead of print].
- ⇒ Helfand M. Learning to see spin in systematic reviews. [Ann Intern Med](#). 2024 Jul 16. [Epub ahead of print].
- ⇒ Hendriks S, Grady C. Ethics and highly innovative research on brain diseases. [N Engl J Med](#). 2024; 390: 2133-2136.
- ⇒ Heward BJ, Yule AM, Jackson PR. How should harm reduction strategies differ for adolescents and adults? [AMA J Ethics](#). 2024; 26: E534-545.
- ⇒ Hoffman DN, Strand GR. 'Sit down and thrash it out': Opportunities for expanding ethics consultation during conflict resolution in long-term care. [New Bioeth](#). 2024; 30: 152-162.



BIOETHICS IN THE LITERATURE

- ⇒ Islami F, Marlow EC, Thomson B, et al. Proportion and number of cancer cases and deaths attributable to potentially modifiable risk factors in the united states, 2019. [CA Cancer J Clin](#). 2024 Jul 11. [Epub ahead of print].
- ⇒ Largent EA, Joffe S, Dickert NW, et al. The ethical value of consulting community members in non-emergency trials conducted with waivers of informed consent for research. [Clin Trials](#). 2024 Jun 25. [Epub ahead of print].
- ⇒ Mohammadi F, Naderi Z, Nikrouz L, et al. Ethical challenges as perceived by nurses in pediatric oncology units. [Nurs Ethics](#). 2024; 31: 268-280.
- ⇒ Morain SR, Singleton MK, Tsiandoulas K, et al. Single irb review and local context considerations: A scoping review. [Ethics Hum Res](#). 2024; 46: 17-26.
- ⇒ Murray AN, Monahan K, Sacco A, et al. Development and validation of a measure of self-efficacy for advance care planning. [Am J Hosp Palliat Care](#). 2024; 41: 873-881.
- ⇒ Qureshi R, Naaman K, Quan NG, et al. Development and evaluation of a framework for identifying and addressing spin for harms in systematic reviews of interventions. [Ann Intern Med](#). 2024 Jul 16. [Epub ahead of print].
- ⇒ Salmon DA, Orenstein WA, Plotkin SA, et al. Funding postauthorization vaccine-safety science. [N Engl J Med](#). 2024; 391: 102-105.

“Allowing the use of a portion of the existing federal excise tax to fund vaccine safety research would ensure that the United States has the surveillance, science, and rapid-response capacity to both detect and prevent vaccine injuries. This long-overdue action would be an important step toward rebuilding public confidence in the immunization system.”

(Salmon et al.)

- ⇒ Schurmann J, Reiter-Theil S. What factors contribute to ethical problems in patient care? A scoping review and case series of clinical ethics consultations. [J Clin Ethics](#). 2024; 35: 119-135.
- ⇒ Sim I, Cassel C. The ethics of relational ai - expanding and implementing the Belmont principles. [N Engl J Med](#). 2024; 391: 193-196; [supplementary appendix](#).
- ⇒ Vidaeff AC, Capito L, Gupte S, et al. The ethics and practice of perinatal care at the limit of viability: Figo recommendations. [Int J Gynaecol Obstet](#). 2024 Jun 30. [Epub ahead of print].
- ⇒ Weiner C, Pergert P, Castor A, et al. Children's voices on their values and moral dilemmas when being cared and treated for cancer- a qualitative interview study. [BMC Med Ethics](#). 2024; 25: 75.
- ⇒ Xin C, Song X, Wang S, et al. Assessing professional behaviors: A self-administered scale for medical students during clerkships. [BMC Med Educ](#). 2024; 24: 692.

BIOETHICS IN THE NEWS

- ⇒ Peter Buxton, who exposed Tuskegee Syphilis Study, dies at 86. [The New York Times](#), July 18, 2024.
- ⇒ IRBS fail to assess trials' scientific merit, putting participants at risk. [STAT News](#), July 18, 2024.
- ⇒ Promised cures, tainted cells: How cord blood banks mislead parents. [The New York Times](#), July 18, 2024.
- ⇒ Expand community-based research to make clinical trials more diverse. [STAT News](#), July 10, 2024.
- ⇒ Elon Musk's NeuroLink is ready to implant a second volunteer. [Wired](#), July 10, 2024.
- ⇒ 'We've created medical refugees.' LGBTQ+ healthcare workers fight for gender-affirming care amid rise in anti-trans laws. [Los Angeles Times](#), July 10, 2024.
- ⇒ The untold story of the Human Genome Project: How one man's DNA became a pillar of genetics. [STAT News](#), July 9, 2024.
- ⇒ Doctors try a controversial technique to reduce the transplant organ shortage. [NPR](#), July 8, 2024.
- ⇒ What to know about Louisiana's new surgical castration law. [NPR](#), July 1, 2024.
- ⇒ Eating rocks: The case for early integration of medical ethics into AI product development. [STAT News](#), June 27, 2024.
- ⇒ Estonians gave their DNA to science—now they're learning their genetic secrets. [Nature](#), June 26, 2024.



BIOETHICS OPPORTUNITIES

- ⇒ The Hastings Center: [Webinars and Events](#)
- ⇒ American Journal of Bioethics: [YouTube channel](#) containing previous webinars
- ⇒ The MacLean Center for Clinical Medical Ethics: [YouTube channel](#) containing previous lectures
- ⇒ Children's Mercy Kansas City: [Pediatric Ethics Podcast series](#) and [Webinars and Workshops](#)
- ⇒ Office for Human Research Protections [Luminaries Lecture Series](#)
- ⇒ [Health Ethics](#) podcast with host Bryan Pilkington, PhD (Hackensack Meridian School of Medicine): Discuss a wide variety of ethical issues associated with health and healthcare, including AI, academic freedom, research ethics, medical education, public health, global health, and much more. You can find the *Health Ethics* podcast on Google Podcasts, Spotify, Apple Podcasts, and Audible.

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, [click here](#).



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, [click here](#).