Program in Bioethics and Humanities
Carver College of Medicine

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Bioethics & Humanities Newsletter

Inside this issue:

WELCOME…

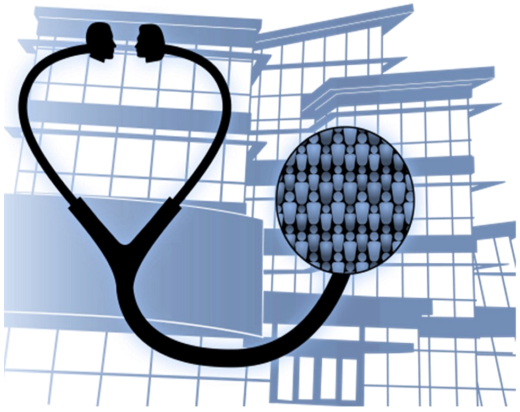
Welcome to the monthly Bioethics and Humanities Newsletter provided by the Program in Bioethics and Humanities at the University of Iowa Carver College of Medicine.

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

ETHICS IN HEALTHCARE CONFERENCE

Sponsored by the Program in Bioethics and Humanities,
Carver College of Medicine, University of Iowa



SAVE THE DATE

Friday, May 29, 2026

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-to-date 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.

Sessions will include the following topics and speakers:

- **The Moral Calibration of Professional Duty: How Responsible Am I for My Patient's Wellbeing?**
  - Aaron Kunz, DO, MA, MME, University of Iowa
- **Between Patient, Parent, and Professional: A Framework for Ethical Pediatric Decision-Making**
  - Erica Salter, PhD, HEC-C, Saint Louis University
- **AI and the Patient-Clinician Relationship**
  - Adam Cifu, MD, University of Chicago
- **Frequently Used Resources and References in Clinical Ethics Consultation**
  - Rebecca Benson, MD, PhD, University of Iowa

Additional information will be coming in the next few months.

PUBLICATION HIGHLIGHT

Medical Students' Attitudes and Experiences Regarding Persuasion of Patients by Physicians: Clarifying the Ethics of Shared Decision Making

John Muckler, James C. Thomas, Laura Shinkunas, Lauris C. Kaldjian

Journal of General Internal Medicine

Background: Ethical principles of autonomy and beneficence guide clinical decision making. Little is known about how clinicians prioritize these principles and integrate them with virtue ethics when assessing the ethics of persuasion.

Objective: Survey medical students about their attitudes and experiences regarding the use of persuasion by physicians in shared decision making.

Design: Cross-sectional, on-line survey.

Participants: Pre-clinical and clinical medical students at one US medical school.

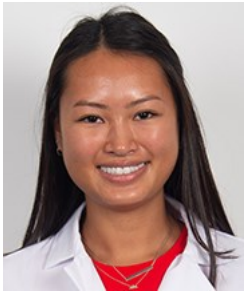
Main measures: Survey instrument contained 31 items including a three-part clinical vignette, attitudes toward persuasion and ethical principles, experiences observing or participating in persuasion, and demographic information. Bivariate and multivariable analyses were performed, including LASSO regression using a 30-point persuasion score derived from six items.

Key results: 237 students completed the survey (45% response rate). In general, 55.7% supported persuasion by physicians for the good of the patient's health. Nearly half supported persuasion for an at-risk cardiovascular patient who declines recommendations for walking or statin treatment; 64.1% supported persuasion for a patient with myocardial infarction who wants to leave the hospital against medical advice. While 70.0% believed persuasion is appropriate because it promotes beneficence and nonmaleficence, 16.9% believed persuasion is inappropriate because it disrespects patient autonomy. Most students (81.0%) had seen a good physician role model for persuasion, and 38.0% had willingly participated in persuasion. LASSO regression identified four items contributing positively to the persuasion score (belief that persuasion promotes beneficence/nonmaleficence, observation of a good role model, experience participating in persuasion, male gender) and two negatively (belief that persuasion disrespects patient autonomy, observation of inappropriate use of persuasion).

Conclusions: Medical students vary in attitudes toward persuasion of patients by physicians, and variations are associated with differences in ethical beliefs, clinical experiences, and gender. Education regarding the use of persuasion should address ethical justification, experience, and role-modeling-which can be encompassed by virtue ethics.

To read the full article, click here.

HUMANITIES CORNER



This month's spotlight is on **Amy A. Huang, a fourth year medical student.** Her creative work is a written reflection. She 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.

"The days are long, but the years are short" is how many people describe their medical training. I would add more detail about the days, weeks, months, seasons and, finally, years in the journey of how to be a human while being a medical student.

The days

Some days with a 4 AM wake-up call balanced by other days with a 2 PM dismissal. Every day is different, with no predictability. Each day is followed by another without much room to reflect, whether the highest of highs or the lowest of lows. Days where you look at your patient list and you see "Dcsd," passing a now empty room or one occupied by a new patient. Death briefly addressed by the team before we move on to round on the next patient. The day must go on. Other days, when your friends ask if you're saving lives, you realize you can answer, "Yes, I first assisted removing a breast cancer."

The weeks and months

Weekly agenda: clean, laundry, groceries, exercise, call your parents, catch up with friends, rotations. Each week is different; some are hard, some are easy, and each one has a different meaning. One week down, half of a 2-week rotation or assignment. Two weeks down, rotation or time on service over, and finally, a free weekend. Or half of a 4-week rotation, two to go. Four weeks, one month, a four-week rotation done. Six weeks down, a block over, and finally, a free weekend. Eight weeks down, 2 months. Ten weeks down, the longest block over. Twelve weeks, two blocks done, finally a free weekend, 3 months, a whole season.

HUMANITIES CORNER (CONTINUED)

The seasons

As the leaves change, you realize time is moving on even though you're still a medical student, still in rotations. The leaves fall, your friends' children are growing up and playing in leaf piles. The winter arrives, a wet cold and cloudy time, where you only want to stay inside. Another season is here, time is moving on, even though you're still a medical student, still in rotations. You watch your parents and childhood pets age. Some winters are filled with grief; as you watch your parents battle losing their parents, the grief goes along with the weather. Spring, finally spring, albeit in May when winter weather is over. Everything blooms, reminding you time goes on, even though you're still a medical student, still in rotations. Friends getting engaged, bridal showers, an excitement of what's to come this year. Summer, so hot and humid you feel like there's a warm wet blanket on you. The sun stays up, some days it's still up when you go to bed, time is moving on even though you're still a medical student, still in rotations. Another baby shower, friends becoming homeowners, more weddings.

The years

"The days are long, but the years are short."

BIOETHICS IN THE LITERATURE

⇒ Ben Hmido S, Abder Rahim H, Keller B, Daams F, Schakel M, Goslings JC, et al. Ethical pitfalls in AI-based predictive models in surgery. World J Surg. 2025 Sep 4. [Online ahead of print]

⇒ Bobier C, Omelianchuk A, Hurst DJ. The promise of xenotransplantation: A challenge. J Med Ethics. 2025 Jul 23; 51: 512-515.

⇒ Bordbar S, Mousavi SM, Samadi S. The association between burnout and medical professionalism in medical trainees: A systematic review. BMC Med Educ. 2025 Aug 19; 25: 1176.

⇒ Donohue SJ, Shakhsheer BA, Phung P, Kim AW, Zell M, Wightman SC. Surgeon perspectives on palliative care: Are we the barrier to better care? J Clin Ethics. 2025 Fall; 36: 279-285.

⇒ Eccles A, Pelly T, Pope C, Powell J. Unintended consequences of using ambient scribes in general practice. BMJ. 2025 Aug 27; 390: e085754.

"We are in danger of being swept up in the promise of ambient scribes, without considering wider and longer term effects."

(Eccles et al.)

⇒ Habib DRS, Naranjo C, Langerman AJ. Informed consent challenges: A mixed-methods study of hospital ethics consultations. J Clin Ethics. 2025 Fall; 36: 215-223.

⇒ Hatherley J. Are clinicians ethically obligated to disclose their use of medical machine learning systems to patients? J Med Ethics. 2025 Jul 23; 51: 567-573.

⇒ Hester DM, Salter EK, Lang KR, Diekema DS. Parents (of minors) are not surrogates: Acknowledging (finally) the unique moral space of parents. Theor Med Bioeth. 2025 Oct; 46: 419-432.

⇒ Kazemi S, Gholizadeh M, Rajaee M, Yousefnezhad M, Kakhki SK. Presenteeism, moral courage, and moral disengagement among nurses: A cross-sectional structural equation modeling study. BMC Nurs. 2025 Aug 28; 24: 1126.

⇒ Lemmens T. Euthanasia as medical therapy in Canada. Hastings Cent Rep. 2025 Jul-Aug; 55: 1.

⇒ Lizza JP, Lazaridis C, Nowak PG. Defining death: Toward a biological and ethical synthesis. Am J Bioeth. 2025 Sep; 25: 5-16.

⇒ Mac A, Lee Y, Zhang S, Nurunnabi ASM, Englesakis M, Devon K. A scoping review on goals of care discussions in surgery: How are we doing and how can we do better? World J Surg. 2025 Aug 23. [Online ahead of print]

⇒ Meisenberg BR. Empathy decline during medical training: Insights from a novelist. J Gen Intern Med. 2025 Aug; 40: 2703-2705.

"If clinical competence is the main goal of medical training, empathy/compassion sustenance must be regarded as essential for that competence."

(Meisenberg)

BIOETHICS IN THE LITERATURE (CONTINUED)

⇒ Mertens M, Clarke A. Genetic tests as prophecy: Understanding self-defeating and self-fulfilling mechanisms in (predictive) genetic testing. Eur J Hum Genet. 2025 Aug; 33: 1051-1056.

⇒ Moore B, Schlagman S, DiNoto LE, Kaufman DC, Mercado N, Nabozny MJ, et al. "Don't tell them anything": Should surrogate decision-makers be allowed to withhold information from other family members or prevent them from visiting with a patient? HEC Forum. 2025 Jul 2. [Online ahead of print]

⇒ Nair-Collins M. The uniform determination of death act is not changing. Will physicians continue to misdiagnose brain death? Am J Bioeth. 2025 Sep; 25: 44-55.

⇒ Peterson AS, Pilkington B. Balancing objectivity and humanity: Ethical challenges and considerations in surgical candidacy decisions. HEC Forum. 2025 Aug 31. [Online ahead of print]

⇒ Pope TM. Compliance with brain death determination laws, the UDDA, and the dead donor rule. Am J Bioeth. 2025 Sep; 25: 59-61.

⇒ Purvis Lively CL. Creating barriers to healthcare and advance care planning by requiring hospitals to ask patients about their immigration status. HEC Forum. 2025 Sep; 37: 357-372.

⇒ Randall P, Gligorov N. The volitional approach to surrogate decision making. Theor Med Bioeth. 2025 Aug; 46: 297-315.

⇒ Shea M. The ethical standard for end-of-life decisions for unrepresented patients. Am J Bioeth. 2025 Sep; 25: 74-85.

⇒ Song Z. Paying primary care more-will it work this time? JAMA. 2025 Sep 8. [Online ahead of print]

⇒ Stephenson KM, Schwartz NRM, Diekema DS. Ethics of lifestyle counsel alone in a GLP-1 era. JAMA Pediatr. 2025 Sep 22. [Online ahead of print]

⇒ Zhuang H, Liang L, Acuna DE. Estimating the predictability of questionable open-access journals. Sci Adv. 2025 Aug 29; 11: eadt2792.

"Questionable journals threaten global research integrity, yet manual vetting can be slow and inflexible. Here, we explore the potential of artificial intelligence (AI) to systematically identify such venues by analyzing website design, content, and publication metadata."

(Zhuang et al.)

BIOETHICS IN THE NEWS

- ⇒ My patient almost quit a clinical trial to save her job. STAT News, September 24, 2025.
- ⇒ Psychiatric hospitals turn away patients who need urgent care. The facilities face few consequences. ProPublica, September 22, 2025.
- ⇒ Organ transplant group faces shutdown after safety problems. The New York Times, September 18, 2025.
- ⇒ Dueling approaches to infertility vie for Congress' attention. NBC News, September 17, 2025.
- ⇒ Pig organ transplants may pose a dilemma for some Jews and Muslims. The New York Times, September 16, 2025.
- ⇒ Thousands remove themselves from Arizona's organ donor registry. AZ Family, September 16, 2025.
- ⇒ Ready or not, the digital afterlife is here. Nature, September 15, 2025.
- ⇒ Far more authors use AI to write science papers than admit it, publisher reports. Science, September 12, 2025.
- ⇒ A surgical team was about to harvest this man's organs—until his doctor intervened. KFF Health News, September 12, 2025.
- ⇒ California passes bill allowing omission of patients' names from abortion pill bottles. The New York Times, September 11, 2025.
- ⇒ Can you say no to your doctor using an AI scribe? The Conversation, September 9, 2025.
- ⇒ Bringing AI to medicine requires philosophers, cognitive scientists, and ethicists. STAT News, September 9, 2025.
- ⇒ The strange history of the anti-vaccine movement. BBC, September 7, 2025.
- ⇒ In Canada, 'medical aid in dying' has become a leading cause of death. Boston Globe, September 3, 2025.
- ⇒ The Nuremberg Code isn't just for prosecuting Nazis—its principles have shaped medical ethics to this day. The Conversation, August 29, 2025.

BIOETHICS OPPORTUNITIES

UPCOMING

⇒ Using Narrative Medicine to Refocus Clinical Documentation on the Patient Story, Wednesday, October 8, 2025, Free event with a Zoom option.

⇒ Pediatric Pain & Palliative Care Annual Conference, Thursday, November 6, 2025, 8:00am-4:00pm, Radisson Hotel and Conference Center, Coralville, Iowa

ONGOING

⇒ American Journal of Bioethics: YouTube channel containing previous webinars

⇒ Children's Mercy Kansas City: Pediatric Ethics Podcast series

⇒ Consortium on Law and Values in Health, Environment & the Life Sciences: Events

⇒ The Hastings Center: Webinars and Events

⇒ *Health Ethics* podcast with host Bryan Pilkington, PhD (Hackensack Meridian School of Medicine): Find on Google Podcasts, Spotify, Apple Podcasts, and Audible.

⇒ The MacLean Center for Clinical Medical Ethics: YouTube channel containing previous lectures

⇒ Michigan State University Center for Bioethics and Social Justice: Recorded Webinars

⇒ Office for Human Research Protections Luminaries Lecture Series

⇒ University of Minnesota Center for Bioethics: Events

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.