Medical Ethics Essay, Research Paper

Medical Ethics

? Bioethics comprise every possible aspect of health care, medical, moral, social, political, religious, legal and financial? (Weiss 3). This includes the questions raised by new research. It takes a look at the results of that research that is used on patients. It takes into consideration contemporary ideas of personal freedom and human dignity. It deals with growth in medical services available in the United States and the sky rocketing cost. Bioethics also deals with the medical advances in technology that has reshaped traditional medical ethics.

Medical ethics have changed drastically over a period of years. From old commandments to new commandments, guidelines that provide structural framework, classic experiments that challenge that framework, or even how things are defined in medical ethics. ?Medical progress goes on, and the perils of progress must be heeded? (Leone 165).

Changing times have in turn changed our codes of ethics. There are five old commandments of ethics and five new commandments of ethics. These commandments come from many years of heavily advised dictates from various people. A commandment by definition is, ? … a dictate or a strongly advised piece of advice? (Halsey 201). The first traditional commandment is, ? Treat all human life as of equal worth? (Singer 190). This statement is very difficult to follow; almost no person believes this statement whole-heartedly. The statement makes more sense on paper or just being heard, but its application in life is almost impossible to ensure. In comparison to the first old ethic, the first new ethic states, ?Recognize that the worth of human life varies? (Singer 190). This statement allows for variation and livability in society. It gives way for someone to say, if a person is a vegetable, has no vital capabilities, this person?s life is of no worth anymore. Without this sort of change in today?s advancing civilization, it would make it ethically wrong to ?pull the plug? (Rothstein 1698.)

The next commandment of old ethics is, ? Never intentionally take innocent human life? (Singer 192). If a doctor or any health care professional just stood by during the birth of a child and both the child and the mother were dying, how could that doctor stand there and watch both the mother and the infant die without taking some method of action. However, if that physician were to save either patient while sacrificing the life of the other, that health care professional would be considered unethical and scorned by the standard of this ethical commandment. In comparison, the new commandment states, ?Take responsibility for the consequences of your decisions?(Singer 195). By the token of this declaration a physician can make a choice based on his/her best judgment, yet; be held accountable for their actions. This gives a doctor the power to use his/her best judgment and knowledgeable skills, to do what they believe is best for the patient. This statement allows for a person?s right to free will, even a person who is a Christian may more fully agree with this statement just for the pure reason that they want to believe more in God?s promise of free will in their life.

Commandment number four states,? Be fruitful and multiply? (Singer 198). This biblical injunction has been a part of Christian ethics for thousands of years. ? Augustine said that sexual intercourse without procreation ` turns the bridal chamber into a brothel?? (Singer 198). Some laws in America concerning contraceptives survived until the mid- 1960?s when the Supreme Court declared them invasion of privacy (Madsen 325). The revised commandment number four, ?Bring children into the world only if they are wanted? (Singer 199), allows for population control as well as prevention of children who were never wanted and not loved. From 1930 when the population was two billion to today where the population is over five billion and is expected to rise above eleven billion by the middle of the next century. With these kinds of statistics revised dictates, such as this fourth one, are essential.

The final of these five old commandments state, ? Treat all human life as always more precious than any non-human life? (Singer 201). If we compare a severely defective human infant with a non-human animal, a dog or a pig, for example, we will often find the non-human to have superior capacities, both actual and potential, for rationality, self-consciousness, communication, and any other that can plausibly be considered morally significant? (Singer 201). This remark was made during the Baby Doe controversy of the Regan administration. However, in Germany an organization called Lebanshilfe, an organization for parents of intellectually disabled infants has adopted a set of Ethical Foundational Statements one of which is, ?The uniqueness of human life forbids any comparison – or, more specifically, equation – of human existence with other living beings, with their forms of life or interests? (Singer 202.) The revised counterpart to this commandment states, ? Do not discriminate on the basis of species? (Singer 202). This revised ethic is the one most rejected; it contradicts the fact all human life is of worth and is more sensitive in most people. This sets forth the same message that a sexist or racist would hate, because you are not part of my group you are inferior. These ethical commandments or dictates provide a framework for today?s unstable society.

The American Medical Association has devised a set of codes designed to guide researchers in their conduct during experimentation. The American Medical Association?s Ethical Guidelines for Clinical Investigation include:

1. The voluntary consent of the human subject is absolutely essential.

2. The experiment should be such as to yield fruitful results for the good of society, unprocurable by other methods or means of study, and not random or unnecessary in nature.

3. The experiment should be so designed and based on the results of animal experimentation and a knowledge of the natural history of the disease or other problem under study that the anticipated results will justify the performance of the experiment.

4. The experiment should be so conducted as to avoid all unnecessary physical and mental suffering and injury.

5. No experiment should be conducted when there is an a priori reason to believe that death or disabling injury will occur; except, perhaps, in those experiments where the experimental physicians also serve as subjects.

6. The degree of risk to be taken should never exceed that determined by the humanitarian importance of the problem to be solved by the experiment.

7. Proper preparations should be made and adequate facilities provided to protect the experimental subject against even remote responsibilities of injury, disability or death.

8. The experiment should only be conducted by scientifically qualified persons. the highest degree of skill and care should be required through all stages of the experiment of those who conduct or engage in the experiment.

9. During the course of the experiment the human subject should be at liberty to bring the experiment to an end if he has reached the physical or mental state where continuation of the experiment seems to him to be impossible.

10. During the course of the experiment the scientist in charge must be prepared to terminate the experiment at any stage, if he has probable cause to believe, in the exercise of good faith, superior skill, and careful judgment required of him, that a continuation of the experiment is likely to result in injury, disability, or death to the experimental subject (Levine 171-74)

Such codes form a conceptual framework for the protection of human subjects. However, these guidelines are very vague for use in actual practice; clearly human experimentation includes much more than just the technical aspects. It includes mental, physical and emotional perspectives that can not be covered on a sheet of paper; the purpose of a structured written set of guidelines is totally to provide a rulebook by which researchers follow in order to be ethically correct. A researcher gains information through experimentation and they must have these guidelines (McKenzie 287). An example of how these guidelines can assist, but not be of complete structure would be the cancer injections. The Sloan-Kettering Institute in New York is one of the country?s preeminent cancer centers. During the 1950?s and 1960?s they conducted a series of experiments to determine if there was a relationship between cancer and the immune system. The experimental hypothesis was that, ? the immune system of cancer patients is depressed with respect to that specific disease? (Levine 172). The scientists developed a program to test the hypothesis; it was to inject malignant cancer cells into human subjects. We do not know whether the volunteers were really being experimented on under strictly voluntary conditions or not, but that is the problem with written guidelines, they work on paper, but not necessarily in life (Levine 173).

Must we experiment on human beings? If so, what human experiment categories are ethically correct? Human experimentation falls into three divisions, the first of which is, ? Experiments that the researcher carries out on him or herself ? (Weiss 34). A traditionally excepted example of this was conducted over one-hundred years ago by a scientist set on disproving the fact germs cause disease, The way he decided to prove his idea was to swallow a beakerful of cholera germs. However, he had a natural immunity to cholera; he did not become ill. It was concluded that he had a natural immunity, because it was later proven that cholera is a very harmful germ and if ingested it will cause a person to become ill (Weiss 35).

The second category states, ? Experiments carried out on the sick in the belief that the experiment will help them, or on the healthy in the belief that the experiment will keep them well? (Weiss 35). The classic procedure that demonstrates this category is the experiment of the French scientist Lois Pasteur. In 1885, a distraught mother brought her nine-year old son to Dr. Pasteur. A dog with rabies had bitten the boy, and the mother had heard that Pasteur had developed a vaccine that prevented rabies in dogs. The mother begged Dr. Pasteur to administer the vaccine; he was hesitant and then he obeyed the mother?s wishes and injected the boy, the boy survived the deadly rabid dog bite (Weiss 35).

The third group of ethical experimentation is,? Those conducted on the sick or healthy with no intention of helping those people directly? (Weiss 36). These tests are conducted to gain information at a later time. New prescription drugs and new-products fall under this category. These research guidelines have been in existence for years upon years and serve a very practical purpose, to protect everyone who may become sick or of life threatening condition, with these guidelines a doctor can try to aide a person within these specifications.

The legal aspects of ethics are definitions. How things are defined in ethical terms; a few of the more controversial definitions include brain death, vital signs, death itself, and what a person or human being is. Brain death can be defined as,? when no oxygen is reaching the brain? or more complexly as,? … the cessation of brain activity at both cortical and lower levels even though heart and respiratory functions can be maintained mechanically…? (Madsen 324, Hudak 371.) However, brain death can be put into more than thirty sets of criteria. (Infopedia) Death can be defined in two ways in the ethical standpoint, first as,? The cessation of life; the ceasing to exist? or as ? the total stopping of circulation of blood and cessation of animal and vital functions? (Singer 21). Death is a very important definition in ethics, with all of our technological advancements we can sustain a person artificially and we need to be able to tell when all hope is lost or a person is dead. A vital sign is,? Temperature, pulse, and respiration?s in a person? (Du Gas 158). A vital sign can be,? … increasing anoxia; the pupils become dilated and fixed. Low blood pressure and elevated temperature, and rapid respiration rate are often seen also as a sign for a nurse in a recovery situation? (Wagman 337) Medical progressions have significantly increased life expectancy and have also improved quality of life in numerous ways. From organ transplants that save thousands of lives to new machines that can detect life-threatening problems. Organ donors provide the very rare and greatly needed, very rare matches needed for organ transplants. ? Cadaver donors grant permission to donate their organs after they have died. Sometimes permission is granted by the family of the deceased after their relative has died? (Weiss 18). Cadaver donors make up over three fourths of the donors (Hudak 370). There are also the living donors. As the name indicates, a living related donor is a donor from within the family. The possibility of having a HL-A compatible donor, a tissue match, from within the family should be explored for every potential recipient. The possible combinations include:

A 4-antigen match, also called an HL-A identical match, which would have to be a sibling of the potential recipient; a 3-antigen match, which is uncommon since the antigens are usually inherited in pairs or haplotypes; and a 2-antigen match, which is the most frequently seen compatibility. The presence of four completely different antigens is considered a complete mismatch, and is not a desirable situation for a transplant to be performed, since no similarity exists between the tissues (Hudak 370).

Once a potential donor is identified, he/she has a thorough medical evaluation to determine that he/she is free of other disease, that he/she has two kidneys, and that

donation could no obvious way jeopardize his/her well being. Once this evaluation is successfully completed, a living relative transplant may be performed (Hubak 370). A second type of medical advance is, ? Emission Tomography- this allows doctors to tell in which parts of the brain blood is and is not flowing? (Singer 43). If blood is not flowing to the cortex, then- even though the brain stem might still be functioning and so the patient would not be brain dead and would also never regain consciousness. (Singer 43) This allows a doctor to conclude whether a patient has a chance to recover from a vegetative state or not. Doctors use this technique to assess if surgery would be a possibility or whether this person has no chance of survival; they can establish a base for a family so that they can make appropriate decisions.

Invitro fertilization is another form of medical advance that has changed the thinking of traditional ethics. Invitro fertilization is when sperm is taken from a male donor and an egg is taken from a female donor; the sperm is then implanted into the egg and then placed into the women?s uterus. There are many ethical standpoints on invitro fertilization, whether it is right to create a child by manipulating mother nature and using medical technology. Should we use medical science to change what comes naturally in nature (Wall 467)? Also, is invitro fertilization a safe method, on many occasions more than one sperm is placed into the egg, creating multiple pregnancies? With the recent birth or the sextuplets it leaves some in the medical community wondering whether we have gone to far. ? When you have multiple births you have greater risk for complications, it leaves me wondering if the risk is worth it or not?? (Jones R.N.)

? More progress has been made in medical science in the first seventy years of this century than in the entire previous history of man – and the door to knowledge has hardly begun to open? (Collin 164). With so many new inventions and technologies being developed every day the more each person needs to be aware of how our medical ethics are being changed and what is being done to cope with those changes. Do new codes, dictates or commandments, and guidelines required to provide a structure in the medical community need to be developed? What types of precautions are being taken to check out the experiments being performed? Medical ethics are not just an important factor they are an essential factor in our changing contemporary society. The future of this generation?s children and grandchildren depend on what specifications are being made in the present.

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