What is ethics?

- Ethics involves reflecting on what we value and translating those values into action.
- Ethics examines questions like:
  - What is good
  - What it means to be a good person
  - What is right or wrong to do

Clinical ethics involves questions that arise related to patient care.
Why is ethics important?

- Healthcare involves ethical decisions
- We sometimes become disconnected
- We sometimes encounter ethical dilemmas
End-of-life care

What should the goals of end-of-life care be?

Fighting to Honor a Father’s Last Wish: To Die at Home

The Best Possible Day
Dying in America

- Death no longer “just happens”
- Have our attitudes changed?
  - Technological optimism
  - “Rule of rescue”
  - Low use of advance directives
  - Pew survey
Dying in America

Death no longer "just happens"

Have our attitudes changed?

- Technological optimism
- "Rule of rescue"
- Low use of advance directives

Pew survey

Views About End-of-Life Treatment Over Time

% of U.S. adults

<table>
<thead>
<tr>
<th></th>
<th>1990</th>
<th>2005</th>
<th>2013</th>
<th>Diff. 90-13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Which comes closer to your view?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There are circumstances in which a patient should be allowed to die</td>
<td>73</td>
<td>70</td>
<td>66</td>
<td>-7</td>
</tr>
<tr>
<td>Doctors and nurses should do everything possible to save the life of a patient in all circumstances</td>
<td>15</td>
<td>22</td>
<td>31</td>
<td>+16</td>
</tr>
<tr>
<td>Don’t know</td>
<td>12</td>
<td>8</td>
<td>3</td>
<td>-9</td>
</tr>
</tbody>
</table>

Pew Research Center

NOV. 21, 2013

Views on End-of-Life Medical Treatments
Growing Minority of Americans Say Doctors Should Be Allowed to Help Patients Die
Core bioethical principles

**Beneficence**
Promoting the well-being of the patient

**Non-maleficence**
Protecting the patient from harm

**Respect for autonomy**
Respect for a patient’s personal agency and dignity

**Justice**
Fair distribution of resources and due process

**Integrity**
Trustworthiness, professionalism and character
Principles in practice

- It’s OK to stop (autonomy)
  - But patients need information
- Balance quantity and quality of life (beneficence/non-maleficence)
  - Access to palliative care and hospice
- As a system, structure payments to support this (justice)
A middle-aged woman with ESRD from diabetic nephropathy was found unresponsive at home. Emergency Medical Services was called and noted a blood sugar of zero. The patient was treated and hospitalized. Over the next 48 hours, the patient received intensive treatment and regained minimal consciousness. A complete neurological examination determined the patient had sustained severe brain damage from hypoglycemia. Her odds of survival were about 50%, but her likelihood of regaining significant neurologic function were close to zero. Despite communication of this poor prognosis, the daughter, the patient’s healthcare surrogate, continued to request dialysis. The treating nephrologist felt that dialysis should not be continued on the grounds of “medical futility.”
The Concept of Futility

- History
- The Rise (1980s)
  - Advanced life support
  - Provider integrity
- The Fall (1990s)
  - Definitional problems
  - Legal safe harbor
Overall, very helpful

Regarding futility disputes, not very helpful

- Rec. 5: “**If appropriate**, forgo (withhold initiating or withdraw ongoing) dialysis for patients with AKI, CKD, or ESRD in certain, well-defined situations [e.g., ‘irreversible, profound neurological impairment such that they lack signs of thought, sensation, purposeful behavior, and awareness of self and environment’].”
- Rec. 6: “**Consider** forgoing dialysis for AKI, CKD, or ESRD patients who have a very poor prognosis or for whom dialysis cannot be provided safely.”

- Discretionary language suggests lack of consensus (Tomlinson, 2007)
Enhancing Communication and Coordination of Care: A “Third Generation” Approach to Medical Futility

Michael P. Panicola, Ph.D.
Corporate Director,
Ethics and Social Responsibility
SSM Health Care
St. Louis
Michael_Panicola@ssmhc.com

Ron Hamel, Ph.D.
Senior Director, Ethics
Catholic Health Association
St. Louis
rhamel@chausa.org
Strategies for resolving conflict

- Advance care planning
- Training in “the conversation”
  - E.g., http://www.epec.net/
- Time-limited trials
- Professional standards
- Ethics consultation
The Best Possible Day

By ATUL GAWANDE  OCT. 5, 2014

See the original Magicmount Photos
Thank you!