Bioethics in Pediatrics

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The sense that objective insight is gained through detachment is a hallmark of the scientific process.

The role of objectivity needs to be balanced by the realization that without our ability to walk-in-the-shoes of another, we may exist in a world of self-centered ignorance, depending largely on rationalization to make decisions which require a measure of compassion.

The increasing frequency with which bioethical issues arise in the medical and surgical care of pediatric patients suggests a need for a working knowledge of the field for the clinical physician.

Purpose:

- to orient students to the bioethics component of the pediatric core curriculum

Goals:

- To help you become more aware of the underlying structure and means of ethical decision making
- To provide you with practical insight into your own personal ethical principles and ideals
- To provide you with some knowledge, skills and attitudes needed toward clinical competence in pediatric (and medical) ethics

Ethical considerations often accompany decision making for:

- fetuses
- infants
- children

Quality of life, withholding/withdrawal of care, informed consent, child abuse, and economics rank high.

Preferred teaching methods are case-based discussions.
**Ethical Principles**

- **Beneficence**
  - benefit the patient-life is sacrosanct
- **Non-maleficence**
  - do no harm unless balanced by the hope for improvement.
- **Justice**
  - result in an even handed allocation of scarce resources- characterized by fairness
- **Autonomy**
  - respect others as equal partners in making a decision

**Solving Moral Problems**

- In general, the solution to a problem will involve balancing and prioritizing several competing values
- Moral principles can be thought of as a set of rational "equations"
  - attempt to sort conflicting values by assigning a higher priority to one over the other

**Dealing with Moral Problems**

- When dealing with a moral problem, it is helpful to have a strategy to apply in resolving the conflict:
  - define the problem
  - collect as much information as you can
  - identify important values and principles
  - reflect on personal motive and intention
  - prioritize

**Defining the Problem**

- Define the problem so the dilemma is clearly understood by all parties:
  - determining whether a problem is on the one hand a matter of poor communication, failure to appreciate cultural or religious differences, or represents a genuine difference in values and principles means closely examining the issues involved

**Collecting Information**

- Collect as much information about the problem as you can before beginning to think about a solution:
  - accurate, comprehensive information is important
  - even the facts can prove to be contentious
  - equally important is to understand personal, religious, economic and cultural beliefs which are key components of the context framing the conflict

**Identifying Values and Principles**

- Identify the important values and principles for you and the others who are involved:
  - values are grounded in beliefs which may be held consciously or unconsciously and are sometimes highly charged with emotion
  - belief in God may predispose one to value human life as the most important value
  - beliefs have a legitimate place in making a decision
Reflecting on Motives and Intentions

- Reflect on personal motives and intentions in light of different courses of action and consequences to self, others and society:
  - motive can be distinguished from intention in that motive can be thought of as the "why", and intention the "what"
  - what outcome is wanted and why is this desirable?
  - both of these questions apply to the individual’s character

Prioritizing Conflicting Values

- Prioritize conflicting values and make a responsible decision
  - consider that deciding to NOT make a decision represents one form of choice which has real consequences

Being Consistent

- Consistency, the absence of contradictions, has sometimes been called the hallmark of ethics:
- Ethics requires that there be consistency:
  - among our moral standards and in how we apply these standards
  - between our ethical standards and our actions, as well as among our inner desires
  - between how we treat ourselves and how we treat others

Ethical Problem Solving

- Ethical Problem Solving
  - What benefits and what harms will each course of action produce, and which alternatives will lead to the best overall consequences?
  - What moral rights do the affected parties have, and which course of action best respects those rights?

Ethical Problem Solving

- Which course of action treats everyone the same, except where there is a morally justifiable reason not to, and does not show favoritism or discrimination?
- Which course of action advances the common good?
- Which course of action develops moral virtues?

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FUTILITY

VS

PATIENT’S BEST INTERESTS
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- Patient’s best interests rest on the balancing of factors such as a low chance of survival with a high chance of severe disability
- Decision making must embrace the situation of the individual patient under discussion and must avoid stereotyped or “homogenized” decisions
- “close-up ethics” vs “distant ethics”

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- Ongoing evaluation of the condition and prognosis of the patient is essential, and the physician as the spokesperson for the health care team must convey this information accurately and openly to the parents
- Parents should be active participants in the decision making process concerning the treatment of severely ill infants and children

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- Humane care must be provided to all infants and children, including those from whom specific treatment is being withheld
- Parents should be encouraged to participate in the care of their child as much as they wish

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- If the viability of the infant or child is unknown, or if the curative value of the treatment is uncertain, the decision to initiate or continue treatment should be based only on the benefit to the patient that might be derived from such action

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- It is inappropriate for life-prolonging treatment to be continued when the condition is incompatible with life or when the treatment is judged to be futile

LSMT

- Life-sustaining medical technology (LSMT) are all interventions that may prolong lives of patients
- Beneficence suggests that clinicians justify the use of treatments based on the benefits they provide, not simply on the ability to employ them – nonmaleficence reminds us to consider potential harm to patients
- Self-determination or autonomy accepts the likelihood that different persons may judge benefits differently
Bioethics in Pediatrics: Case #1

• Newborn infant with Trisomy 18
  – Poor-to-nonexistent suck
  – Hypoventilation
  – PDA and moderate muscular VSD

Bioethics in Pediatrics: Case #2

• Mother calls, that due to discovery of a Long QT index case in family
  – her 2 kids and husband are tested and are (+)
• The boys are interscholastic football players
• She does not plan on telling the school and wants to be assured that you won’t either

Bioethics in Pediatrics: Case #3

• 3 mo old Asian female s/p St. Jude MVR, multiple CVAs, presents in extremis with recurrent thrombosed MV
  – parents refuse streptokinase.

Bioethics in Pediatrics: Case #4

• Newborn thoracopagus twins, shared atria, ventricles
  – one with CAVC and PS
  – the other with critical AS, VSD, small LV, and coarctation of the aorta
• Only one of the infants can be saved if separated
• Both will die if left as is

Guiding Principles

• Ethics contributes to high quality patient care and professional behavior
• Knowledge of ethics enables medical students to become better practitioners of medicine
• Ethics can be taught, learned, and evaluated along with the general body of medical knowledge