

Ethics and Medics

A CATHOLIC PERSPECTIVE ON MORAL ISSUES IN THE HEALTH AND LIFE SCIENCES

May-June, 1977

Vol. 2, No. 3

Medical Ethics' "Dirty Dozen"

The following 12 are candidates for the most difficult moral issues in medicine.

A. Many difficulties involve the question of what the physician ought to do with certain information gained within the context of the doctor-patient relationship. The physician has from time immemorial been understood as the servant of his patient, always placing the good of his patient above all other considerations, obliged to respect the confidential nature of the information obtained within this privileged setting. When (if ever) should he disclose certain pieces of information contrary to the wishes of his patient?

ONE. Should a genetic counselor who knows that his client is at serious risk for transmitting a severe genetic defect inform the client's prospective spouse of this fact? Should he warn his patient's siblings that they too are at risk for giving birth to a defective child?

TWO. Should a psychiatrist warn individuals whom he believes are endangered by his patient's paranoid delusions?

THREE. Should a genetic counselor ever withhold information he knows his client will use to decide in favor of an abortion? What if the information in question is that the child is female and the counselor knows that the couple want desperately to have only one child and that a boy?

B. Other questions arise over the level of individual freedom permissible in a good and just society.

FOUR. Ought a person have the legal right to sell one of his kidneys should he choose to do so?

FIVE. Does an individual at risk for transmitting a genetic defect ever have a responsibility not to procreate? Should a law be passed making it illegal for him to have children?

SIX. Is it ever morally right to hospitalize against his will a mentally ill adult who is no danger to others or to himself?

C. The area of human experimentation contains many ethical difficulties. Especially problematic is the requirement of free and informed consent.

SEVEN. If a fetus is going to be aborted anyway, is it ethical to engage in harmless non-therapeutic experimentation on it? What if the experimentation might be useful in saving other fetal lives, such as experiments involving an artificial placenta?

EIGHT. Is it ever morally permissible to engage in experimentation on children who cannot be expected to benefit from the experiment? How old must a child be before he is able to consent to such experimentation?

NINE. In view of the nature of a total institution like a prison, can inmates ever be said to give free consent to non-therapeutic experimentation?

D. Questions of cost/benefit analysis pose peculiar problems in deciding how to allot scarce medical resources. Can we ever legitimately decide on the value of a human being, and should we take those determinations into consideration when deciding how to allocate our resources?

TEN. In deciding whether and to what extent to treat a defective newborn, should estimates of the quality of the child's life be taken into consideration? Estimates of cost?

ELEVEN. Assuming a specified amount of funds to spend on medical care, should priority be given to crisis care of those who are sick or to the maintenance of the health of those who are well? Should the deciding factor be the number of lives that can be saved by either approach?

TWELVE. If there are too few renal dialysis machines to treat all prospective patients, should consideration be given to their moral worth in deciding whom to test? Should a self-sacrificing social worker be given preference over a convicted felon? Should a person's usefulness to

(Continued on page two)