BIOETHICS AND HUMANITIES NEWSLETTER



PROGRAM IN BIOETHICS AND HUMANITIES

June 2014

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

Introducing a new Ethics Consult Service at UIHC

This new service is a resource for patients, family members, or health professionals at UIHC who would like help addressing an ethical question or problem related to a patient's care.

An Ethics Consult involves trained ethics consultants who respond to requests for help from individuals directly involved in a patient's care at UIHC.

Ethics Consults are advisory and can be requested to:

- Identify ethical problems in the care of a patient
- Clarify ethical problems through a careful analysis of the ethical beliefs and values involved
- Promote discussion of ethical beliefs and values with persons directly involved in a patient's care
- Help resolve ethical problems through a process of shared decision-making

More Details About the Service

Upcoming Events

For a listing of upcoming events related to bioethics and humanities, please click here.

Quotation of the Month

To understand human actions, we need the fullness of detail the narrative affords; to judge these actions and choose among them, we need to prescind from these particularities. We are compelled, therefore, to cultivate both accounts – the standard and the narrative – at least in part, for each grasps some part of the unbelievably complex fabric of moral reality.

- Edmund Pellegrino (1977)

Program Highlight

Christian Simon, a primary Faculty member in the Program, along with David Klein and Helen Schartz in the Law, Health Policy, and Disability Center received funding for one year from the Rural Health Research Center and VA CADRE for a project titled "Electronic consent for rural VA patients: A pilot project".

Interactive multimedia has the potential to improve the efficiency and effectiveness of informed consent processes for VA-based research, particularly with rural VA patients. This pilot project will provide novel data on the feasibility and potential value of implementing interactive multimedia to support VA clinical trial recruitment, with emphasis on participation of rural and highly rural VA patients who are eligible for clinical research.

Clinical Research Ethics Consultation 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 individuallevel research results; community engagement processes; and more. For more information, please click here.

UI History of Medicine Society Highlight

The University of Iowa History of Medicine Society and the Iowa Women's Archives invite you to hear:



Greta Nettleton
University of Iowa Press author and historian
Resident of NY

Nineteenth century Davenport as a Hotbed of Controversial Alternative Medical Schools

Thursday, June 19, 2014 5:30pm-6:30pm 2117 MERF

Publication Highlights



Practicing Medicine and Ethics: Integrating Wisdom, Conscience, and Goals of Care

by Lauris Kaldjian (a Faculty member in the Program)

To practice medicine and ethics, physicians need wisdom and integrity to integrate scientific knowledge, patient preferences, their own moral commitments, and society's expectations. This work of integration requires a physician to pursue certain goals of care, determine moral priorities, and understand that conscience or integrity require harmony among a person's beliefs, values, reasoning, actions, and identity. But the moral and religious pluralism of contemporary society makes this integration challenging and uncertain. How physicians treat patients will depend on the particular beliefs and values they and other health professionals bring to each instance of shared decision making. This book offers a framework for practical wisdom in medicine that addresses the need for integrity in the life of each health professional. In doing so, it acknowledges the challenge of moral pluralism and the need for moral dialogue and humility as professionals fulfill their obligations to patients, themselves, and society.

Resource Highlight

The Belmont Report

The Belmont Report was created by the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, who were directed to consider: (i) the boundaries between biomedical and behavioral research and the accepted and routine practice of medicine, (ii) the role of assessment of risk-benefit criteria in the determination of the appropriateness of research involving human subjects, (iii) appropriate guidelines for the selection of human subjects for participation in such research and (iv) the nature and definition of informed consent in various research settings. The Belmont Report summarizes the basic ethical principles and guidelines for research involving human subjects identified by the Commission in the course of its deliberations.

Bioethics in the Literature

- Edwards KT, Huang CJ. Bridging the consumer-medical divide: How to regulate direct-to-consumer genetic testing. <u>Hastings Cent Rep</u>. 2014 May;44(3):17-9.
- Wolfson D, Santa J, Slass L. Engaging physicians and consumers in conversations about treatment overuse and waste: A short history of the Choosing Wisely Campaign. <u>Acad Med</u>. 2014 Apr 29 [Epub ahead of print].
- You JJ, Fowler RA, Heyland DK, Canadian Researchers at the End of Life N. Just ask: discussing goals of care with patients in hospital with serious illness. <u>CMAJ</u>. 2014 Apr 1;186(6):425-32.
- Brody H. Chauncey Leake and the development of bioethics in America. <u>Kennedy Inst Ethics J</u>. 2014 Mar;24(1):73-95.
- Faden RR, Beauchamp TL, Kass NE. Informed consent, comparative effectiveness, and learning health care. <u>N</u> Engl J Med. 2014 Feb;370(8):766-8.
- Hull SC, Berkman BE. Grappling with genomic incidental findings in the clinical realm. <u>Chest</u>. 2014 Feb;145(2):226-30.
- Norton SA, Metzger M, DeLuca J, Alexander SC, Quill TE, Gramling R. Palliative care communication: Linking patients' prognoses, values, and goals of care. <u>Res Nurs</u> <u>Health</u>. 2013;36(6):582-90.

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