



Next Meeting: Thurs 11/13 UCLA Med Center

B level, Room B124 A/B RSVP (310) 794-6219

http://www.uclahealth.org/body_med.cfm?id=572

http://www.uclahealth.org/body_med.cfm?id=572 for maps & directions

5:15 PM dinner, 6:00 Tour of Medical Center

6:45--9 PM Meeting Agenda

--role of ethics consultation II (S. Finder)

--teaching bioethics in Swaziland (K. Gorlitsky)

--cases from the field

--consortium business, telecommuting, etc

--SCBCC got a POLST Grant! (update)

Save the Dates of Future SCBCC Meetings

Wed. Jan. 21 Thurs. March 12 Wed. May 20

Brief Minutes: Sept 23 Meeting

A lively discussion regarding the Bioethics Consults role in **determining capacity** was lead by Stuart Finder, PhD.

Some of the salient points made by various contributors to the discussion included:

--the capacity of all parties involved in a clinical problem should be assessed.

--the importance of the contribution of common sense approaches from those who know a patient best

- that different specialties judge capacity in different ways

-- that capacity should be evidence-based when possible.

The nuances of patient autonomy vs. patient respect was discussed and it was determined that, "Good ethics begins with good medicine" and vice versa. While it is in general most appropriate for a bioethics team to help close the ethics quality gap by bringing more parties to the table, sometimes a Good Samaritan intervention is needed if time sensitive care is thought to be essential. A review of ethics consultations made over eighteen months at UCLA, were noted to involve capacity determination.

Memories of Vicki Michel, JD include the observation that she was passionate about Bioethics and had mentored various committee members. She chaired the LA County Bar Association for many years and was described as a most knowledgeable attorney without an officious style, who will be clearly missed.

Another **case from the field** involving the birth and **resuscitation of a trisomy 18 infant** with severe cardiac abnormalities was discussed.

Dr. Kockler demonstrated the **new SCBCC website**.

Dr. Schneider and Dr. Wenger will apply for a **POLST grant** on behalf of SCBCC and hospitals interested in participating should contact them.

Weigh in with the Editor...

Editor-in -chief: Kendra Fleagle Gorlitsky, MD

(213) 201-2780

Contributing editors : Leah Ruslen, (USC Keck School of Medicine) Matt Calzetta (USC Keck School of Medicine)

Kyle Graham (UC Berkeley)

Upcoming Conferences

--UCLA Healthcare Ethics Center noon lectures

Wed. Ronald Reagan Aud. Rm B -130 (lunch)

Call Ethics Center 310 794-6219 for calendar

--Bioethics Institute Northridge HMC

Lunch provided, RSVP 213 201-2780

--**3rdWed** Cedars-Sinai Ethics Noon Conference

Harvey Morse Aud

<http://www.csmc.edu/13954.html>

11/19: Healthcare Reform after Presidential Politics: The Child Health System May Lead the Way, Neal Halfon, M.D., MPH Director UCLA Center for Healthier Children, Families & Communities

12/17: International Free Trade in... Human Organs of Human Misery? Alexander Capron, Professor of Law and Medicine, Co-Director Pacific Center for Health Policy and Ethics, USC

1/21: The Many Faces of Culture in Clinical Ethics Consultation, Mark Aulisio, Ph.D. Director Master's Program in Bioethics, Case Western Reserve University

Legal News

Controversial AB 2747 – Effective Jan 1, 2009

Assembly Bill No. 2747 is a new law requiring physicians to provide information for all legal end-of-life options when requested by terminally ill patients. If a physician does not agree to give this information, the patient must be referred or transferred to a healthcare provider who will. End-of-life information, as defined by AB 2747, comprises hospice care, prognosis with and without aggressive treatment, palliative care, and the patient's right to write advance directives and assign a surrogate. Patients also have the right to refuse life-sustaining treatment. Opponents of the bill argue that providing this option to patients is a beachhead for assisted-suicide proponents. Advocates counter that the bill simply ensures proper communication between patient and healthcare provider regarding end-of-life issues. (R. Miller suspects some important wording in this bill may have been gutted)

http://www.leginfo.ca.gov/cgi-bin/postquery?bill_number=ab_2747&sess=CUR&house=B

**--More Legal News:**

AB 3000 Physician Orders for Life-Sustaining Treatment (POLST) Provides for a new means to ensure patient wishes are honored regarding end of life treatment. www.finalchoices.org

AB 2565 requires hospitals provide a "reasonable amount of time" for next of kin to gather family at patient's bedside after brain death to accommodate special religious or cultural rituals. A copy of the hospital policy is to be provided to surrogate or next of kin when the potential for brain death is imminent.

Journal Watch

The results of a 5.5 year cohort **study addressing** the effects of **end-of-life discussions** on the nature of medical care for terminally ill patients was published in the 10/8/08 issue of JAMA concluded patients and their caregivers benefit from open discussion of end-of-life issues by a reduction of aggressive medical care. More aggressive medical care was associated with worse patient quality of life and increased risk of major depressive disorder in bereaved caregivers. <http://jama.ama-assn.org/content/vol300/issue14/index.dtl>

Bioethics Curriculum for Medical Schools

The AMA is developing a practical Guide to Clinical Ethics Decision Making in collaboration with medical school clerkship directors and other educators using case based analysis of patient care dilemmas faced during core clerkships. A meeting will be held at 10:30 and 2 pm, Nov 18 at Keck USC Medical School for input from interested and experienced parties. Call Dr. Pam Schaff if interested in participating. 323 442-2553

^NIH Study Regarding Ethics of Prescribing "Placebos" ^
10/25 issue of BMJ reports an NIH Study revealing approximately half of US internists and rheumatologists surveyed use over the counter analgesics, vitamins and sometimes sedatives and antibiotics. 62% perceive that practice as ethical. (One could question whether the term "placebo" is accurate since physicians described such recommendations as "potentially beneficial medicine or treatment" and very few reported using sugar pills or saline.)

http://www.bmj.com/cgi/content/full/337/oct23_2/a1938

Books in the Field

My Sister's Keeper, Jodi Picoult

Reviews a young person's struggle with her role as a sibling's organ donor

Jailhouse Memoirs of an OBGYN, Vilia Steir

Memoirs of a doctor who performed late abortions and was arrested for manslaughter

Bioethics and Armed Conflict: Moral Dilemmas of Medicine and War, Michael L. Gross

Awakening Hippocrates: A Primer on health, Poverty, and Global Service, Edward O'Neil

A WIDER VIEW

~ "To fulfill the institute's public health mission, we need to make sure that breakthroughs in science become breakthroughs for people with mental disorders," says T.R. Insel, IMH Director revealing that a new strategy will reveal NIMH's commitment to mental health research that will fuel "transformation of mental health care."

~ "*Influenza Vaccine: Got it? Give it!*" discusses risk of harm vs. benefit ratio addressed by some vaccine campaigns, *Oct. Journal of AAFP*

~The ethics of mandatory flu vaccination of healthcare workers is addressed in October 16th issue of *Vaccine*.

~Three books on the current financial crisis <http://www.npr.org/templates/story/story.php?storyId=95737884>

~Arthur Caplan, bioethics columnist at msnbc on breast cancer and its research funding <http://www.msnbc.msn.com/id/27283197/>

RESOURCES

*SCBCC website <http://www.socalbioethics.org>

*Physicians for Human Rights <http://physiciansforhumanrights.org/>

* Treatment Advocacy Center (for Mental Health Issues) <http://www.treatmentadvocacycenter.org/>

*The American Society for Bioethics and Humanities (ASBH) <http://www.asbh.org/http://www.csmc.edu/13954.html>



Southern California Bioethics Consortium Newsletter
"The Balance Sheet" November 2008 Vol. VI

