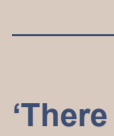


# CLINICAL ETHICS BULLETIN

NEWS AND PUBLICATIONS  
FROM AROUND THE WORLD  
CURATED BY CBME

March 2023, Issue 16



## NEWS & ARTICLES

### 'There is a level of complacency': trial exposes UK's vulnerability to organ harvesting

By Matthew Weaver // *The Guardian*

Recent organ trafficking case involving a Nigerian politician, his wife, and doctor reveals serious inadequacies in screening processes and systems pertaining to live donor transplants in the UK.

### Commentary: Deeper discussion needed over ethical issues in use of big data and AI for IVF treatment

By Alexis Heng Boon Chin // *Today*

Big data on genomics and AI-based screening technologies to enhance fertility treatments bear the potential for illicit sex selection or embryo selection for non-medical, socially-desirable traits. These issues are being debated by relevant bodies such as the Bioethics Advisory Committee.

### New TCM board chairman prioritises safety, efficacy of treatments, best practices

By Joyce Teo // *The Straits Times*

The TCM Practitioners Board is currently engaged in reviewing the Ethical Code and Ethical Guidelines for TCM practitioners, to determine the safety of traditional remedies and further preventative goals under HealthierSG.

### Forthcoming genetic therapies raise serious ethical questions, experts warn

By Ian Sample and Hannah Devlin // *The Guardian*

New gene editing tools can transform healthcare but "people who could benefit most won't be able to access or afford them".

### Abusive patients risk being discharged from hospital amid growing number of abuse cases

By Judith Tan // *The Straits Times*

An MOH workgroup recommends discharge of abusive patients if they do not need urgent care, refusal of unreasonable requests, and putting in place reporting and escalation protocols and support structures for healthcare professionals.

### Does the future of medicine lie in space?

By David Cox // *The Guardian*

Discusses the use of space for cultivation of proteins needed to study diseases and pathogens.

### Commentary: Coercive measures to improve tuberculosis control may raise stigma - being more people-centred will help

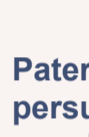
By Hsu Li Yang, Ho Yew Kee // *Today*

Calls for constant re-examination of TB treatment in light of changing societal and medical developments, while always respecting human dignity and minimising use of coercive measures.

### 'Skinny jab' drug firm facing fresh inquiries after 'serious breaches' of industry code

By Shanti Das and Jon Ungood-Thomas // *The Guardian*

Pharmaceutical company Novo Nordisk is under scrutiny for activities in breach of the Code of Practice of the Association of the British Pharmaceutical Industry (ABPI), such as disguised promotion of weight loss drugs.



## PUBLICATIONS

### Paternalistic persuasion: are doctors paternalistic when persuading patients, and how does persuasion differ from convincing and recommending?

By Anniken Fleisje // *Medicine, Healthcare, and Philosophy*

The author characterises persuasion from doctors as communicative paternalism, which is problematic for potentially dismissing patients' preferences, and they might end up undergoing treatment against their preferences. But this does not mean persuasion should always be avoided.

### The role of 'micro-decisions' in involuntary admissions decision-making for inpatient psychiatric care in general hospitals in South Africa

By Marisha Wickremesinhe, Suvira Ramlall, Douglas Wassenaar, and Michael Dunn // *International Journal of Law and Psychiatry*

In-depth interviews with mental healthcare professionals and advocates in South Africa with experience in handling matters of involuntary admission for psychiatric in-patient treatment reveal a series of micro-decisions made by stakeholders during the 72-hour assessment period that inform the final decision to admit.

### Descriptions of long-term impact from inter-professional ethics communication in groups

By Britt-Marie Wälivaara, Karin Zingmark, and Catarina Fischer-Grönlund // *Nursing Ethics*

A qualitative study of varied healthcare professionals' experiences with participating in inter-professional ethics communication in groups (IEC) based on Habermas' theory of communicative action.

### Artificial intelligence and the doctor-patient relationship expanding the paradigm of shared decision making

By Giorgia Lorenzini, Laura Arbelaez Ossa, David Martin Shaw, and Bernice Simone Elger // *Bioethics*

Looks into the use of AI in hospitals as clinical decision support systems, and calls for careful implementation to ensure primacy of both patient and professional autonomy.

### The impact on patients of objections by institutions to assisted dying: a qualitative study of family caregivers' perceptions

By Ben P. White, Ruthie Jeanneret, Eliana Close, and Lindy Willmott // *BMC Medical Ethics*

This study helps address knowledge gaps in the impact of policy-regulated institutional objections to voluntary assisted dying in Victoria on patient experiences.

### Teenager and the transplant: how the case of William Verden highlights action is needed to optimise equitable access to organs for patients with impaired decision-making

By Bonnie Venter, Alexander Ruck Keene, and Antonia J. Cronin // *Journal of Medical Ethics*

The authors argue for greater action to ensure equitable access to transplants for patients in William's position.



## BLOG POSTS

### Clinical ethics case studies: should an unrepresented, incapacitated patient be treated over her objection?

By L. Syd M. Johnson and Rachel Fabi // *Hastings Bioethics Forum Essay*

Ms Lopez is a 60-year-old patient with a psychiatric disorder and delusions, who was involuntarily hospitalised. A clinical ethics team analyses whether the medical team should proceed with diagnosis and treatment despite her continuous objections, for a brain lesion that was detected on her MRI scans.

### Re-thinking consent for treatment: clinical interests and the public interest

By Abeezar I. Sarela // *JME Blog*

The author suggests that the GMC's recent guidance on consent seems to hide public interest and resource limitation considerations under the garb of 'clinical interests' and shared decision-making.

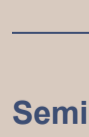


## VIDEOS

### CENTRES Clinical Ethics Conference 2023 on the theme "Ethical Challenges in Home & Community Care Settings"

6th & 7th February 2023 at the Kent Ridge Guild House

View videos of the talks and panel sessions and photos from the conference here.



## UPCOMING EVENTS

### Seminar on Ethical AI in Healthcare

Co-hosted by Duke-NUS Health Services Research Institute and NUS Medicine Centre for Biomedical Ethics

Date: 17 April 2023  
Time: 2.30pm to 5.30pm SGT  
Mode: Hybrid on Zoom and in-person  
Venue: Amphitheatre, Duke-NUS

### 17th Annual International Conference on Clinical Ethics and Consultation 2023

Theme: Clinical Ethics: Consultation and/or Education?  
Dates: 7-10th June 2023  
Venue: Università Cattolica del Sacro Cuore, Rome

### Bioethics for Outer Space

Educator: Dr Victor Cole  
Date: 11, 13, 18 and 20 July 2023  
Time: 06:00pm - 08:30pm  
Mode: Online

### Executive Certificate in Healthcare Ethics and Law

Educators: - Dr Sumytra Menon and A/P Lee See Muah  
Dates: Aug-Nov 2023  
Mode: Online

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