Centre for Biomedical Ethics
Yong Loo Lin School of Medicine

CLINICAL ETHICS BULLETIN

NEWS AND PUBLICATIONS FROM AROUND THE WORLD CURATED BY CBME

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NEWS & ARTICLES

The complex truth about trust in science

By Nature

Trust in science has not globally collapsed, but it is uneven, politically polarized in some places, and weakening around specific issues such as vaccines. The author calls for scientists to address these problems by communicating uncertainty honestly, involving the public more meaningfully in research, recognizing their own biases, and rebuilding trust through humility and openness.

Antibiotic-resistant bacteria increasingly leaving children vulnerable to common infections, global study finds

By Melissa Davey // The Guardian

A global study of over 106,000 childhood infection samples across 82 countries found that antibiotic resistance rose in every region from 2004 to 2022, making common infections increasingly harder to treat. The problem is especially severe for babies, children in intensive care, and lower-resource countries, with resistance to last-line antibiotics projected to rise sharply by 2035.

Ads call ovarian cancer a 'silent killer'. But does urging women to undergo early detection testing do more harm than good?

By Melissa Davey // Guardian

The article questions whether ads promoting a $1,495 ovarian cancer "early detection" blood test may do more harm than good, noting that the test is intended for higher-risk people but appears to appeal broadly to worried women. Experts warn that limited evidence, missed cancers, false positives, distress, and extra medical costs mean screening decisions should be guided by strong proof that benefits outweigh harms.

In Israel's prisons, torture and death have become a norm that it barely tries to hide

By Nesrine Malik // Guardian

Alleged abuse in Israeli detention reflects a broader, normalized system of mistreatment of Palestinian prisoners, including indefinite administrative detention without charge or trial. The author criticizes Israel's prison practices as openly violating human rights and international norms while facing little meaningful accountability.

PUBLICATIONS

Respectful Debiasing in Democratic Deliberation

By Shang Long Yeo // Bioethics

Democratic deliberation on health policy can be distorted by biases in public ethical judgments, but simply excluding biased views risks undermining respect and equality. The paper evaluates three "respectful debiasing" methods and concludes that improving deliberation conditions is the least morally problematic, while suggesting unreliability and surveying people's bias standards raise concerns about disrespect or silencing.

Spontaneous surgical innovation

By Isabella Grace Carnovale // Journal of Medical Ethics

The article defines spontaneous surgical innovation as unplanned innovation during intraoperative emergencies when standard options are unavailable or failing, and argues that it raises distinct ethical issues because ordinary preoperative consent and oversight cannot fully apply. It calls for better postoperative duties, including disclosure to patients, retrospective review, knowledge-sharing, and ethical evaluation so that useful innovations can be studied while harmful ones are not repeated.

When substandard becomes standard: moral responsibility in healthcare under conditions of normalised deviance

By Helen Smith // Journal of Medical Ethics

The article argues that healthcare wrongdoing can become normalized when repeated substandard practices are tolerated by institutions until staff no longer recognize them as serious ethical failures. It concludes that responsibility in such cases should be graded and distributed across individuals and institutions, depending on role, authority, awareness, and capacity to recognize, challenge, or prevent harmful routines.

Can I Get a Witness? The Ethical Dimensions of Family Presence in Patient Suffering

By Jennifer Blumenthal-Barby, Trevor M. Bibler, Holland Kaplan, Adam Omelianchuk, Joanna Smolenski // Hastings Center Report

The article examines whether family members or surrogates have a moral duty to be present with unconscious or minimally conscious patients whom clinicians believe are suffering. It argues that bedside presence may sometimes help surrogates better understand a patient's condition, but it is generally not justified to require presence merely to pressure decisions, share clinicians' emotional burden, or impose moral blame.

Drawing lines: how the public defines "Serious" genetic conditions for reproductive testing

By Shizuko Takahashi, Rie Iizuka, Serene Ong, Tianxiang Lan, Tsutomu Sawai // European Journal of Human Genetics

The study finds that Japanese adults of reproductive age define "serious" genetic conditions for PGT-M more broadly than Japan's current restrictive policy, including not only lethal childhood conditions but also moderate functional limitations and substantial quality-of-life impacts. Although many participants felt ethical discomfort about "sorting lives," they generally distinguished disease prevention from enhancement and saw economic barriers, rather than ethical objections, as the main obstacle to access.

Delusion Is Not a Bug: AI, Psychiatry, and the Ethics of Uncertainty

By Brent R. Carr // Hastings Center Report

The article argues that AI mental-health safety should not focus only on detecting "delusions," because delusion is not merely a false belief but a hardened structure of certainty formed under uncertainty. Its core warning is that LLMs can offer premature coherence to vulnerable users, so ethical AI design should protect provisionality: the user's ability to stay uncertain, question interpretations, and avoid having beliefs stabilized too quickly.

A philosophical reconstruction of moral distress: Its paradox and significance in healthcare practice

By Keiichiro Yamamoto and Tomohide Ibuki // Nursing Ethics

The article reconstructs moral distress as the suffering that occurs when healthcare professionals perceive morally important reasons for action but are blocked by external constraints from responding to them. It argues that greater moral sensitivity may actually make clinicians more vulnerable to moral distress, so healthcare institutions should not simply try to reduce distress but should create conditions where ethically sensitive staff can act on what they recognize as right.

BLOG POSTS

Can safeguards make psychiatric coercion harder to end?

By Katarzyna Widlas-Klimsiak // Journal of Medical Ethics Forum

The post argues that legal safeguards for involuntary psychiatric treatment can protect patients, but may also normalize coercion by focusing mainly on whether legal conditions were met. It suggests that the Council of Europe's non-binding autonomy-focused Recommendation may push a deeper question: whether systems are genuinely making coercion less necessary through consent, decision support, and accessible voluntary alternatives.

Whose permission counts? Rethinking abortion access through the lens of authorization

By Shizuko Takahashi // Hastings Bioethics Forum

The post argues that legal abortion access often depends less on formal legality than on who has practical authority to approve care, such as spouses, committees, clinicians, prosecutors, or institutions. Drawing on the author's experience in Japan, it urges bioethics to examine how authorization works in real clinical settings and whose judgment counts when a pregnant person seeks an abortion.

Off Target: Reporting on Human Embryo Gene Editing

By Emily Packard Dawson, Lainie Friedman Ross // Hastings Bioethics Forum

The essay criticizes media coverage of a preprint on human embryo-base editing, which described the embryo gene editing work as unusually precise. The author argues that such coverage overstate the safety of such technology because off-target edits, mosaicism, and lack of peer review leave major uncertainties. It warns that such coverage can normalize heritable embryo editing and shift attention from rare therapeutic uses toward commercial "optimization" or enhancement.

VIDEOS & PODCAST

The Hidden Side of Birth: Injury, Trauma, and PTSD with Angela Ballantyne

By Hosts: Julian Savulescu, James Edgar Lim and Sinead Prince // CBmE & U Podcast

Professor Angela Ballantyne (University of Otago) explores the prevalence of birth trauma, its lasting impacts, and why such a common experience remains largely hidden from public discussion.

UPCOMING EVENTS

MME Matters: Biomedical Ethics for Every Doctor

Register Now!

Mode: Online, NUS Learning Management System

Essential Topics in Clinical Ethics (ETCE) Course

[5 spots left] Register Now!

Mode: Online via Zoom
Date: 5 August 2026 & 12 August 2026 (Every Wednesday)
Time: 2.00 to 4.15pm (SGT)

Neuroethics Asia Conference 2026

Register Now!

Venue: NUSS Kent Ridge Guild House, Singapore
Date: 6 - 7 November 2026

Australasian Association of Bioethics and Health Law

Register Now!

Venue: Boorloo/Perth, Western Australia
Date: 29 November 2026 - 2 December 2026

CENTRES Clinical Ethics Conference 2027

Register Now!

Venue: Shaw Foundation Alumni House, Singapore
Date: 28 - 29 January 2027

Singapore Research Ethics Conference 2027

Save the date!

Venue: One Farrer Hotel, Singapore
Date: 23 - 24 March 2027