

CLINICAL ETHICS BULLETIN

NEWS AND PUBLICATIONS
FROM AROUND THE WORLD
CURATED BY CBME

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NEWS & ARTICLES

Women with same health conditions as men ‘less likely to be offered active treatment’

By Anna Bowden // *Guardian*

A global review of medical research found that women with the same conditions as men—including cardiovascular disease, kidney disease, and Parkinson's—are less likely to be offered active treatments like surgery, stents, or strong painkillers, revealing significant inequality in women's healthcare that isn't explained by differing clinical needs.

‘Gamechanging’ brain tumour test reduces diagnosis from eight weeks to two hours

By Helena Horton // *Guardian*

A genomic test developed by the University of Nottingham can diagnose brain tumours in about two hours—down from up to eight weeks—while the patient is still on the operating table. The NHS has begun piloting it in five specialist centres before a wider rollout, with doctors saying it could enable earlier treatment and potentially save lives.

Scientists create mice with part-human brains

By Ian Sample // *Guardian*

Researchers created "xenocortical" mice by injecting human brain cells until the animals held roughly 4 million human cells making up around half the brain by volume, in order to study disorders like schizophrenia, epilepsy, cerebral palsy and rare dementias. The human tissue integrated with the mice's blood supply and neurons but remained immature and did not enhance the animals, though it modestly improved their shaky gait and cognitive deficits.

Science Talk: Why a greener medication box matters to your health

By Jeannie Tey and Jason Cheah // *The Straits Times*

Tan Tock Seng Hospital pharmacists redesigned the paper medication box by removing its small plastic window, creating a single-material paper box that is recyclable in home blue bins. Rolled out across Singapore's hospitals and polyclinics, the change could allow an estimated 4.36 million boxes to be recycled annually—cutting roughly 4,600kg of carbon emissions and 1,837kg of plastic.

PUBLICATIONS

Non-complicity as a principle of public health ethics

By Jeremy Snyder // *Public Health Ethics*

Jeremy Snyder argues that "non-complicity"—the principle of not contributing to moral wrongdoing or unjust structures, whether through action or inaction—should be added to the standard list of public health ethics principles. He contends it best works as a complement to the widely used principle of solidarity: whereas solidarity gives positive motivation to "stand up with" others toward justice but weakens when applied to distant global communities, non-complicity provides clearer negative guidance to stop contributing to injustice at both interpersonal and structural levels.

A Scoping Review of Ethical Considerations in the Use of AI for Bereavement-related Grief Support

By Yun Ting Ong, Michael Dunn & G. Owen Schaefer // *Neuroethics*

This scoping review found that the ethics literature on using AI (especially "griefbots" that simulate the deceased) for grief support largely rests on a prevailing view of grief as a non-linear, transformative renegotiation of identity. The key ethical concern in the literature is that prolonged interaction with griefbots could disrupt healthy grieving—fostering over-reliance, false hope, and social isolation—while also raising issues of respect for the deceased's autonomy, privacy, and dignity, alongside commercial exploitation of sensitive data. The most frequently identified potentially defensible use case was short-term, supervised therapeutic use for individuals with prolonged grief disorder.

Paediatric Preference Prediction: the Future of Decision-Making for Children?

By Dominic James Clifford Wilkinson, Julian Savulescu & Brian Earp // *Neuroethics*

This paper examines whether an AI-based "Paediatric Personalised Patient Preference Predictor" (P5) could ethically guide medical decisions for children who hold firm views that conflict with caregivers or clinicians. The authors argue that, unlike in adults, predicted future preferences cannot ground "substituted judgment" for young children because a child's future self does not yet exist and holds no decision-making authority over the present self; instead, a P5 would be most defensible for adolescents who currently lack full capacity but will likely gain it, where predictions of what they would later endorse or not regret could support best-interests reasoning and shared decision-making. The authors also point out a problem that treatment decisions themselves can reshape a child's later preferences.

Can health justice be measured? A normative reconstruction of health equity indicators

By Akbar Shahrivari // *Philosophy, Ethics, and Humanities in Medicine*

This article argues that widely used health equity indicators—such as healthcare coverage, financial protection, population health outcomes, and social determinants measures evaluate distinct normative objects drawn from six different theories of justice (utilitarian aggregate welfare, liberal-egalitarian fair opportunity, luck-egalitarian responsibility-sensitive disadvantage, communitarian collective health goods, capability-based human functioning, and structural disadvantage). The author argues that persistent disagreement over health equity measurement reflects legitimate normative pluralism rather than methodological failure, and proposes a "Layered Evaluation Model" that keeps these domains conceptually distinct.

The Evidential and Ethical Weight of Opt-Out Consent: An Empirical Bioethical Examination

By Shang Long Yeo // *Bioethics*

The author uses two survey experiments to measure the evidential and ethical weight of opt-out consent, and how these might be augmented by evidential measures, like a "read receipt" for information about opt-out organ defaults. The author finds substantial public alignment with the theoretical claim that the consent process should involve a "selective occasion" (where the patient attends to and deliberates about options, and expresses their preferences over these options) and draws some ethical implications about opt-out consent.

BLOG POSTS

Medical exclusion in sport: Is it protection or discrimination?

By Giulia Sesa & Silvia Camporesis // *JME Forum*

This blog post asks whether excluding athletes on medical grounds constitutes protection or discrimination. Drawing on four public health ethics principles—proportionality, autonomy, minimization of harm, and evidence—the authors argue that restrictions can be ethically justified only when they respond to a sufficiently established and evidenced risk, are proportionate, respect the athlete's values, and are imposed after less restrictive alternatives have been considered; blanket exclusions based solely on a diagnosis (whether cardiac conditions, eating disorders, or HIV, where an undetectable viral load undermines continued exclusion) rather than individualized risk assessment tend to amount to wrongful discrimination.

Can medical AI recognize the boundaries it should not cross?

By Mengchun Gong & Xunming Ji // *JME Forum*

This blog post argues that the central challenge for generative medical AI is whether it can recognize the boundaries it should not cross, as in an AI recommending withdrawal of a child's life support without knowing the family or clinical context. They argue that AI should assist rather than assume autonomous decision-making authority. They further contend that medical AI ethics must become testable to be governable, with the goal of "calibrated assistance" that stays useful without exceeding legitimate authority, neither overstepping nor refusing too broadly.

Does the Fitness Industry Pose a Problem to Our Health?

By Brandon Ambrosino // *Bioethics Today*

This blog post asks whether the multi-billion-dollar fitness industry is actually helping or harming public health. The author argues that a problematic "no pain, no gain" mentality drives several excesses: pricing fitness beyond most people's reach through expensive gyms and add-ons, the creeping pharmaceuticalization of exercise (weight-loss drugs, testosterone, supplements), obsessive body and biomarker surveillance that can fuel anxiety, and disordered eating patterns like orthorexia that undermine the social bonding central to shared meals. Ambrosino calls for rethinking fitness at the level of community health—making it more affordable, less elitist, and less narrowly fixated on aesthetics.

VIDEOS & PODCAST

Insurance Discrimination

CBmE & U Podcast

A/P Harisan Unais Nasir examines the ethical principles underlying differentiation and discrimination in insurance, exploring the tension between fair risk assessment and unjust discrimination, and considering where insurers should draw the line when developing individual risk profiles.

UPCOMING EVENTS

The Ethics Edge: Insightful Learning for Today's Doctors

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Mode: Online, NUS Learning Management System

Australasian Association of Bioethics and Health Law

Register Now!

Venue: Boorloo/Perth, Western Australia

Date: 29 November 2026 - 2 December 2026

Singapore Research Ethics Conference 2027

Save the date!

Venue: One Farrer Hotel, Singapore

Date: 23 - 24 March 2027