Southern Illinois Perinatal Network Conference

Ethics in Perinatal Care

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September 17, 2014
Disclosures

- None
Objectives

1. Outline a moral framework for understanding and doing ethics.

2. Delineate a process and key factors for ethical decision making.

3. Discuss ethical issues in cases in perinatal ethics.
1. Outline a moral framework for understanding and doing ethics.
Ethics Focuses on…

**BEING**
Who we ought to become as persons

**DOING**
How we ought to act in relation to others
Need a Moral Framework to Really Do Ethics

Human Flourishing
(Love of God)

Right Relations
(Love of Neighbor)

Acquire Virtues
Necessary for Right Relations

Act accd to Principles that foster Right Relations

Key Virtues:
Compassion; Empathy; Love; Selflessness; Prudence; Discernment; Moral Courage; Integrity; Faith; Hope; Temperance

Human Dignity:
Respect for life; Beneficence; Honesty; Autonomy; Privacy and Confidentiality; Care for Whole Person

Justice:
Common Good; Solidarity; Subsidiarity; Stewardship; Care for Disadvantaged; Equitable Distribution
2. Outline a process and key factors for ethical decision making.
Need a Process for Ethical Decision Making

- **Gather** all relevant factual information.
- **Identify** the ethical issues and questions.
- **Consider** what right relationships require in terms of the virtues that should be exhibited and the principles that should guide our action.
- **Brainstorm** possible options.
- **Weigh** options in light of their impact on those concerned and select option(s) that best promote human flourishing.
- **Evaluate** the decision against external and internal criteria.
3. Discuss ethical issues in cases in perinatal ethics.
Case 1: Twins and Transplant

Theresa is 30 y.o. and 15 weeks pregnant with twins, one boy and one girl. She and her husband David received devastating news that both twins have severe congenital anomalies. The girl suffers from acrania, a fatal disorder whereby the top of the skull does not form. The meninges are exposed to the amniotic fluid, and, over time, this will manifest as anencephaly. She will never be able to think or talk and will die prior to birth or shortly thereafter. Her brain stem is developing, however, affording her the same legal status as all other fetuses. The other twin has hypoplastic left heart syndrome (HLHS), whereby the left side of the heart is underdeveloped, causing the right side to compensate. His condition would be fatal without surgery. Infants with HLHS may undergo a series of complex cardiac surgeries and/or a heart transplant, depending on the severity of the condition and the availability of organs. Theresa and David are distraught. After careful consideration, and given the prognosis for the girl twin, they ask if the girl’s heart could be transplanted into the boy with HLHS to give him the best chance at life. Theresa’s physician says that this is an unlikely possibility, because the girl’s heart could not be harvested prior to death and will likely be unusable once she has died. David pushes the physician, requesting the procedure and noting that they could abort a 15 week fetus. If they are legally allowed to abort and the girl cannot survive, he asks why the girl’s heart cannot be procured for transplant to save their son at the time when it maximizes the likelihood of a positive outcome.

- What are the issues in this case?
- Which virtues would you want to exhibit and what principles would apply?
- What would you advise and why?
Case 2: Pregnancy and Substance Abuse

Jane is 21 years old and 7 weeks pregnant with her first child. During her first appointment with her obstetrician, Jane’s breath smells of alcohol and she complains of unexplained nausea, sweatiness, shakiness and headaches. After some conversation, she admits to having had “just one or two glasses of wine at home after one stressful day at work.” Jane’s physician counsels her on the fetal harms of alcohol use and offers to enroll her in a local support program. Jane declines “having a drinking problem” and explains that she was unaware that alcohol use posed a risk to her child. Jane promises to avoid alcohol. Concerned about Jane and her child, the physician asks her to return for another appointment in two weeks. At her second visit, Jane is not intoxicated and she does not smell of alcohol. She denies alcohol use. However, at her third appointment, Jane again smells of alcohol. The physician knows that the patient’s habits pose significant risks to the fetus, but he worries that she will stop seeking prenatal care if he confronts her again.

- What are the issues in this case?
- Which virtues would you want to exhibit and what principles would apply?
- What would you advise and why?
Case 3: Pregnant Women and Decision-Making

Amy is 18 years old and presents to the ED with preterm labor at 32 weeks. She has not had any prenatal care and does not have a PCP. The baby is in breech position and fetal distress is noted. The ob-gyn informs Amy that a C-section is clinically indicated because of the baby’s condition. Amy refuses, stating she “Does not want to be cut into” and that “God will save my baby.” The ob-gyn considers a vaginal delivery, but it quickly becomes clear that fetal demise is highly likely without an immediate C-section. She explains that a vaginal delivery is not a clinically appropriate option, and a C-section is necessary. However, the patient maintains her decision, and her grandmother threatens to sue if a C-section is performed. Another clinician and a chaplain talk with the patient about the importance of the C-section, and the patient continues to insist on a vaginal delivery, even if it means the child will not survive. The ob-gyn feels uncomfortable and threatened. She recognizes the ethical and legal authority that patients have to make their own decisions; however, she wonders if the patient is making an informed decision about a C-section. She also feels responsible for the child, given the likely fetal outcome of vaginal delivery and the benefit to the fetus of a C-section. The situation is urgent.

- What are the issues in this case?
- Which virtues would you want to exhibit and what principles would apply?
- What would you advise and why?
Conclusion

• Ethics is about **BEING** and **DOING**
  – Involves making evaluative judgments

• Ethics requires a moral framework
  – Helps us make ethical judgments by providing insight into who we ought to become as persons and how we ought to act in relation to others

• Ethical decisions sometimes require a decision-making process
  – Gather, identify, consider, brainstorm, weigh, evaluate