

To Provide or Not To Provide – Ethics Considerations of Limiting Treatment

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Disclosures

- Chair, Bioethics Advisory Committee, Canadian Blood Services

- Not speaking in this capacity

Objectives

- At the end of this presentation, participants should be able to –
 - Identify relevant ethical values/principles in relation to limiting or denying specific health care treatments
 - Describe considerations in weighing ethical (and other) aspects in making these types of decisions

Setting the stage: Broad context

- Publicly funded health system
 - Universal?
 - Meaning and intent
- Levels of decision-making
 - Organizational/system
 - Clinical

Setting the stage: Broad context

- Range of health care treatments
 - Variation in need, availability, cost, effectiveness, etc.
- Examples
 - Organ transplantation
 - High cost oncology drugs
 - Blood transfusions
 - IVIG/SCIG
 - ...

Notice...

- Language that is used -
 - “Resource allocation”
 - “Priority setting”
 - “Limiting or restricting”
 - “Denying”
 - “Criteria and indications”

Key to think about...

- Process of making allocation decisions
- Outcomes of allocation decisions

“Get your priorities straight!”

“Where are your priorities?”

Notice...

- 3 E's often utilized to broadly capture key elements of resource allocation
 - Evidence
 - Ethics
 - Economics

Relevant ethical values/principles

- Evidence
 - Effectiveness
- Equity
- Sustainability, stewardship
 - Cost(s)
- Safety
- Transparency
- Inclusivity
- Trust
- Accountability
 - Evaluation
- Consistency
- Appeals/revisions
- ...

Consider IVIG/SCIG

- The Atlantic IVIG Utilization Working Group (2018) *Atlantic Clinical Indications and Criteria for Intravenous and Subcutaneous IG (IVIG/SCIG) Version 1.0* Halifax, NS
 - Rapid growth
 - Related costs
 - Not an unlimited resource

Consider IVIG/SCIG

- Values/principles cited or referred to –
 - Potential benefit – clinical efficacy (in light of possible risks)
 - Evidence-base – indications; possibly indicated
 - Sustainability – controls; dosing
 - Accountability – built-in checks; evaluation points
 - Patient safety
 - Expertise – discussion about cases
 - Patient need – urgency
 - Consistency – fairness

Note...

“The [social] goods we often must provide [including] ... health care ... are not sufficiently divisible ... to avoid unequal or ‘lumpy’ distributions” – allocation decisions are necessarily messy.”

Norman Daniels

Consider...

- A possible fourth “e”
 - Emotion
 - Attachment to particular forms of treatment?
 - Offering something?
 - Providing for “this” patient?
 - Connection to hope
 - Hype?

Wrapping up...

