**BIOETHICS**

 **Table 2.**

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| **1. PURPOSE AND OBJECTIVES OF TRAINING** |
| Medical ethics teaching aims at enabling students to understand the ethical problems facing the medical profession nowadays; getting them acquainted with the codes of conduct and specific ethical documents adopted by the World Medical Association as well as the basic principles of medical ethics; providing of broad understanding of hot ethical debates; training in ethical case analysis.Ethical knowledge is organized in two parts:1. Basic ethical theory – terminology, methods and theories of ethics, basic principles, models of relationship, patients’ rights and informed consent.2. Special problems – reproductive ethics, ethics of death and dying; ethical problems of research and human experimentation, transplantation, justice and allocation of resources.At the end of the course students should be able to:• Define the main areas of medical ethics.• Explain the major ethical methods and theories.• Explain basic principles of medical ethics and apply them to ethical case analysis.• Determine ethical principles in ethical documents adopted by the World Medical Association. • State the basic patient’s rights.• Discuss the different ethical views on contraception and abortion as well as to interpret possible ethical conflicts derived from the modern reproductive technologies.• Determine the focus of care and attention of the terminally ill.• Distinguish different types of euthanasia and discuss arguments for and against the active euthanasia.• State the main principles of human experimentation according to Declaration of Helsinki.• Discuss general ethical problems of transplantation and special ethical problems of foetal tissue transplantation, living and cadaver donation.• Determine the ethical dilemmas in allocating medical resources.• Suggest appropriate solutions for particular cases related to distribution of resources in medical practice. |
| **2. TEACHING TEAM (FACULTY TEACHERS)** |
| **Lecturer:** * **Prof. Dr. Silviya Aleksandrova-Yankulovska,** DM, PhD, DSc, MAS, Master in Medicine, Master in Bioethics; room 311, tel.: 064 884 196

E- mail: silviya\_aleksandrova@mu-pleven.bg**Assistant professors:*** ***Senior Assistant Atanas Anov,*** PhD, Master in Philosophy; room 318b, tel. 064 884 226;

E- mail: Atanas.Anov@gmailc.com |
| **3. PROGRAMME OF STUDY (CURRICULUM)** |
| Medical ethics education is compulsory and is placed in second year, fourth semester of the curriculum of medicine. This is the only philosophical discipline for medical students and it is providing specific knowledge as well as it broadens students’ life views. Studying of values, ethical codes and declarations, different ethical methods and theories as well as the existing views towards major current ethical problems contributes to the development of students’ moral reasoning and ethical sensitivity.The Bioethics Program is originally developed in the Section of Medical Ethics according to the System of quality of education. The content of the programme is up-to-date with the international bioethics education both for the European and the American bioethics schools. File: Programme of study.docx |
| **4. LECTURE COURSE**  |
|  | The lecture course is intended for medical students. The course comprises 7 and ½ two hour-lectures. **To the lecture course…** |
| **5. ADDITIONAL MATERIALS**  |
| 1. Nitzan Rimon-Zarfatya and Mark Schweda - Biological clocks, biographical schedules and generational cycles: temporality in the ethics of assisted reproduction (original article). Biological clocks\_Temporality-reproduction.pdf
2. Ana Borovecki, Pamela Tozzo, Nicoletta Cerri, Luciana Caenazzo - Social egg freezing under public health perspective: Just a medical reality or a women’s right? An ethical case analysis (original article). Social Egg freezing.pdf
3. Jonathan Ives, Heather Draper, Helen Pattison and Clare Williams - Becoming a father/refusing fatherhood: an empiricalbioethics approach to paternal responsibilities and rights (original article). Fatherhood.pdf
4. Rivka Weinberg - The Risk of a Lifetime: How, When and Why Procreation May Be Permissible - Oxford University Press (2015). full book Rivka Weinberg-The Risk of a Lifetime\_ How, When and Why Procreation May Be Permissible-Oxford University Press.pdf
5. Human cloning.pdf
6. Lars Sandman, Christian Munthe - Shared Decision Making, Paternalism and Patient Choice (original article). SharedDecisionMakingPaternalismPatientChoice.pdf
7. Hilde Lindemann - Holding one another (well, wrongly, clumsily) in a Time of dementia. Vol. 40, Nos. 3–4, July 2009 0026-1068 (original article). Holding one another in dementia.pdf
8. M. A. Verkerk, Hilde Lindemann, Janice McLaughlin, Jackie Leach Scully, Ulrik Kihlbom, Jamie Nelson, Jacqueline Chin - Where families and healthcare meet (original article). Transplantation-Where families and healthcare meet.pdf
9. Tijs Vandemeulebrouckea, Bernadette Dierckx de Casterléb, Chris Gastmansa - The use of care robots in aged care: A systematic review of argument-based ethics literature. (original article) Care robots in aged care.pdf
10. Tim Bayne, Avery Kolers - Toward a pluralist accountof parenthood (original article). Towards a pluralist account of parenthood.pdf
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| **6. SEMINARS** |
| Bioethics seminars complement the presentation of theoretical concepts and provide opportunity for their practical application to clinical cases. Analytical thinking is developed as well as skills to practical decision-making in ethical dilemmas. Interactive methods of teaching are applied, such as video film discussion, as well as group documents’ and case analysis. The latter is done through the application of originally developed in the Section of Medical Ethics of MU-Pleven methodology for case analysis. **The theses of the seminars can be found following the link below.**File: Practical exercises – theses.docx |
| **7. EXAMINATION SYNOPSIS IN BIOPHYSICS (CONSPECTUS FOR THE EXAM)** |
| The synopsis includes both lectures and textbook materials on the topics. File: Examination synopsis in bioethics.docx |
| **8. TEST QUESTIONS AND PROBLEMS (TESTS COURSE)** |
| Students have to pass two semestrial tests. * The first test is scheduled at the beginning of 4-th seminar and covers the Reproductive ethics issues.
* The second test is scheduled at the 7-th seminar and covers the whole synopsis. The format of this test is equivalent to the exam test and plays the role of a training test for the exam.

**Training test samples can be found following the link below** |
| **9. GENERAL COMMENTS AND RECOMMENDATIONS** |
| This section contains instructions on how to prepare for the course. During the semester follow the information on the information board at the department in regards to schedules of lectures, seminars, upcoming tests, halls and catch-up classes.**The general comments and recommendations can be found using the link below.**File: Comments and recommendations.docx |
| **10. FORUM ON THE DISCIPLINE** |
| The forum on bioethics is developed to give opportunity for communication between the students. The faculty teachers prefer personal contact and they will not participate in the forum.  |
| **11. CONSULTATIONS** |
| Consultations will be provided according to a predetermined schedule that is available on the information board. |

**Table 2.**

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| **Lecture 1: Introduction to bioethics. Principles of ethics** |
| Definitions of ethics – medical ethics, healthcare ethics, bioethics. Subject field of bioethics. Methods of ethics: arguments, conceptual analysis, consistency and case comparison, reasoning through principles. Theories of ethics – definitions, general characteristics. Types of ethical theories – classical and modern theories; theories focused on the person, on the act and on the consequences – ethics of virtue, ethics of principles, ethics of consequences. Care ethics/Family ethics. Ethics of life course. Applied ethics (principlism) – respect for autonomy, beneficence, non-maleficence, justice. [pdf-icon Presentation of Lecture 1.](http://do2.mu-pleven.bg/mod/resource/view.php?id=13664) Files: Lecture 1-2019.pptx |
| **Lecture 2: Decision-making in medical practice.** |
| Patient Adapted Paternalism. Patient Preference-Satisfaction Paternalism. Shared Rational Deliberative Paternalism. Informed Patient Choice. Interpretative Patient Choice. Advised Patient Choice. Shared Rational Deliberative Patient Choice. Shared Rational Deliberative Joint Decision (ideal). Professionally Driven Best Interest Compromise Model. Material for self-preparation: Confidentiality – definition, importance for medical practice, scope, basic aspects, characteristics. When the information about the patient can be disclosed to a third party – legal requirements to reveal patient information, duty to warn, Tarasoff principle and its limitation. Types of information and levels of breach of confidentiality. Confidentiality issue in specific diseases – HIV and confidentiality. Models of relationship – classical triad – paternalistic model, autonomous model, partnership model – characteristics, decision-making power, advantages and disadvantages of different models. Types of paternalism – strong, weak, active, passive. Models by Emanuel&Emanuel: paternalistic, informative, interpretative, deliberative model – goals of interaction, physician’s obligations, role of patient’s values, concept of autonomy. Application of different models in clinical practice.[pdf-icon Presentation of Lecture 2](http://do2.mu-pleven.bg/mod/resource/view.php?id=13664) Files: Lecture 2 – 2019.pptx |
| **Lecture 3: Human rights in patient care. Informed consent.** |
| **Universal Declaration of Human Rights, International Covenant on Civil and Political Rights - Rights to Liberty and Security of person; Privacy; Access to Information; Bodily integrity; Life; Highest attainable standard of mental and physical health; Freedom of torture and other cruel, inhuman or degrading treatment or punishment; participation in public policy; Equality and freedom from discrimination; Effective remedy. Content, state responsibilities, application to mental health, infectious diseases control and reproductive health of different rights. WMA Declaration of Patients’ Rights (Declaration of Lisbon) – Rights to Medical care of good quality; Freedom of choice; Self-determination; Unconscious patient; Legally incompetent patient; Procedures against patient will; Information; Confidentiality; Health education; Dignity; Religious assistance. Interactive learning: 15-minutes movie and discussion “50 milligrams is not enough” official source Open Society Foundation: https://www.opensocietyfoundations.org/videos/50-milligrams-not-enough – Which human and patient’s rights are violated in the movie? Informed consent – definition, arguments in favour and against. Criteria for validity of informed consent – competency, disclosure, voluntariness. Standards of disclosure: professional standard, reasonable person standard, subjective standard; waiver, therapeutic privilege. Bethany Hughe’s case.**[pdf-icon Presentation of Lecture](http://do2.mu-pleven.bg/mod/resource/view.php?id=13664) 3 Files: Lecture 3 – 2019.pptx |
| **Lecture 4: Reproductive ethics. Ethics and genetics.** |
| The right to reproduce. Procreative balance and motivation restriction principles. Views on parenthood. Social eggs freezing. Ethics and genetics – gene therapy, arguments for and against germline therapy, genetic testing and principle of neutrality, access to genetic data. Cloning – definition, reproductive and therapeutic cloning, arguments for and against. Material for self-preparation: Ethical problems of limiting reproduction. Contraception – personal vs. professional values, contraception and minors, contraception and mentally ill. WMA Statement on Family Planning and the Right of a Woman to Contraception. Sterilisation – ethical concerns; legal framework; compulsory sterilization laws – Nazi Germany Law for the Prevention of Genetically Diseased Offspring. Eugenics – definition, positive and negative eugenics, history. WMA Statement on Forced and Coerced Sterilisation. Abortion – conceptional and graduation theory on the moral status of the embryo; pro-life, pro-choice views towards abortion; sex-preselection. Artificial insemination, in-vitro fertilisation, ICSI – ethical concerns and contemporary standpoints from WMA Statement on assisted reproductive technologies. Diane Blood’s case. Surrogate motherhood – definition, arguments for and against, legal frameworks. Interactive learning: 5-minutes movie and discussion “Rent a womb: Outsourcing Surrogacy in India.”[pdf-icon Presentation of Lecture](http://do2.mu-pleven.bg/mod/resource/view.php?id=13664) 4 Files: Lecture 4 – 2019.pptx |
| **Lecture 5: Ethical issues in elderly care.** |
| 5. Ethical issues in elderly care. /2 hours/. Care for dementia patients. Socially assistive robots. Material for self-preparation: Ethical issues at the end of life. Palliative/hospice care. Euthanasia Terminally ill patients – definition, criteria, rights of terminally ill. The concept of “good death” – abstract and concrete notions, the contribution of Elizabeth Kubbler-Ross. Application of basic ethical principles in end-of-life care. Advance directives. Truth telling – arguments for and against, general rules of truth telling, Robert Buckman’s 6-steps protocol of delivery of bad news. Interactive learning: 7-minutes movie and discussion “How Should Providers Deliver Bad News” /Duke University educational materials/. Relief of pain and suffering – principle of double effect. Hospice/palliative care - definitions, models of provision. Euthanasia - definition, history /Nazi euthanasia programme/, Dutch and Belgian laws, forms of euthanasia, arguments for and against. Physician-assisted suicide.[pdf-icon Presentation of Lecture](http://do2.mu-pleven.bg/mod/resource/view.php?id=13664) 5 Files: Lecture 5 – 2019.pptx |
| **Lecture 6: Research ethics. Transplantation ethics.** |
| History of experimentation with human beings – Cleopatra pregnancy experiments, Nazi experiments and Dr. Josef Mengele, Tuskegee Syphilis Study. Interactive learning: 3-minutes movie and discussion “Mengele’s Human Experimentation on twins”. Historical development of ethical standards for human experimentation: Nuremberg Code, Declaration of Helsinki, Belmont Report. Ethics review and ethics committees. Physician as a researcher. Use of placebo. Post-trial arrangements. Publication ethics. Transplantation ethics – definitions, medical, economical, social and ethical problems. Black market. Age and generational relations in organ donation. Interactive learning: 5-minutes movie and discussion “Exposing the black market for human organs”. Ethical issues of xenotransplantation, cord-blood banking, neurotransplantation, therapeutic cloning. WMA Statement on Organ and Tissue Donation.pdf-icon Presentation of Lecture 6 Files: Lecture 6 – 2019.pptx |
| **Lecture 7: 7. Justice in health care. Public health ethics.** |
| Levels of resource allocation. Right to health as a human right and WHO statements in Declaration of Alma Ata. Waiting list – positive and negative effects. Possible ways of resource allocation – WHO strategies on macro-level of resource allocation; Egalitarian, Libertarian and Utilitarian schools of thought; QALY theory; Rationing medical care by age – Daniel Callahan’s contribution into the debate; Responsibility theory. Public Health Ethics – definition, principles – harm principle, least confiding measures first, reciprocity, transparency, proportionality, effectiveness. Case of Cuba and limiting HIV/AIDS. Ethical issues of: health promotion and prevention strategies; risk reduction and screening programmes; epidemiological studies; pro- and anti-natalists policies; infectious disease control. Case of limiting Ebola epidemic.[pdf-icon Presentation of Lecture](http://do2.mu-pleven.bg/mod/resource/view.php?id=13664) 7 Files: Lecture 7 – 2019.pptx |
| **Lecture 8: Clinical ethics consultation.** |
| Definition. Characteristics. Aim. Authoritarian and ethics facilitation approach of CEC. Skills and knowledge of ethical consultant. Models of CEC. Most common reasons to request CEC. Benefits and evaluation of CEC. Moral case deliberation. METAP methodology of CEC and its application to a real case of donor’s versus relative’s genetic material for IVF.[pdf-icon Presentation of Lecture](http://do2.mu-pleven.bg/mod/resource/view.php?id=13664) 8 Files: Lecture 8 – 2019.pptx |