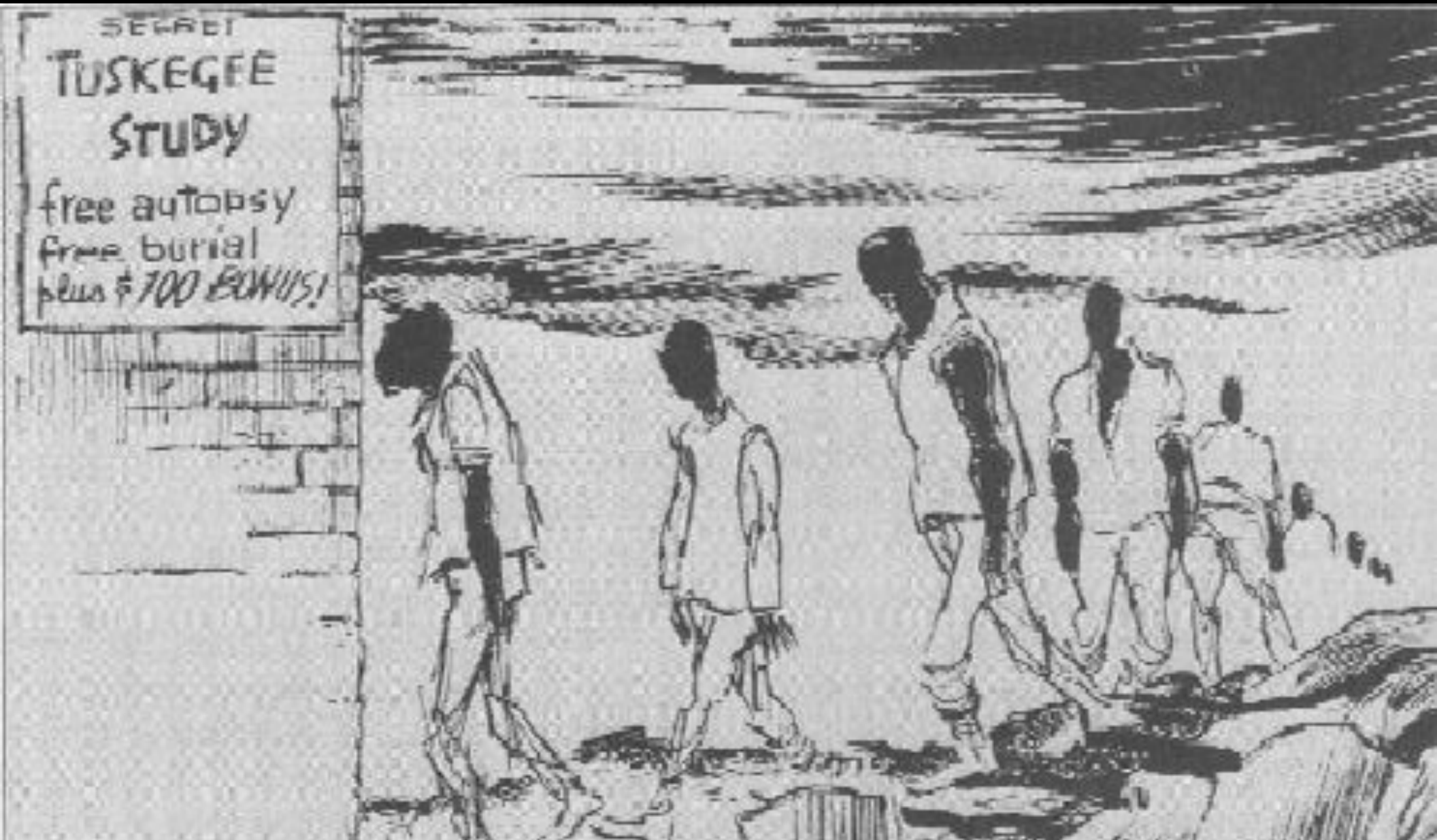


WEDNESDAY 9/116

ETHICS



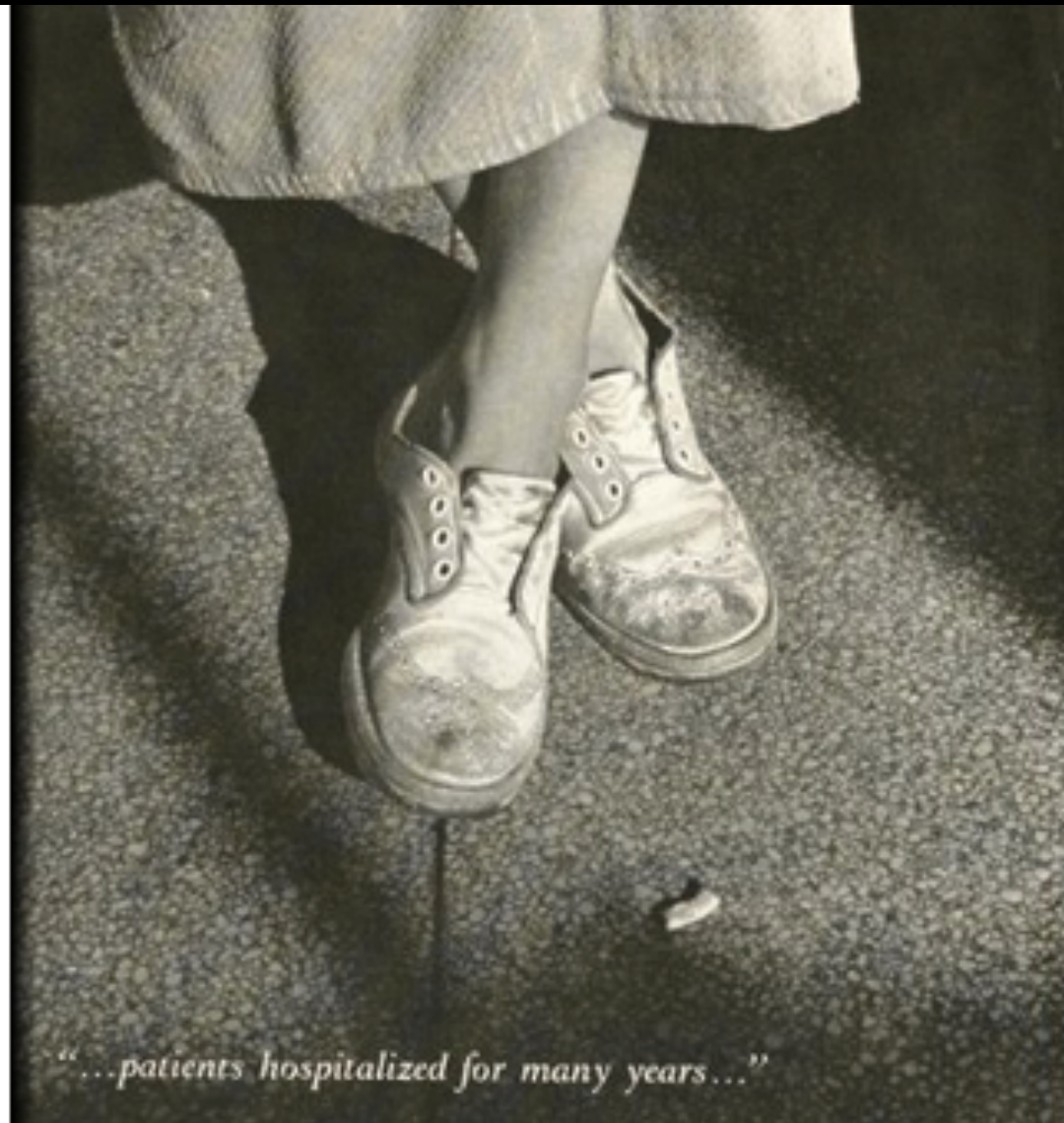
MENTAL ILLNESS:

RISE OF DRUG THERAPIES



MENTAL ILLNESS:

SOCIALLY-DETERMINED TARGETS



MENTAL ILLNESS:

SOCIALLY-DETERMINED TARGETS

Assaultive and belligerent?



Cooperation often begins with **HALDOL**[®] (haloperidol)

a first choice for starting therapy

Acts promptly to control aggressive, assaultive behavior

Several studies have reported the rapid effectiveness of HALDOL (haloperidol) in controlling disruptive and dangerously assaultive behavior.^{1,2} Even the number of violent assaults initiated by a group of criminal psychotics "resistant to maximal doses of phenothiazines" was placed substantially during treatment with HALDOL.³ Symptom control can be achieved rapidly, frequently within a few hours when the intramuscular form used for initial control of acutely agitated psychotic states.⁴

Usually leaves patients relatively alert and responsive

Although some instances of drowsiness have been observed, marked sedation with HALDOL (haloperidol) is rare. In a report on a study with criminal psychotics the investigator states, "The patients remained alert and more amenable to psychotherapeutic intervention."⁵ Another investigator reports that HALDOL "normalizes" behavior and produces a sensitivity to the environment that allows more effective use of the social milieu and the therapeutic community.⁶

Reduces risk of serious adverse reactions

HALDOL (haloperidol), a butyrophenone, avoids or minimizes many of the problems associated with the phenothiazines. Hypotension is rare and severe orthostatic hypotension has not been reported. There is also less likelihood of adverse reactions such as liver damage, ocular changes, serious hematologic reactions and skin rashes.

The most frequent side effects of HALDOL (haloperidol)—extrapyramidal symptoms—are usually dose-related and readily controlled.

References: 1. Darling, R.F. *Dis. Nerv. Syst.* 32:31 (Jan.) 1971; 2. May, F.L., and Chen, C.H. *Psychopharmacology* 18:39 (Jan./Feb.) 1971; 3. Johnson, M.L., and Alpers, E. *Paper presented Amer. Ass. Psychotherapists Annual Meeting, N.Y.*, Sept. 15-18, 1971; 4. Marder, S.R. *Dis. Nerv. Syst.* 37:111 (Mar.) 1974; 5. Barwood, L.R.C. *Clin. Trials* 2:175 (Fall) 1965; 6. Information relating to Indications, Contraindications, Warnings

RISE OF THE MEDICAL DOCTOR

(STARR 1982)

- Growth of hospitals created demand and doctors became more dependent on their colleagues
- Doctors gained control of medical education and licensure
- Closure of medicine helped legitimate their high fees and public spending on hospitals, education, and research
- Physicians could then control access to their ranks (boundary heightening) and their fees

SUMMARY

- Causes and treatment of illness have varied widely over time - and not in a linear fashion
- Cultural dictates what symptoms are deemed “illness” and what groups are more “at risk”
- Culture also affects the people to whom we grant the authority to treat the ill

HISTORY AND ETHICS

- We've seen great medical advances, especially since the 18th century
- Did not come easily or without contention, however....

DR. J. MARION SIMS

THE FATHER OF GYNECOLOGY



SLAVERY AND MEDICAL EXPERIMENTS

- Many slaves and free Black people were subjects of dissection and experimentation without consent
 - Dr. Thomas Hamilton and the study of heat stroke
 - Grave robbing of Black cemeteries
- Ethical problems here? Consequences?

TUSKEGEE SYPHILIS STUDY



STUDIES ON VULNERABLE POPULATIONS

- Nazi investigations
- Prisoners
- Orphans
- Mentally ill
- US Military members
- Terminally ill patients
- Infants

THE 'MONSTER' STUDY



Wendell Johnson Speech
and Hearing Center

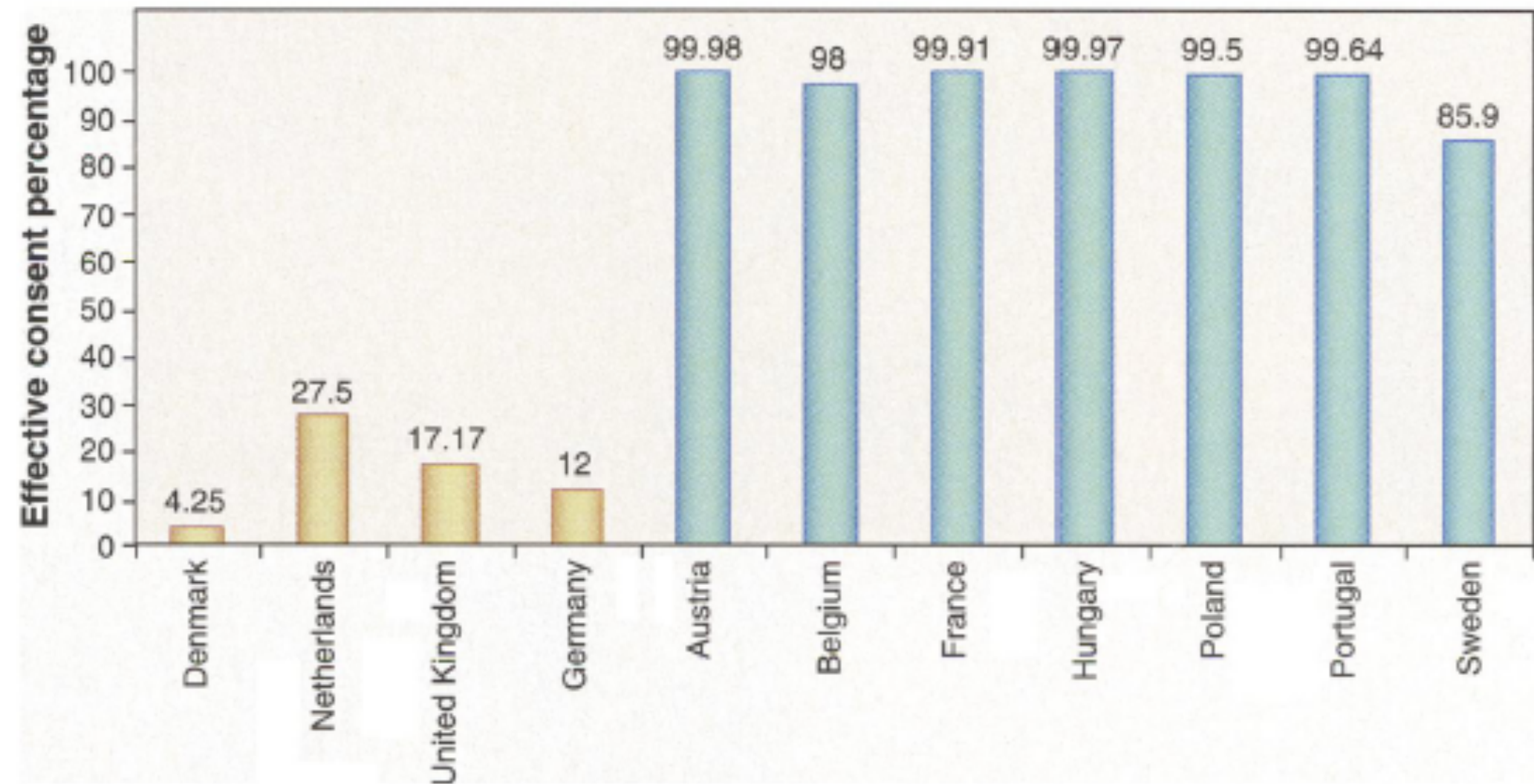
INSTITUTIONAL CHANGES

- Development of Institutional Review Boards for institutions receiving federal research support
- Belmont Report:
 - Respect for Persons
 - Beneficence
 - Justice

DECLARATION OF HELSINKI

- "The primary purpose of medical research involving human subjects is to understand the causes, development and effects of diseases and improve preventive, diagnostic and therapeutic interventions (methods, procedures and treatments). Even the best proven interventions must be evaluated continually through research for their safety, effectiveness, efficiency, accessibility and quality."
- "While the primary purpose of medical research is to generate new knowledge, this goal can never take precedence over the rights and interests of individual research subjects."
- "It is the duty of physicians who are involved in medical research to protect the life, health, dignity, integrity, right to self-determination, privacy, and confidentiality of personal information of research subjects. The responsibility for the protection of research subjects must always rest with the physician or other health care professionals and never with the research subjects, even though they have given consent."

ORGAN DONATION



Effective consent rates, by country. Explicit consent (opt-in, gold) and presumed consent (opt-out, blue).

CONTEMPORARY ETHICS ISSUE

BLOOD DONATION



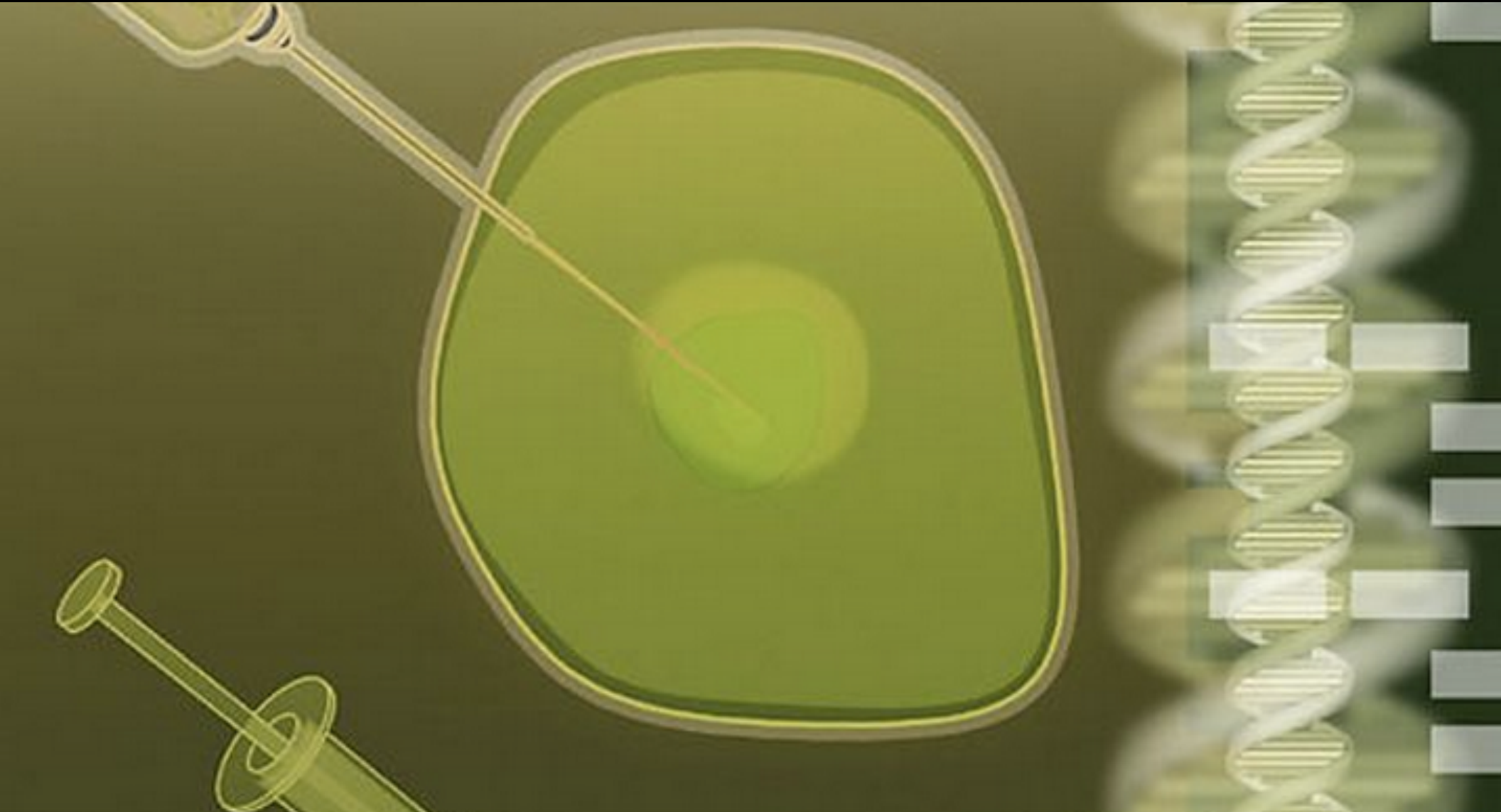
THE IMMORTAL LIFE OF

HENRIETTA LACKS



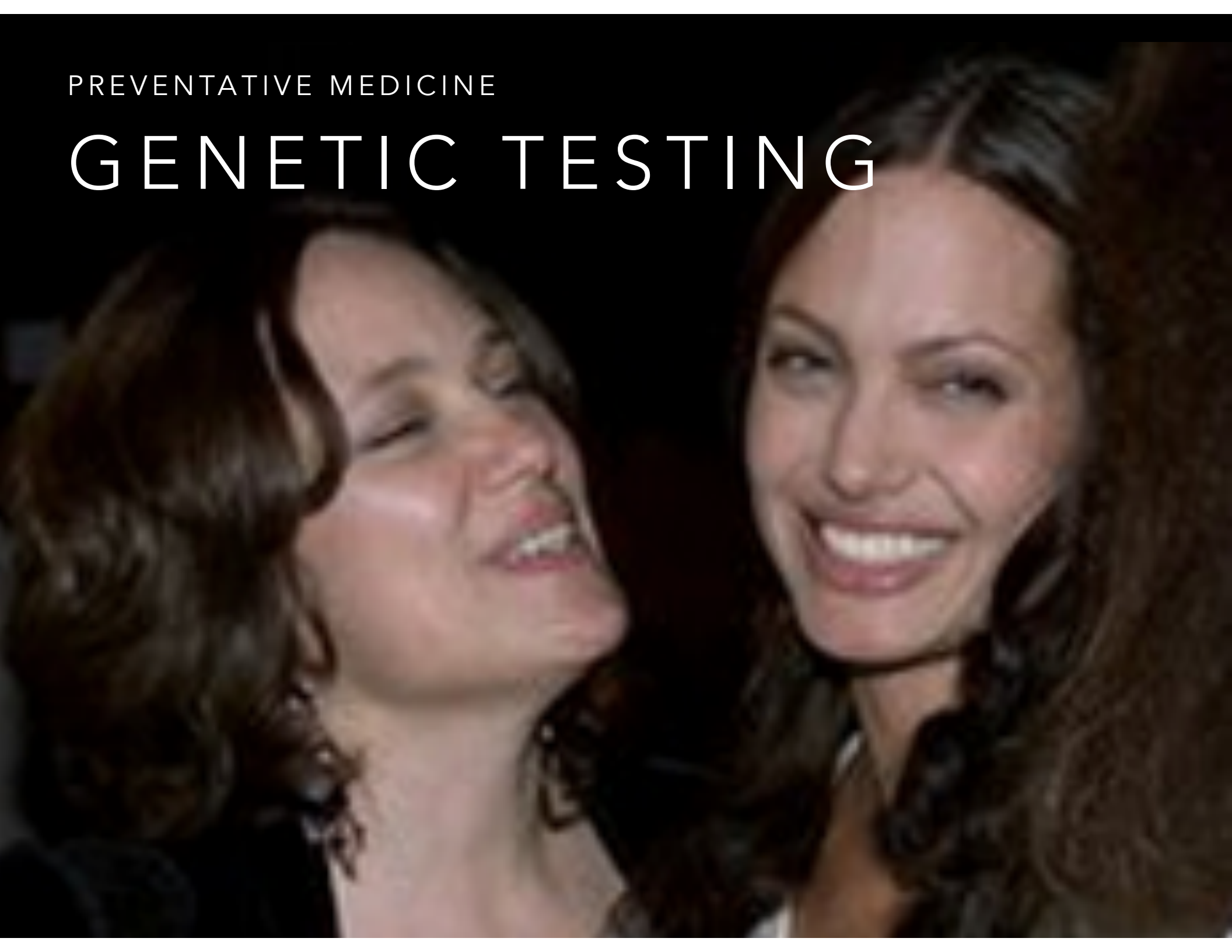
USE GENES TO TREAT OR PREVENT DISEASE

GENE THERAPY



PREVENTATIVE MEDICINE

GENETIC TESTING



ETHICAL ISSUES: GENETIC TESTING

- Testing limitations
 - Some tests cannot identify all mutations that cause a particular condition
 - May have limited predictive value
 - Epigenetic factors
 - Screening tests have risks of false-positives and false-negatives
- Personal and social consequences