



Medical Ethics in Pandemics- Choosing What's Right

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Disclosure statement

- This presentation will promote quality or improvements in health care and will not promote a specific proprietary business or commercial interest.
- I have no financial conflicts of interest to disclose
- The information will be well balanced, evidence based and unbiased.

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Qualifications

- Experience and learnings
- Evolving cultures
- Awareness- Reflections
- All physicians eligible in concert with their patients
 - Trusted therapeutic alliance
- No ultimate arbiter- multiple competing factors



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Why Medical Ethics?

- Why required for renewing medical licenses?
 - Unprofessional conduct, malpractice with harm
- Why ethics committees?
 - End of life decisions; informed consent; resource allocation; prevent harm
- The pot and the kettle
 - Laws; regulations; judgments
- What is the problem?
 - Disagreements; distrust; outliers; history
- Is this the solution?
 - Resolve disputes, build trust, continuous improvement, doing right

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In the News

Doctors Settle in SpineFrontier Kickback Cases

Surgeons who admitted accepting "consulting" fees from the Massachusetts-based company for services they did not perform paid the government hefty settlement fines.

Dr. Jeffrey R. Carlson Newport News, Virginia	\$1,750,000
Dr. F. Paul DeGenova Columbus, Ohio	\$486,985
Dr. Michael Murray New York	\$330,668
Dr. Joseph Shehadi Columbus, Ohio	\$323,420
Dr. Agha Khan Maryland	\$310,843
Dr. John Atwater Florida	\$105,149

Chart by Hannah Norman/KHN
SOURCE: Department of Justice

KHN

What is medical ethics?

- Conscience
 - Awake to moral standards and socially acceptable actions – patient comes first
 - Morality relies on authority – faith or tradition
 - Ethics relies on facts and values – may evolve (physician-assisted dying)
 - Bias awareness, clear goals, balanced recommendations
 - Deliberation- explore, discuss beliefs, values and facts, follow-through
- Choices with consequences and reactions
 - Using values, facts, and logic to choose a course of action
 - Right from wrong
 - Different value systems- two "rights"
 - Different facts
 - Different logic
 - Consequences may be expected or unexpected
 - Reactions may be positive or negative

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Examples

- Withholding treatment due to budgets or insurance coverage
- Accepting money from pharmaceutical or device manufacturers
- Upcoding
- Romantic involvement with patient
- Covering up a mistake
- Reporting an impaired colleague
- Cherry-picking patients – closing practice
- Defensive medicine- low value care
- Hiding bad news
- Impaired patients' driver's licenses



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Guiding principles

- Autonomy – doctors advise, patients choose
- Distributive Justice- fair distribution of benefits and burdens
- Beneficence- doing good for individuals and public
- Nonmaleficence- first do no harm
- Transparency
- Respect
- Trust

Interpretation: Limits or affirmation?

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Medical Ethics Domains

- Hospitals
 - Withdrawing treatment, informed consent, peer review, ethics committees
- Private Practices
 - Resource allocation, time management, cultural sensitivity, health literacy
- Clinical Research
 - Informed consent – benefit someone else
 - Institutional review board
- Public Health and Policy
 - Epidemics- infections, opioids, gun violence
 - Prevention- bike helmets, vaccinations
 - Affordability, quality of care, certification, tort reform



My Choices and My Consequences

- What I choose reshapes me
 - Why this career?
 - The expected – interesting work; helping people; autonomy
 - The unexpected – vicarious trauma; sleep deprivation; burnout
- Consequences and reactions
 - Fulfillment
 - Withdrawal



RECOGNIZING BURNOUT

- MASLACH BURNOUT INVENTORY
 - Emotional Exhaustion – work related; “used up”
 - Depersonalization- callous
 - Reduced Personal Accomplishment – sense of failure
- MINI Z BURNOUT SURVEY (AMA)
 - Satisfaction, Stress, Energy Level, Work Control, Documentation Time, Chaos, Values, Team, EHR Proficiency
- PHYSICIAN WELL-BEING INDEX (MAYO)
- INDICATORS
 - Disengagement, Disinterest, Disconnection



PREVALENCE AND TRENDS BURNOUT SYMPTOMS

- PRIMARY CARE – 79% (HIGHER THAN OTHER CAREERS)
- ALL PHYSICIANS- 68%
- ACADEMIC PHYSICIANS
 - DEPENDENT ON VALUE AND RESPECT (NOT PAY, AGE, GENDER)
- YOUNG, FEMALE, YOUNG CHILDREN, DEBT
- TRENDS- DECREASING THE PAST 6 YEARS
 - AMA, MAYO, STANFORD
 - MORE SYSTEM INTERVENTIONS



BURNOUT CONSEQUENCES Relationships to Ethics

- MEDICAL ERRORS
- MALPRACTICE SUITS
- ICU MORTALITY
- PATIENT RECOVERY TIME
- PATIENT SATISFACTION
- PATIENT ADHERENCE TO ADVICE
- PRODUCTIVITY/ EFFORT
 - LOSS OF 7 MEDICAL SCHOOL GRADUATING CLASSES/ YEAR (US)
- DEPART CLINICAL PRACTICE
- TURNOVER \$\$
- 25% HIGHER SUBSTANCE ABUSE
- 2x HIGHER SUICIDE IDEATION
- HIGHER SUICIDES
 - +40% MALES; +130% FEMALES



ROOT CAUSES Do Ethics Courses Help?

- EXTRINSIC
 - WORKPLACE CHAOS
 - ADMINISTRATIVE BURDENS
 - EHR DOCUMENTATION BURDENS
 - CHANGING FINANCES
 - OUTDATED TECHNOLOGY
 - REGULATIONS
 - EXPECTATIONS
 - LIFE PHASE DEPENDENCY
 - STUDENTS, RESIDENTS, FELLOWS
 - EARLY, MID, LATE CAREER
- INTRINSIC
 - SOLITARY WORK
 - ISOLATION, LONELINESS
 - DISCONNECTED FROM PEERS
 - SACRIFICE
 - <20% TIME ON MOST MEANINGFUL
 - COMPETITION
 - DRIVEN
 - HESITANT TO SHARE FEARS
 - STIGMA



SIMILARITIES

- ANXIETY
- DEPRESSION
- SUICIDE IDEATION
- SUBSTANCE USE DISORDER
- POST TRAUMATIC STRESS DISORDER



SOLUTIONS

- SHARED RESPONSIBILITY – MEASURE, TRACK, IMPROVE
 - HEALTH SYSTEMS, ORGANIZATIONS, INSTITUTIONS
 - DUTY HOURS, SCRIBES, TEAMS, PEER SUPPORT, MEANINGFUL WORK
 - ZERO-BURNOUT PRIMARY CARE PRACTICES (AHRQ STUDY OF 715 PRACTICES)
 - SOLO AND SMALLER PRIMARY CARE PRACTICES- INDEPENDENT FREE CHOICES
 - QI STRATEGIES, TEAMWORK, LEARNING CULTURE, PSYCHOLOGIC SAFETY, FACILITATIVE LEADERS
 - NOT PATIENTS/DAY, EHR CHANGE, MEDICAID INSURANCE
- GOVERNMENT POLICIES
 - PATIENTS BEFORE PAPERWORK
- INDIVIDUAL PHYSICIANS
 - MINDFULNESS, COUNSELING, STRESS MANAGEMENT, EXERCISE, SELF-CARE, SMALL GROUPS



CLARK COUNTY WORKPLACE & PEER RESOURCES

- Hospitals, Medical Groups, Academia –
 - Confidential Wellness Programs
- Employers/ Insurance Plans
 - Employee Assistance Programs
- Physician Coalition Southern Nevada and CCMS
 - Advocacy- Lower Administrative Burdens
 - Education
 - Networking
 - Peer Support
- Nevada Physician Wellness Coalition
 - Confidential Counselling

CLARK COUNTY BEHAVIORAL HEALTH RESOURCES

- SAMHSA Help Line- **1-800-662-HELP (4357)**
- Nevada 211 – Dial 211
- Oasis Counseling – 702 294 0433
- Nevada Psychological Association - (888) 654-0050
- Bridge Counseling- (702) 474-6450
- ROI Counseling- (702) 816-2595
- Community Counseling Center- (702) 369-8700
- Alliance Mental Health- (702) 485-2100
- Focus Mental Health Solutions- (702) 790-2701
- Nevada Physician Wellness Coalition - **775-404-3307**

Their Choices and My Consequences

- What they choose reshapes me
 - Curriculum; assignments; policies; covered benefits; pay; priorities; values
 - Masks, social distancing, hand-washing, vaccinations
- Consequences
 - Private freedom versus public good
 - Stress from incongruity of values
- Reactions
 - Hesitancy, refusal, distrust, polarization, conflict

My Choices and Patients' Consequences

- What I choose affects my patients
 - Prices, availability, accepted insurances, time management, teams
 - Transparency- conflicts of interest, bad news, honesty, minors, privacy protection
 - Clarity of explanations, active listening, trusted therapeutic alliance, compassion
 - Shared decision making, informed consent, control, familiarity, reliability, hope
 - Second opinions, data sharing, apologies
 - Advance directives, care-giver engagement
- Consequences
 - Results- improvements, complications, remediation
- Reactions- patients, peers, family, community

Patients' Choices and My Consequences

- What my patients choose affects me
 - Lifestyle choices, adherence to recommendations, risky behaviors, vaccinations, transfusions, procedures, readiness to change
 - Belief conflicts – abortion, transfusions, vaccinations, technologies
 - Trust- are you enough like me to like you and trust you?
 - I don't care how much you know until I know how much you care.
- Consequences
 - Patient health outcomes and quality of life
 - My quality scores, career satisfaction, peer perceptions, interpersonal conflict
- Reactions
 - Disagreements- seek first to understand, refer if unresolvable

Families' Choices and Patients' Consequences

- What families choose affects patients
 - Dementia, frailty, end of life, futile treatments
 - Advance directives, POLST
 - Power of attorney, guardianship
- Consequences
 - Elder abuse, patient wishes
- Reactions
 - Disagreements, conflict resolution
 - Facts or expectations?
 - Define issues, goals, what matters, control issues
 - Respectful language – disconnect machine vs. withdraw life support
 - Safe environment
 - Negotiation

Payers' Choices and My Consequences

- What payers cover and pay affects me and my staff
 - Credentialing, contracts, performance feedback
 - Covered benefits, discounts, FFS or value-based payments, bundled payments
 - Incentives aligned with values?
 - Administrative complexity and burdens
 - Competition and consolidation
 - Sites of service, telehealth, remote monitoring payments
- Consequences
 - Sustainability
- Reactions
 - Withdrawal
 - Replacement

Society's Choices and Patients' Consequences

- What our society chooses affects my vulnerable patients
 - Access to jobs, pay, education, food, housing, transportation opportunities
 - Rights of unborn/ women's autonomy
 - Genetic test disclosures
 - Resource allocation in emergencies- age discrimination
 - Society/ culture= cumulative choices of a people over time – variable
- Consequences
 - Inequities, discrimination, poor health, unmet social needs, morbidity, mortality
- Reactions
 - Violence, unrest, polarization

Roles of physicians

- Listen- Science with a heart – my patients
- Learn from mistakes – my practice
- Share best practices – my collaborations
- Prioritize the important over the urgent – my ethical decisions
- Build trust – better outcomes
- Advocacy – our public and organization policies
 - Opioids, gun violence, affordability, precision medicine, Big Data, new technology
 - Genetic testing, organ donations, physician-assisted dying
 - Pandemics- personal freedoms, public good- ethics of selfishness

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Questions?

