

SENTINEL ETHICS COMPONENT: Setting the Scene

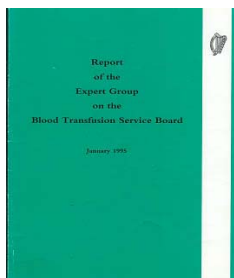
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Topics

- Observations and a "Dawn Raid"
- A Ramble through some Aspects of:
 - Medical Practice
 - Radiological Practice
 - Radiation Protection and ICRP
 - Law and Medico Legal Concerns
 - Public Discourse/Ethical Concerns
- Comment on Some SENTINEL Work
- Conclusions

A DAWN RAID

Expert Group and Finlay Reports



Medical Practice

Success of Medical Practice

- Immense Technical Success accompanied by Societal Failures in practice.
- Community and Individual Expectations create an Iconographic Role for the Health Care System (Medical Soaps = Myths)
- Hospitals are Cathedrals



Medical Soaps (Myths)

- Holby City
- Casualty
- ER
- The Royal
- Grey's Anatomy
- Scrubs
- The Clinic
- Silent Witness
- Dr Finlay's ---



Problems of Medical Practice

- Organ Retention, Blood, Foetal Tissue, Organ Donor, and Infection Scandals.
- High level of Politicisation
- Distrust of Authority
- Damaged (possibly collapsing) Self-Regulation Processes
- Challenges to many aspects of Practice
- Consumerist and Medical Tourism



Radiological Practice

and Radiation Protection



Defining Radiological Practice

- Exceptional Growth and Exceptional adoption of New Technology
- Ambiguous Popular Image
- Within Radiation Protection, hold much of knowledge base. Relies on Radiation Protection for Safety and in Turf Battles
- Paradoxically little knowledge of dose quantities or units
- Management of *justification* is +/- No dose limit
- Authorisation/Consent Issues



Defining Aspects of Radiation Protection

- Relatively Strong hard science base
- Developed mainly outside medicine, but is used mainly within medicine
- Employs **arcane impenetrable language** invented and protected by Physicists
- Inept in Social and Political Sciences (Note EU Medico Legal Survey)
- Global Industry and Local Health Care Provision
- Justification; ALARA; Dose Limits



Theoretically Good (----- as far as it goes) -----But

- ALARA and related, refined quickly after cardiac injuries
- ICRP advances, mainly optimisation
- Justification: Referral Criteria Large gaps in use.
- Social perceptions of Radiation, Justification deficits
- New ethical issues from Popular Culture, and --- Medical Practice



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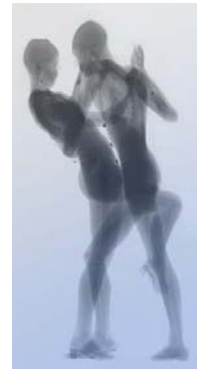
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- BMJ 327, August 2003 Shiralkar *et al* quoted by Neil Lewis
- 130 Drs; 40 SHO, 40 SpR, 40 Consultants, 10 Con Radiologists
- **Chest x-ray dose, quantity and unit**
- 0% knew the dose quantity and unit of a chest x-ray



Provocatively Decorative!



What would ICRP recommend?



Medico Legal Issues and Non Medical Exposures



Ethical Concerns & Public Discourse



Examples of Areas

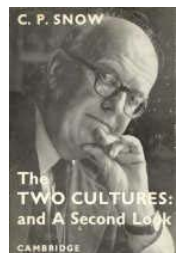


- Right to Life
- Right to Bodily Integrity
- Individual Choice
- Consent
- Equality
- Equity
- Special Needs
- Ageism
- Trust of Authority
- Trust in Professions
- Attitudes to:
 - Suicide
 - Euthanasia
 - Marriage and Divorce
 - Single Parents
 - Religion and Race
 - Equality
 - "Special Needs"
 - Disability
 - Gender Issues

Ethical Studies and Practice

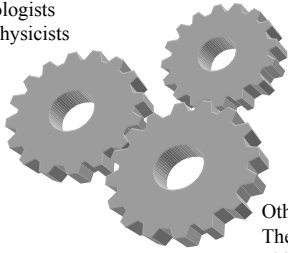


- English Language: problems for Ethics since Oxford/English School
- Consequent Trivialization ~Word Games
- Public Lack of Dialogue between Sciences and Humanities, CP Snow's "The Two Cultures"
- Problem now worse and deeper. Symptom is withdrawal from science
- Public and Private Morality
- Consumer Choice and Individualism



SENTINEL OUTCOMES

Radiologists
and Physicists



Public,
Political and
Media

Other Professions,
Theology, Ethics
Philosophy, Law,
Social Sciences



Ethical Issues in Radiology

- Work brought to a focus in two Meetings
- Justification in High Dose and High Cost Procedures, Glasgow, 8th Sept 2007. (Radiologists, Cardiologists, Physicists, Managers, Health Economists)
- Ethical Issues in Radiology (Broad Review), Dublin, 27th/28th Oct 2007. (Radiologists, Physicists, Philosophers, Theologians, Regulators, Parliamentarians, Press)



Some Issues Identified

- Philosophical assumptions underlying ICRP Recommendations need re-examining
- Major Issues around Justification
- Medico Legal and Non Medical Exposures
- Population Screening Issues
- Issues around consent, authorisation, personal choice, self referral etc.
- Pregnancy Issues
- Non Transparent Language for Discourse, particularly Quantities and Units



GENERAL ~ ICRP

- Identified a problem for Radiation Protection arising from a shift in dominant values in society since ICRP 26 and 60. Revisions based on Scientific, Technical, Risk Related Data, and Clinical Review
- Deeply underlying assumptions have not been visited or articulated to any great extent, and are of the 50's and 60's.
- Our discourse lacks engagement with many defining features of medical practice and popular culture. Basis for some radiation protection is now removed from the concerns of the public, and lodged almost exclusively with professions.
- Desensitisation of the professions to concerns of the public, eventually gives rise to ethical issues



Philosophical Basis ~ ICRP

- Dominant values in Society have moved along the continuum from Paternalism towards individual autonomy.
- ICRP is in roughly the same place on this continuum that it took up in ICRP 26
- Recent additional Philosophical Challenge to basis for dose limits by Wikman-Svahn
- Also, reduced trust in ICRP, both on Environmental and Medical Issues
- Formal Study needed to identify options



Justification

- Sometimes Weak or Lacks Transparency in Practice
- Seriously underdeveloped scientifically, BMJ.
- Consent, individual choice and self referral
- Exemption from dose-limit always warranted?
- Whistle blower concerns raised at length on Justification Issues



Pregnancy



- Basis for Recommendations
- Diversity of Practice throughout Community
- Widespread high dose procedures need a more consistent approach
- Consent or Authorisation?

Other Issues



- Carers and Comforters
- Population Screening (extent of innovation, eg., PET/CT for Lung Cancer)
- Self Referral/Lifestyle Radiology/ personal choice and the dose limit exemption
- Unnecessary Lack of Transparency with Units and Quantities
- Training Issues. Cyprus Workshop. Objectives of Training.

Conclusion A



- Practice good within it's own context
- Somewhat divorced from context with respect to
 - Peer Pressure
 - Medical Context
 - Defence of Public Interest
 - Medical Practice
 - Radiation Protection Fundamentals
 - Popular Culture
 - Non Medical Practices
- Wolpert and Warnock
- Hence Reflection and Exploration

Conclusion B



- ICRP Recommendations need re-examining
- Justification
- Medico Legal and Non Medical Exposures
- Population Screening
- Consent, authorisation, personal choice, self referral
- Pregnancy
- Non Transparent particularly Quantities and Units
- Training