

Bioethics

A DIALOGUE TO MAKE HEALTHCARE BEFITTING MANKIND

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Achievements in biological sciences and technology, particularly in biomedical engineering, while creating new spheres of research, are presenting controversial ethical problems to health professionals and society in general.

A most significant National Dialogue on Bioethics was held between the 7th and 9th July 1988. The first session dealt with 'The various problems that the development of science and medicine raised in matters affecting life and death'. This was followed by a dialogue for health professionals on 'Life Sustaining Procedures: Ethical Considerations'. The National Dialogue was brought to an end by the National Seminar on "Bioethics — The Case for a Health Ethics Council" at the University of Malta.

The Prime Minister, Dr. E. Fenech Adami, in his opening address, put forward a proposal which the Government is considering to present to the United Nations, so that an International Law on Scientific Research will be drawn up, which will regard research as a common Heritage of Mankind.

For this Dialogue, Prof. Laurence J. O'Connell, Associate Professor at St. Louis University, Missouri, in Theology and Bioethics, and Rev. Fr. Charles Vella, who teaches Ethics and coordinates the Ethics committee at the Instituto San Raffaele in Milan, were joined by experts from the legal, medical, social and moral fields, to examine the problems we are facing in our country in the field of Bioethics.

Among the various issues discussed were artificial insemination, *in vitro* fertilisation, genetic engineering, donor embryo transfer and organ transplantation. Other issues were terminally ill patients being kept alive on respirators, patients on renal dialysis, clinical research and drug therapy.

The objectives, methodology and functions of an ethics committee were also discussed. The functions of an ethics committee is three pronged. On one hand, it is a consultative and advisory body providing guidelines and advice and mediating, if necessary, between doctors, health administrators, patients and their families on the other hand, it will evaluate scientific research and be assigned a formative function, acting as a catalyst for educational programmes at the University and for Continuing Education for all those involved in Health Care.

This first dialogue has made us aware of the various ethical issues in medicine and has laid the foundation for a health ethics committee. The time is now ripe for the setting up of this ethics committee in Malta and for a follow up of this dialogue.

The president and the secretary of the Chamber of Pharmacists attended all proceedings and participated in the discussion during the National Seminar. They had the opportunity to meet Fr. Vella and Prof. O'Connell. Fr. C. Vella was interviewed during a subsequent visit to Malta (See page 14).

THE PHARMACIST AND BIOETHICS

Communciation by President, Mrs. M.A. Sant Fournier, B.Pharm., M.Phil., at Discussion on 'Ethical Issues in Medicine' during the National Seminar, 'Bioethics: The Case for a Health Ethics Council', Saturday, 9th July 1988 at the University of Malta.

Honourable Sirs, Mr. Chairman,
Ladies and Gentlemen,

Firstly, I wish to thank the Honourable Minister for Social Policy for inviting the Chamber of Pharmacists to participate in this National Dialogue on Bioethics.

Secondly, may I point out that ethical issues concern an important professional member of the Healthcare Team — that is the pharmacist, the dispenser of medicines to patients and colleagues and of ethical healthcare counsel to the patient and his family — for surely life-sustaining is also concerned with administration of medicines.

In the U.S., Clinical Pharmacy (or Ward Pharmacy there is some controversy regarding the name) has become a discipline in its own right and is being given growing importance in European countries, including Great Britain.

So, granted that much needed progress in hospital pharmacy locally will become a reality in the not too distant future, Maltese Pharmacists will be faced with still more 'anguishin' ethical issues together with their medical col-

leagues in the healthcare team — I am thinking of cessation of therapy, TPN, hydration, chemotherapy and also of research such as clinical trials of pharmaceuticals, traditionally produced or through biotechnology.

But this ethical aspect can also be extrapolated to Community Pharmacy Practice which is becoming more patient-oriented and is faced with ethical issues as supply of I.U.C.D.'s, Abuse of Drugs, Misuse of Medicines, irrational prescribing, patient's and family's right to know and confidentiality (to name but a few).

In humanizing hospitals and general practice, the pharmacist cooperates with his medical colleagues, especially in informing the patient on particular therapy thus improving compliance. The crux is inter-professional relationships and communication.

Re: ethics in curricula — to which Dr. Aquilina, Rev. Pace yesterday and Prof. Muscat today — have referred I have read in the March 1988 issue of *Sanare Infirmos*, the HSR excellent journal, that EEC countries will be including Medical Bioethics in their curricula — and propose their inclusion in Pharmacy Courses too. The pharmacy profession in Malta has long been governed by an ethical code and the inclusion of Ethics in the local Pharmacy course curriculum is warranted.