Bioethics and Pain Management: A New and Practical Application

Esther I. Bernhofer, PhD, RN-BC, CPE
Nurse Scientist II
Cleveland Clinic
Office of Nursing Research and Innovation
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Conflict of Interest Disclosure

• Author’s conflicts of interest:
  • Esther Bernhofer declares no conflict of interest

Educational Objectives

At the conclusion of this activity participants will be able to:

• Describe the history of bioethics and pain management.

• Discuss how the bioethics framework can be used to solve/manage pain management dilemmas.

• Apply the use of a bioethics framework to real cases to solve a pain management dilemma
The fundamental question of pain management:

What is the right thing to do?

wrong right

Bioethics as a Field

It was 1970-something.....

We needed philosophical, practical, moral guidelines, for fair patient care

We got Autonomy, Benevolence, Non-maleficence, Justice

"Bioethics saw its art institutionalized within the halls of medicine during the 1980s, when a presidential commission called for the creation of hospital-based ethics committees." Blacksher, 2001

Bioethics as a Field

Has a structural framework

Combines ethics with empirical evidence

Useful for complex clinical dilemmas
Bioethics as a Field

Ethics, being a dynamic field, subsequently includes multiple interprofessional disciplines and perspectives to give consideration to theoretical ethics, empirical ethics, professionalism, humanities, spirituality, religion, law, and public policy.

Ohio State University Bioethics Program website 2018

So what’s New?

• Past

• Present

• Future

History of Bioethics Specific to Pain Management

• There has always been a moral imperative to treat pain and suffering

• Those who reported suffering without visible evidence (“pain without lesion”) were often suspect of ulterior motives, stigmatized, and poorly treated.
History of Bioethics Specific to Pain Management

Betty Ferrell - 1997
The Role of Ethics Committees in Responding to the Moral Outrage of Unrelieved Pain. (In Bioethics Forum (Vol. 13, No. 3, pp. 24-26.)

Erika Blacksher, MA - 2001
Hearing From Pain: Using Ethics to Reframe, Prevent, and Resolve the Problem of Unrelieved Pain (in Pain Medicine, 2(2), 169-175.)

Daniel S. Goldberg - 2014
The Bioethics of Pain Management: Beyond Opioids (New York, NY: Routledge.)

Solving Moral Dilemmas
Combine Evidence and Ethics

To inform better pain assessment.

To help understand patient autonomy.

To help decide whose risk vs. whose benefit takes priority.

To support ethics-driven pain management policies.

Evidence-Based-Practice
(Evidence)

“EBP is the integration of clinical expertise, patient values, and the best research evidence into the decision making process for patient care. Clinical expertise refers to the clinician’s cumulated experience, education and clinical skills. The patient brings to the encounter his or her own personal preferences and unique concerns, expectations, and values. The best research evidence is usually found in clinically relevant research that has been conducted using sound methodology.” (Sackett D, 2002)
Add Moral Theory
(Ethics)

- Established moral beliefs and vital norms, shared by the population.
  - Come from a Higher Power, Being, God, Religion, etc.
  OR
  - Are established by leadership and populous consent
- Customary moralities are codes of conduct that can differ from group to group.

The Bioethical Framework

A Case-based Approach To Ethical Decision-making

Medical Indications - medical assessment, goals, treatment options
Patient Preferences - The patient's values
Quality of Life - The objective is to improve, address, patient's quality of life, as experienced by the patient.
Contextual Features - social context, family, the law, culture, hospital policy, insurance companies, financial issues, etc.

How to?

- It’s about understanding the relationship between patient and clinician (“the credible patient”)
- And understanding the personal values of both patient and clinician
It always begins with an assessment

• Proper pain assessment builds a relationship!
• You need it to figure everything else out!
• How do you do that?

Case Studies

Look for moral/ethical aspects of the case.

Look for the empirical evidence for pain treatment.

Values Model

• Advances in pain science with new treatment options abound
• There is evidence that stigma continues and pain is not always well managed

• A model of values-based pain management decision-making has emerged to partially explain this phenomenon.
Axiological Pathway

1. Patient-provider relationship

2. Personal values

3. Pain management (treatment) decision

Conclusion

1. There is never a standard ‘right thing to do’ in pain management

2. The practical application of bioethics to pain management quandaries may help provide the answer.
   ..........Contact your Bioethics committee!

3. The practical application of ethics involves understanding how personal values mediate relationships.
   ..........Check how personal values play a part in the equation

Thank you!

Questions??
References

References (continued)