

Medical Ethics Medico-Ethical Aspects concerning Quality of Life

Round Table

F. Gerstenbrand, Vienna

Karl Landsteiner Institute for
Neurorehabilitation and Space Neurology

9th International Congress on current treatment and
therapeutic perspectives in Alzheimer's, Parkinson's disease,
MS and Epilepsy

January 27-30, 2011
Athens, Greece

Hippocratic Oath

Obligation to heal

Not to do anything to harm the patient
No continuation of therapy in untreatable diseases
No therapy in advanced physical and mental destruction
No continuation in prolongation of life for hours or days
No prolongation of suffering during dying
Not to tell anyone details about patients
No admitting of lethal poison even as advice

Will to respect the teacher like one's own parents, sharing one's
life support with teacher and his successors, treated like own
brothers

Medical teaching to own sons and the sons of the teacher or to
pupils bound by physicians rules and oath

World Medical Association, Helsinki Declaration, 1964 different amendments Medical Research Involving Human Subjects Ethical Principles

- Medical progress is based on research that ultimately has to be based in part on experiments involving human subjects
- In medical research on human subjects, considerations related to the well-being of the human subject should take precedence over the interest of science and society
- International Code of Medical Ethics : A physician shall act only in a patient's interest when providing medical care, which might have the effect of weakening the physical and mental condition of the patient
- Ethical Principles to provide guidance for physicians and other participants in medical research involving human subjects
Including identifiable material or identifiable data

The fundamental obligations of a physician

The right of a patient who is able to consent:

- To allow his physician to start treatment only after detailed information of all planned medical measurements.
- To interrupt the treatment at his own decision; in this case the physician is responsible for patients life and the recovering of patient's health.

The physician's obligations:

- To perform only treatment, which guaranties an improvement or a recovery of a patient.
- Physician is not allowed to perform any treatment, that is controversy to Hippocratic Oath ("surgery without sense", unnecessary surgery, unnecessary medication).
- To diminish patient's pain and suffering

Demands of the modern human being in the third millennium

- Application of all possibilities of modern medicine
- Avoiding of suffering
- Prolongation of life
- The right to get all medical support in higher age
- The right to get all medical support even in severe and untreatable diseases
- The right to get medical treatment even if there are mental disorders

New dimension in physicians activities

- The former fear to die too early is substituted by the fear to die too late (by means of modern intensive medical care), Pöltner 2002.
- Fear of a medical over treating and prolongation of suffering as a consequence

Health economic measurements diminishing medical support

- Restriction of treatment in elderly people (expensive surgery, expensive medication, etc.)
- Restriction of treatment in cancer patients with doubtful treatment program
- Indirect passive euthanasia due to restrictions
- Restrictions in care facilities

Euthanasia
eu thanos – good death
(peaceful dying)

Euthanasia – changes in its ideology, 20th century :

- Intended death of a human being
- Exclusion of the phase of dying, the way to be dead

3 forms of Euthanasia:

Active Euthanasia

- Euthanasia without free will of patient, without the knowledge of the patient (Austria: assassination §75 STgB)
- Free willing Euthanasia performed by a physician or medical personal (Austria: criminal act §77 STgB)
- Assisted suicide (Austria: criminal act § 78 STgB)

Passive Euthanasia - included in the Hippocratic Oath.

- Decision to interrupt a running treatment in almost dying and dying patients, with continuation of all care (nutrition, liquid support, basic medical support, etc.)
- Renunciation of "maximal therapy" in case of complications in severe and untreatable conditions.

Forced Euthanasia

"Third Reich":

Liquidation of human beings, titled as "life not worth living", (mentally disturbed, brain damaged human beings, hereditary progressive neurological diseases)

"Euthanasia as a form of liquidation to preserve the life of healthy persons".

Ethnic form of Euthanasia:

Massai ritual: Old people are brought in the savannah, with nutrition and water for only 3 days .

Modern form:

No treating of old aged, cancer patients in severe state , etc.

11.30-12.00 Alzheimer's disease-New approach to pathogenesis and therapy.
J. Lezsek

12.00-12.30 The cerebellum in Alzheimer's disease
S.J.Baloyannis

12:30- 15:00 Break

15:00 -16:00 Poster Viewing
Chairpersons: V.Costa, J.Lezsek

16:00 -17:30 Lectures
Chairpersons: K von Wield, P. Papathanasopoulos

16:00-16.30 Cognitive dysfunction in Multiple Sclerosis.
P. Papathanasopoulos

16:30-17.00 Is there a need to redefine Parkinson's disease
A. Korczyn

17:00-17.00 The limits of evidence based medicine in neurorehabilitation
D. Muresanu

17:00-17:30 Coffee Break

17:30 -19:30 Medical Ethics
Round Table Medico-Ethical Aspects concerning Quality of Life
Following Severest Damage of the Central Nervous System (CNS)

Chairperson: F. Gerstenbrand

Speakers:

K. Jellinger
K. Von Wild
A. Korczyn
L. Vecsei
S. Baloyannis

21.00-23.00 Gala Dinner

SATURDAY 29th of January 2011

10:00-10:30 Lecture
Chairpersons: F Gerstenbrand, S. Baloyannis

Neurological disorders in US Presidents- their effect on world events
J.Toole

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Palace**

January 2011

Hotel King George Place



HELLENIC SOCIETY FOR AMELIORATION
OF THE QUALITY OF LIFE
FOR CHRONIC NEUROLOGIC PATIENTS

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