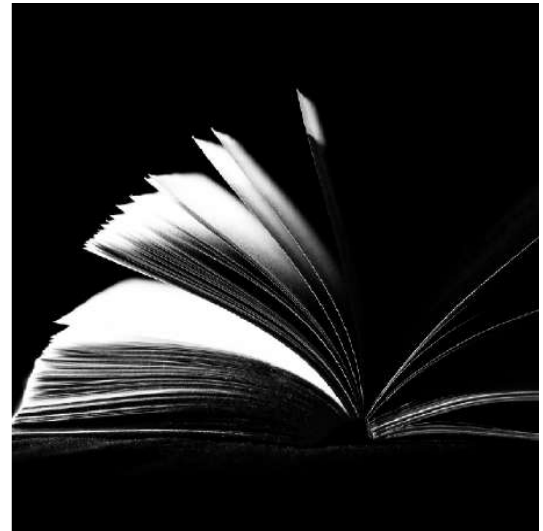


# ACTUALITÉ DE LA RECHERCHE EN ÉTHIQUE

REVUE DE PRESSE NATIONALE  
ET INTERNATIONALE

JUIN 2023





La *Revue de presse nationale et internationale* de l'Espace éthique Île-de-France et du Département de recherche en éthique de l'Université Paris-Saclay propose, tous les deux mois, un aperçu des publications récentes en bioéthique et en éthique de la santé en France et dans les autres pays.

Une sélection de publications, en français et en anglais, classées dans une dizaine de rubriques thématiques, permet de se faire une idée des sujets, notions et problématiques qui font l'actualité dans notre pays et dans le monde.

L'objectif n'est pas de recenser exhaustivement les travaux, empiriques ou réflexifs, qui sont publiés, mais bien d'inviter les lectrices et les lecteurs, à travers une sélection raisonnée, à découvrir les publications qui nous paraissent les plus remarquables au cours de la période écoulée.

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L'équipe de l'Espace éthique Île-de-France

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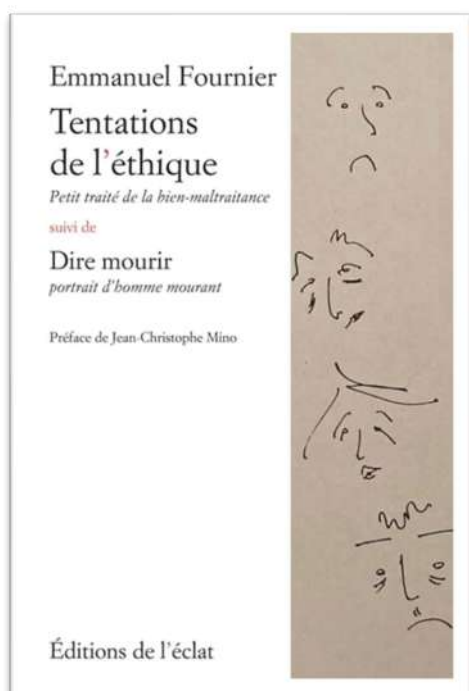
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## Une éthique vivante

Ce premier numéro de notre revue de presse nationale et internationale consacrée à l'actualité de la recherche en éthique montre le foisonnement de ce domaine de réflexion. Foisonnement en termes de sujets d'abord, qui vont de la procréation à la fin de vie, de l'intelligence artificielle aux gestes de soin les plus situés et incarnés. Foisonnement en termes d'approches également, puisqu'on y voit la multitude de méthodes qui peuvent être employées pour faire de la recherche en éthique : menée à partir de données empiriques ou conduite comme une analyse conceptuelle plus théorique, opérée de manière narrative ou plutôt réflexive.

Face à ces nombreux travaux publiés en langue française et anglaise, on est frappé par les résonances qui existent entre des réflexions pourtant conduites à des milliers de kilomètres les unes des autres et par des acteurs qui travaillent dans des contextes et des cadres de pensée que l'on considère très différents.

En France, l'actualité de l'éthique des derniers mois a été marquée par la parution de l'ouvrage d'Emmanuel Fournier, *Tentations de l'éthique*. Dans cet ouvrage, le philosophe médecin, disparu il y a un an, décrit et analyse l'apparition en éthique d'une nouvelle terminologie, où des termes tels que « résilience », « bientraitance »



ou « empowerment » ont la part belle. Ces injonctions, demande Emmanuel Fournier, ne traduisent-elles pas une générosité ambivalente ? Ne vont-elles pas de pair avec une contrainte économique et gestionnaire croissante ? À la lecture de cet ouvrage, on se pose cette douloureuse question : l'éthique peut-elle servir à rendre acceptable un projet de société immoral ? La critique constructive d'E. Fournier débouche sur une proposition pour dépasser ces équivoques et aborder autrement les questions posées par le soin (Fournier E., *Tentations de l'éthique. Petit traité de la bien-maltraitance*, Paris, Éditions de l'éclat, 2023, 224 p., préface de J.C. Mino, <http://www.lyber-eclat.net/livres/tentations-de-lethique/>).

Au même moment, aux États-Unis, le prestigieux *Hastings Center Report*<sup>1</sup> donne un titre pour le moins original à son numéro de mars-avril 2023 : « *Love is the answer* » (C'est l'amour qui est la réponse). Dans ce numéro, deux articles discutent le cadre de pensée proposé par le principisme (réflexion articulée autour des principes de respect de l'autonomie, de bienfaisance, de non-malfaisance et de justice) et proposent une alternative. Selon Tyler Tate et Joseph Clair, l'éthique nord-américaine est malade : du fait de pressions culturelles et économiques très puissantes, elle a adopté un mode de raisonnement mécanistique, le principisme, qui conduit les cliniciens à instaurer une distance avec leurs patients mais aussi avec eux-mêmes. Afin de faire battre à nouveau le cœur de l'éthique médicale américaine, il faudrait alors la rebâtir sur une vertu : l'amour (*Hastings Center Report* 2023 ; 53(2)).



Bien qu'ils soient très différents, ces travaux menés de part et d'autre de l'Atlantique montrent que l'éthique est un domaine de recherche profondément vivant, que la réflexion éthique non seulement ne se repose pas sur ses acquis, mais remet sans cesse l'ouvrage sur le métier. C'est toute la raison d'être de la présente revue de presse nationale et internationale, proposée par l'Espace éthique Île-de-France et le Département de recherche en éthique de l'Université Paris Saclay : donner un aperçu régulier de l'éthique en train de se faire, d'une éthique vivante, curieuse de ce qui s'élabore dans d'autres aires culturelles et avide d'échanges et de dialogues pour progresser.

Fabrice Gzil et Alexis Rayapoullé

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<sup>1</sup> <https://onlinelibrary.wiley.com/toc/1552146x/2023/53/2>

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## THÉORIES ET CONCEPTS



### La temporalité du point de vue du patient et de la relation de soins

Begué P., [Des instants de natalité, en fin de vie, ou quand le temps nous est compté](#), *Soins*, n° 876, juin 2023.

*Cette réflexion provient d'un échange avec des soignants exerçant en soins palliatifs qui manifestaient leurs difficultés à se synchroniser avec leurs patients. D'un côté, un temps tourné vers l'action, de l'autre, vers l'attente. Comment soigner lorsque le temps nous manque et nous échappe ? Nous pouvons d'abord reconnaître dans la différence et l'écart les fondements de la relation de soin. La mise en présence de ces corps soignants et patients permet de créer un trait d'union qui, dans l'instant, résiste aux temporalités distinctes.*

<http://dx.doi.org/10.1016/j.soins.2023.05.017>

### Nuancer la négativité de la vulnérabilité

Zagorak I, Stamenkovic T. [Health within illness: the negativity of vulnerability revised](#). *Medicine, Health Care and Philosophy* 2022;25:207-217

*This paper attempts to philosophically articulate empirical evidence on the positive effects of illness within the wider context of a discussion of the positive aspects of vulnerability. The conventional understanding holds that to be vulnerable is to be open to harms and wrongs; it is to be fragile, defenseless, and of compromised autonomy. In this paper, we challenge the assumption that vulnerability consists of nothing but powerlessness and dependence on others.*

<https://link.springer.com/article/10.1007/s11019-022-10072-5>

### Concept d'adaptation et transhumanisme

Fauvel G. [S'adapter ou s'updater ? L'ambivalence de l'adaptation néolibérale à travers l'exemple du transhumanisme](#). *Revue française d'éthique appliquée* 2022;13:75-88.

*Cet article propose d'envisager le néolibéralisme comme la phase contemporaine de l'évolution du capitalisme face à laquelle les individus n'auraient d'autre choix que celui de s'adapter pour survivre. Au centre des pratiques néolibérales, le concept d'« adaptation » semble être mobilisé en vue de soutenir la conformation des individus à l'environnement de la société de marché et à ses règles. Cette survie doit cependant être perçue positivement par les individus, afin que ceux-ci acceptent d'être éduqués à l'adaptation et au modèle de subjectivité qu'elle impose. Plus encore, ces derniers doivent être les acteurs de leur propre adaptation telle qu'elle garantira la*

justification de l'ordre de marché et de son inaltérable évolution. Les théories transhumanistes, notamment à travers la promotion d'une « augmentation biotechnologique de la morale » (moral bio-enhancement), participeraient de ce volontarisme en faisant de la survie au capitalisme la promesse d'une évolution inédite et supérieure de l'espèce humaine.

<https://doi.org/10.3917/rfeap.013.0075>.

## Expertise morale et valeurs libérales-démocrates

Niv Y, Sulitzeanu-Kenan R. [Liberal-democratic values and philosophers' beliefs about moral expertise](#). *Bioethics* 2023

*In recent decades, the discipline of bioethics has grown rapidly, as has the practice of ethical consultation. Interestingly, this new recognition of the relevance of moral philosophy to our daily life has been accompanied by skepticism among philosophers regarding the existence of moral expertise or the benefits of philosophical training. In his recent article in Bioethics, William R. Smith suggested that this skepticism is rooted in philosophers' belief that moral expertise is inconsistent with liberal-democratic values, when in fact they are compatible.*

<https://doi.org/10.1111/bioe.13171>

## Intuitions morales et stigmatisation en maladies infectieuses

Damsté C, Kramer K. [Moral intuitions about stigmatizing practices and feeding stigmatizing practices: how Haidt's moral foundations theory relates to infectious disease stigma](#). *Public Health Ethics* 2023;16:102–11.

*Despite extensive stigma mitigation efforts, infectious disease stigma remains common. So far, little attention has been paid to the moral psychology of stigmatizing practices (i.e. beliefs, attitudes, actions) rather than the experience of being stigmatized.*

<https://doi.org/10.1093/phe/phad002>

## Approches raisonnables de la clause de conscience

Brummett AL. [Philosophical failure and the reasonability view of conscientious objection: can reason adjudicate metaphysical or religious claims?](#) *The Journal of Medicine and Philosophy* 2023;48:12–20

*Robert Card has proposed a reasonability view of conscientious objection that asks providers to state the reasons for their objection for evaluation and approval by a review board. Jason Marsh has challenged Card to provide explicit criteria for what makes a conscientious objection reasonable, which he claims will be too difficult a task given that such objections often involve contentious metaphysical or religious claims.*

<https://doi.org/10.1093/jmp/jhac033>

## Injustice et médecine de précision

Green S, Prainsack B, Sabatello M. [Precision medicine and the problem of structural injustice](#). *Medicine, Health Care and Philosophy* 2023:1–18

*Many countries currently invest in technologies and data infrastructures to foster precision medicine (PM), which is hoped to better tailor disease treatment and prevention to individual patients. But who can expect to benefit from PM? The answer depends not only on scientific developments but also on the willingness to address the problem of structural injustice.*

<https://doi.org/10.1007/s11019-023-10158-8>

## Egalité d'opportunités dans l'accès aux organes des donateurs d'organes

Albertsen A. [Priority for organ donors in the allocation of organs: priority rules from the perspective of equality of opportunity](#). *The Journal of Medicine and Philosophy: A Forum for Bioethics and Philosophy of Medicine*, 2023;jhad023.

*Should priority in the allocation of organs be given to those who have previously donated or declared their willingness to do so? This article examines the Israeli priority rule in light of two prominent critiques of priority rules, pertaining to failure to reciprocate and unfairness.*

<https://doi.org/10.1093/jmp/jhad023>

## La « bonne mort » en pédiatrie

Moore B. [The fraught notion of a "good death" in pediatrics](#). *The Journal of Medicine and Philosophy*: 2023;48:60–72.

*In this article, I sort through some of the confusion surrounding what constitutes the controversial notion of a "good death" for children. I distinguish, first, between metaphysical and practical disagreements about the notion of a good death, and, second, between accounts of a good death that minimally and maximally promote the dying child's interests.*

<https://doi.org/10.1093/jmp/jhac036>

## Avoir une vie et être en vie

Enck GG. [The significance of the distinction between "having a life" vs. "being alive" in end-of-life care](#). *Medicine, Health Care and Philosophy* 2022;25:251–8.

*In end-of-life care discussions, I contend that the distinction between "having a life" vs. "being alive" is an underutilized distinction. This distinction is significant in separating different states of existence conflated by patients, families, and clinicians. In the clinical setting, applying this distinction in end-of-life care discussions aids patients' and family members' decision-making by helping them understand that being alive can differ from having a life.*

<https://doi.org/10.1007/s11019-022-10066-3>

## L'injonction à s'adapter exclut

Robin S. [L'adaptation au prisme de la maladie ou du handicap](#). *Revue française d'éthique appliquée* 2022;13:30–45.

*Le but de mon propos est de montrer que l'impératif d'adaptation, que nos sociétés contemporaines adressent à tout un chacun (travailleur, personne malade ou handicapée), impératif qui se pare du noble motif selon lequel s'adapter serait une qualité propre à tout être vivant et constitutive de la vie elle-même, est en réalité une injonction tendancieuse, inspirée par les exigences normatives et productives propres à nos sociétés néolibérales. En effet, cet impératif permet en réalité d'exclure ou de condamner à la relégation tout individu ne correspondant pas aux exigences normatives de nos sociétés contemporaines qui, loin d'être inclusives et conscientes de la richesse et de l'énergie susceptibles d'être déployées au profit de la communauté (l'entreprise, l'institution publique ou la société dans son ensemble) tendent à le culpabiliser.*

<https://doi.org/10.3917/rfeap.013.0030>

# ÉTHIQUE DU SOIN



## Expérience narrative et transplantation hépatique

Achino C, Pasqueron de Fommervault A, Duperret S, [Médecine et sciences humaines : une rencontre dans une expérience narrative avec les patients en parcours de transplantation hépatique](#). *Ethique et Santé* 2023; 20(2):101-105.

*Nous retraçons la rencontre d'un philosophe et d'un médecin autour de la question du récit dans le soin. Le récit offre à l'expérience de la maladie une configuration. Le parcours des malades est souvent semé d'obstacles, de retournements, d'évènements chaotiques imprévus et subis. La maladie s'infiltré brutalement ou insidieusement dans la vie des patients. Le récit de patients en parcours de transplantation hépatique, en présence d'un philosophe et d'un médecin, a permis la rencontre de deux visées, philosophique et médicale.*

<https://www.em-consulte.com/article/1591902/article/medecine-et-sciences-humaines-une-rencontre-dans>

## Enjeux éthiques de la réanimation en contexte humanitaire

David R. [Enjeux éthiques de la réanimation en contexte humanitaire : récit d'une expérience de terrain](#), *Ethique et Santé*, 20(2):130-139.

*La médecine humanitaire est une pratique singulière, dont les enjeux éthiques sont nombreux. Si elle peut parfois représenter une activité permanente, elle se superpose le plus souvent à une pratique médicale plus habituelle, dans son pays d'origine, inscrite dans des représentations, des techniques, et des valeurs, parfaitement maîtrisées et intégrées. La volonté de partir en mission humanitaire fait souvent écho à la recherche d'un certain idéal médical, qu'il est souvent nécessaire d'appivoiser pour réussir à pratiquer dans des conditions parfois extrêmes.*

<https://www.em-consulte.com/article/1591911/article/enjeux-ethiques-de-la-reanimation-en-contexte-huma>

## Directives anticipées et Alzheimer

Barzun CL. [Alzheimer's, advance directives, and interpretive authority](#). *The Journal of Medicine and Philosophy* 2023;48:50–9.

*Philosophers have debated whether the advance directives of Alzheimer's patients should be enforced, even if patients seem content in their demented state. The debate raises deep questions about the nature of human autonomy and personal identity. But it tends to proceed on the assumption that the advance directive's terms are clear, whereas in practice they are often vague or ambiguous, requiring the patient's healthcare proxy to make difficult judgment calls.*

<https://doi.org/10.1093/jmp/jhac032>

## Accès au dossier médical des consultations d'éthique

Childers C, Marron J, Meyer EC, et al. [Clinical ethics consultation documentation in the era of open notes](#). *BMC Med Ethics* 2023;24:27.

*In 2021, federal rules from the 21st Century Cures Act mandated most clinical notes be made available in real-time, online, and free of charge to patients, a practice often referred to as "open notes." This legislation was passed to support medical information transparency and reinforce trust in the clinician-patient relationship; however, it created additional complexities in that relationship and raises questions of what should be included in notes intended to be read by both clinicians and patients.*

<https://doi.org/10.1186/s12910-023-00904-1>

## Organisation de l'éthique clinique et pluralisme

Kröger C, Molewijk AC, Metselaar S. [Developing organizational diversity statements through dialogical clinical ethics support: the role of the clinical ethicist](#). *J Bioeth Inq* 2023.

*In pluralist societies, stakeholders in healthcare may have different experiences of and moral perspectives on health, well-being, and good care. Increasing cultural, religious, sexual, and gender diversity among both patients and healthcare professionals requires healthcare organizations to address these differences. Addressing diversity, however, comes with inherent moral challenges; for example, regarding how to deal with healthcare disparities between minoritized and majoritized patients or how to accommodate different healthcare needs and values.*

<https://doi.org/10.1007/s11673-023-10258-3>

## Pudeur et soins de santé

Gagnon É, Marcotte R. [De la pudeur dans les soins](#). *Revue canadienne de bioéthique* 2023;6:1–12.

*Omniprésente dans les soins de santé, particulièrement ceux s'adressant à des personnes très dépendantes et impliquant une importante intrusion dans leur intimité, la pudeur est cependant encore peu discutée en éthique des soins. Cet article présente une exploration conceptuelle de la notion de pudeur et de ses manifestations dans les soins de santé, plus précisément de leur dimension morale et des défis qu'elles posent pour les institutions de soins. Puisque la pudeur invite à la protection de l'intégrité, de la dignité et à l'atténuation de la vulnérabilité de la personne soignée, elle nous semble porteuse d'une visée morale, et donc mériter non seulement plus d'attention de la part de l'éthique des soins, mais peut-être même d'y être introduite à titre de vertu.*

## Sédation et soins palliatifs

Kauzner S, Heckel M, Ostgathe C et al. [Documentation of sedation in palliative care: a scoping review of requirements, recommendations, and templates](#). *J Palliat Med* 2023.

*To identify and describe requirements, recommendations, and templates for the documentation of sedation in adult palliative care. Introduction: International literature shows inconsistency in clinical practice regarding sedation in palliative care accompanied by legal, ethical, and medical uncertainties. Documentation in general serves as proof for previous treatments. In the context of intentional sedation to relieve suffering at the end of life, documentation provides a clear demarcation against practices of euthanasia.*

<https://doi.org/10.1089/jpm.2022.0476>

## Fin de vie et prématurité

Wilkinson DJ, Bertaud S. [End of life care in the setting of extreme prematurity - practical challenges and ethical controversies](#). *Semin Fetal Neonatal Med* 2023:101442.

*While the underlying principles are the same, there are differences in practice in end of life decisions and care for extremely preterm infants compared with other newborns and older children. In this paper, we review end of life care for extremely preterm infants in the delivery room and in the neonatal intensive care unit. We identify potential justifications for differences in the end of life care in this population as well as practical and ethical challenges.*

<https://doi.org/10.1016/j.siny.2023.101442>

## Imagerie médicale et représentation de soi des patients

Gasnot D., [Les enjeux de la visualisation des clichés d'imagerie médicale chez les patients, gestions hospitalières, n° 625 - avril 2023](#),

*Incarnation de la médecine moderne, l'imagerie médicale accompagne désormais la vie de millions de personnes dans leur quotidien, et ce parfois avant même leur naissance. Outre son utilisation en tant qu'examen complémentaire, elle sert à dépister et à suivre l'évolution des pathologies et des états de santé. La rencontre des patients – voire de la population générale – avec des images représentant l'intérieur de leur corps se fait ainsi de plus en plus fréquente. Quelles conséquences sur l'image de soi ? Comment les patients intègrent-ils ces images dans la représentation qu'ils se font d'eux-mêmes ? L'étude de Déborah Gasnot documente la réception et la compréhension de ces examens en radiologie diagnostique à l'appui d'un terrain ethnographique.*

<https://chaire-philosophie.fr/wp-content/uploads/2022/08/dgasnot.pdf>

## Biais de genre dans les études épidémiologiques en soins primaires

Carrillo I, Lopez-Pineda A, Pérez-Jover V et al. [Epidemiological study on gender bias and low-value practices in primary care: a study protocol](#). *BMJ Open* 2023;13:e070311.

*Evidence shows that gender has a substantial impact on health behaviors, access to and use of health systems and health system responses. This study aims to assess gender bias in patients subjected to low-value practices in the primary care setting and to develop recommendations for reducing adverse events that women experience for this reason.*

<https://doi.org/10.1136/bmjopen-2022-070311>

## Enjeux éthiques et prise en charge des patients victimes de trauma

McLaughlin MF. [Ethical challenges in the care of the trauma patient](#). *Crit Care Nurs Clin North Am* 2023;35:145–9.

*A patient with trauma presents a unique and/or complex challenge to the ethical foundation that guides nursing care. Patients with trauma, by the very nature of the suddenness of their injury, are unable to predetermine or express their wishes in the event of a catastrophic injury. The providers who care for patients with trauma do not have an established patient relationship to aid them in decision-making based on what they think the patient would wish or based on past conversations. Yet, they provide expert care and use ethical principles to direct their professional responsibility to these patients.*

<https://doi.org/10.1016/j.cnc.2023.02.006>

## Soins néonataux et limites de viabilité

Kornhauser Cerar L, Lucovnik M. [Ethical dilemmas in neonatal care at the limit of viability](#). *Children (Basel)* 2023;10:784.

*Advances in neonatal care have pushed the limit of viability to incrementally lower gestations over the last decades. However, surviving extremely premature neonates are prone to long-term neurodevelopmental handicaps. This makes ethics a crucial dimension of periviable birth management.*

<https://doi.org/10.3390/children10050784>

## Intimité des patients dans les unités de soins palliatifs

Tajdari S, Irajpour A, Shahriari M, et al. [Identifying the dimensions of patient privacy in intensive care units: a qualitative content analysis study](#). *J Med Ethics Hist Med* 2022;15:6.

*In intensive care units (ICUs), patient privacy is of particular importance due to the structure of the ward environment and the critical situation of the patients. The aim of this study was to identify the dimensions of patient privacy in ICUs. For this purpose, a descriptive-qualitative-exploratory study was performed. The data collection methods included observations and interviews, which were handwritten and analyzed using qualitative content analysis with a conventional approach.*

<https://doi.org/10.18502/jmehm.v15i6.11048>

## Autonomie du patient et soins palliatifs

Tahmasebi M. [Ethics and palliative care: a case of patient's autonomy](#). *J Med Ethics Hist Med* 2022;15:16.

*The objective of palliative care is to provide holistic care to enhance the quality of life by addressing physical, psychological, social and spiritual suffering. In palliative care, the family is part of the team and should be cared for and supported, and communication is the key in the process, especially at the final stage. Maintaining patients' autonomy at the end of life is a challenging subject that needs to be addressed using a contextualized approach.*

<https://doi.org/10.18502/jmehm.v15i16.11574>

## Fin de vie des nouveau-nés en soins intensifs

Mercurio MR, Gillam L. [Ethics at the end of life in the newborn intensive care unit: conversations and decisions](#). *Semin Fetal Neonatal Med* 2023:101438.

*The unexpected birth of a critically ill baby raises many ethical questions for neonatologists. Some of these are obviously ethical questions, about whether to attempt resuscitation, and, if the baby is resuscitated and survives, whether to continue life sustaining interventions. Other ethical decisions are more related to what to say rather than what to do.*

<https://doi.org/10.1016/j.siny.2023.101438>



## Aspects phénoménologiques des soins palliatifs et fin de vie en oncologie

Durmuş Sarıkahya S, Gelin D, Çınar Özbay S, et al. [Experiences and practices of nurses providing palliative and end-of-life care to oncology patients: a phenomenological study.](#) *Florence Nightingale J Nurs* 2023;31:S22–30.

*The objective of this study was to describe the experiences and practices of nurses who provide palliative and end-of-life care to oncology patients, to determine the difficulties they encounter in this regard, and to determine how they cope with it.*

<https://doi.org/10.5152/FNJJN.2023.23042>

## Consentement éclairé et décision en santé

Ghinea N. ["First ensure no regret": a decision-theoretic approach to informed consent in clinical practice.](#) *J Med Ethics* 2023;jme-2023-109087.

*Decision theorists recognise that information is valuable only insofar as it has the potential to change a decision. This means that since acquiring more information is time-consuming and sometimes expensive, judgements need to be made about what information is most valuable to acquire, and whether it is worth acquiring at all. In this article I apply this idea to informed consent and argue that the most valuable information relates not to what the best treatment option may be but to possible futures a patient may regret.*

<https://doi.org/10.1136/jme-2023-109087>

## Continuité de prise en charge des patients séropositifs en prison

Juengst E, Buchbinder M, Blue C et al. [Improving the continuity of care for people living with HIV experiencing incarceration in North Carolina jails: stakeholder perspectives.](#) *N C Med J* 2022;83:382–8.

*Jail detention can disrupt the continuity of care for people living with HIV/AIDS (PLWH). Using a state's "Data to Care" (D2C) program might help overcome this barrier, but raises important questions of data security, personal privacy, resource allocation, and logistics.*

<https://doi.org/10.18043/ncm.83.5.382>

## Fin de vie et prescriptions médicales anticipées

Bowers B, Howard P, Madden B et al. [Is end-of-life anticipatory prescribing always enough?](#) *BMJ* 2023;381:p1106.

*Dying in pain or distress is a cause of considerable concern for patients, their loved ones, and clinicians. Helping patients to die in comfort is an essential goal of end-of-life care. During out-of-hours periods, which make up the majority of time, sourcing medical assessments, prescriptions, and drugs from pharmacies can be challenging and at times is not possible. Consequently, anticipatory prescribing of injectable drugs ahead of possible need is recommended good practice internationally to optimise timely symptom control in the community and prevent crisis hospital admissions.*

<https://doi.org/10.1136/bmj.p1106>

## Priorités des parents d'enfants atteints de cancer en fin de vie

Ananth P, Lindsay M, Mun S et al. [Parent priorities in end-of-life care for children with cancer](#). *JAMA Netw Open* 2023;6:e2313503.

*Robust quality measures to benchmark end-of-life care for children with cancer do not currently exist; 28 candidate patient-centered quality measures were previously developed. Objective : To prioritize quality measures among parents who lost a child to cancer.*

<https://doi.org/10.1001/jamanetworkopen.2023.13503>

## Enjeux éthiques relatifs à la prise en charge des patients en état végétatif

Arandjelović O. [Resolving the ethical quagmire of the persistent vegetative state](#). *J Eval Clin Pract* 2023.

*BACKGROUND: A patient is diagnosed with the persistent vegetative state (PVS) when they show no evidence of the awareness of the self or the environment for an extended period of time. The chance of recovery of any mental function or the ability to interact in a meaningful way is low. Though rare, the condition, considering its nature as a state outwith the realm of the conscious, coupled with the trauma experienced by the patient's kin as well as health care staff confronted with painful decisions regarding the patient's care, has attracted a considerable amount of discussion within the bioethics community.*

<https://doi.org/10.1111/jep.13848>

## Approche féministe de l'historiographie dans la profession d'infirmière

Dillard-Wright J. [Telling a different story: historiography, ethics, and possibility for nursing](#). *Nurs Philos* 2023:e12444.

*With this paper, I will interrogate some of the implications of nursing's dominant historiography, the history written by and about nursing, and its implications for nursing ethics as a praxis, invoking feminist philosopher Donna Haraway's mantra that 'it matters what stories make worlds, what worlds make stories.'*

<https://doi.org/10.1111/nup.12444>

## Technologie et qualité des soins en période de crise

Babaii S, Monajemi A. [The neglected role of technology in quality of care crisis](#). *J Med Ethics Hist Med* 2022;15:11.

*The quality of care crisis (QCC) is one of the most crucial crises the modern medicine is confronting, as the existential and psychological needs of patients have not been addressed and satisfied. Several attempts have been made to find solutions for QCC, e.g., the Marcum's recommendation to make physicians virtuous.*

<https://doi.org/10.18502/jmehm.v15i11.11567>

## Prise de décision de réanimation cardio-pulmonaire et enjeux éthiques

Nirdosh K, Meraj F, Faysal S, et al. [To resuscitate or not to resuscitate – the crossroads of ethical decision-making in resuscitation in the emergency department](#). *Clin Exp Emerg Med* 2023.

*Emergency physicians (EPs) working in low-resource settings, where patients mainly bear healthcare delivery, face many challenges. Emergency care is patient-centered and ethical challenges are numerous in situations where patient autonomy and beneficence are fragile. This review discusses some of the common bioethical issues in the resuscitation and post-resuscitation phases of treatment, it proposes solutions and emphasizes the necessity for evidence-based ethics and unanimity on ethical standards.*

<https://doi.org/10.15441/ceem.23.027>

## Autonomie, consentement et expérience transformative de la maladie

Hofmann B. [Undermining autonomy and consent: the transformative experience of disease.](#) *J Med Ethics* 2023:jme-2023-108906.

*This article applies Paul's theory of transformative experience and its expansion by Carel and Kidd to investigate the implications for medical ethics. It leads to the very uncomfortable conclusion that disease involves transformative experiences in ways that can reduce people's rational decision-making ability and undermine the basic principle of respect for autonomy and the moral rule of informed consent. While such cases are limited, they are crucial for medical ethics and health policy and deserve more attention and further scrutiny.*

<https://doi.org/10.1136/jme-2023-108906>

## Interface cerveau-ordinateur en neurochirurgie pédiatrique

Bergeron D, Iorio-Morin C, Bonizzato M et al. [Use of invasive brain-computer interfaces in pediatric neurosurgery: Technical and ethical considerations.](#) *J Child Neurol* 2023:8830738231167736.

*In this manuscript, we discuss the ethical considerations related to the use of invasive brain-computer interface in children with severe neurologic disabilities. We first review the technical hardware and software considerations for the application of intracortical brain-computer interface in children. We then discuss ethical issues related to motor brain-computer interface use in pediatric neurosurgery. Finally, based on the input of a multidisciplinary panel of experts in fields related to brain-computer interface (functional and restorative neurosurgery, pediatric neurosurgery, mathematics and artificial intelligence research, neuroengineering, pediatric ethics, and pragmatic ethics), we then formulate initial recommendations regarding the clinical use of invasive brain-computer interfaces in children.*

<https://doi.org/10.1177/08830738231167736>

# LIEUX ET MÉTIER DU SOIN



## Apprentissage de l'écoute et recueil de la parole des étudiants en santé

Galichon I., Draperi C. [Comment et pourquoi accompagner la parole des étudiants en science de la santé ? Pourquoi et comment les initier au travail de l'écoute ?](#), *Éthique et Santé*, Vol. 20, n°2, pp. 65-67.

*La narration occupe de fait une place centrale dans la confrontation, personnelle ou professionnelle à l'épreuve de la maladie. Il suffit d'être attentif à sa place majeure tant dans l'histoire de la littérature que dans les conversations quotidiennes pour s'en convaincre. Le développement exponentiel des connaissances biomédicales au milieu du XXe siècle a engendré une inquiétude quant à une forme d'éclipse de la parole dans la formation médicale. Quelle place dans la formation des professionnels de santé pour développer l'attention au récit du mal-être que les patients adressent aux praticiens, pour apprendre non seulement à observer mais aussi à écouter ? Nous évoquons ici deux regards, deux démarches nées de ce questionnement en redonnant la parole aux étudiants.*

<https://www.em-consulte.com/article/1591915/article/comment-et-pourquoi-accompagner-la-parole-des-etud>

## Culture et éthique en milieu hospitalier

Charvin M, Morello R, Leblanc S, et al. [La disparition progressive de la professionnalisation de la photographie médicale dans les hôpitaux français constitue-t-elle une atteinte à l'éthique ?](#), *Éthique & Santé* 2023;20(1): 6-14.

*Bien que fréquemment utilisée dans les établissements de santé, la photographie médicale fait l'objet d'aucune réglementation spécifique ou recommandations précises. L'objet de cette étude est de réaliser une enquête qualitative sur les pratiques photographiques en lien avec le respect de l'éthique médicale, de la déontologie et du droit.*

<https://www.em-consulte.com/article/1577810/article/la-disparition-progressive-de-la-professionnalisat>

## Responsabilité morale des professionnels de santé dans la prise en charge des maladies neuro-évolutives

Ohanesian N. [Caregiver burden and the impact of diagnostic disclosure of dementia: why primary care physicians have a moral responsibility to disclose](#). *J Clin Ethics* 2023;34:128–37.

Currently, the number of individuals affected by Alzheimer's disease is rapidly increasing, expected to reach 14 million in the United States within 30 years. In spite of this impending crisis, less than 50 percent of primary care physicians disclose the diagnosis of dementia to their patients. This failure negatively impacts not only patients but also caregivers, whom dementia patients require to help them meet their needs and who often serve as important decision makers, either as surrogates or as designated healthcare agents for the patient.

<https://doi.org/10.1086/724230>

## Empathie de l'équipe de soins en soins palliatifs

Mroz EL, McDarby M, Kutner J et al. [Empathic communication between clinicians, patients, and care partners in palliative care encounters](#). *Patient Educ Couns* 2023;114:107811.

Palliative care encounters often involve empathic opportunities conveyed by patients and their care partners. In this secondary analysis, we examined empathic opportunities and clinician responses with attention to how presence of multiple care partners and clinicians shapes empathic communication. We used the Empathic Communication Coding System (ECCS) to characterize emotion-focused, challenge-focused, and progress-focused empathic opportunities and responses in 71 audio-recorded palliative care encounters in the US.

<https://doi.org/10.1016/j.pec.2023.107811>

## Liens entre prise en compte des questions éthiques dans l'environnement des professionnels de santé et volonté de quitter le service

Mousavi SK, Kamali M, Bahrami et al. [Ethical work climate and the intention to leave the service in emergency medical technicians during the COVID-19 pandemic](#). *J Med Ethics Hist Med* 2022;15:9.

Emergency medical technicians (EMTs) are very likely to leave the profession due to their obligation to work in critical situations such as the COVID-19 pandemic. This study aimed to investigate the relationship between the ethical work climate and the intention to leave the service among EMTs. In this descriptive correlational study, 315 EMTs working in Zanjan province were surveyed using the census method in 2021.

<https://doi.org/10.18502/jmehm.v15i9.11565>

## Paramédicaux et perception de la mort

Renet A. [Expérience partagée, vécus pluriels: des paramédicaux face à la mort en réanimation](#). *Soins*. avr 2023;68(874):51-4.

Expérience partagée, vécus pluriels : des paramédicaux face à la mort en réanimation.

<https://www.em-consulte.com/article/1587131/alertePM>

1.

## Expériences des professionnels de santé dans la prise en charge de la douleur des personnes âgées au domicile

Nässén K, Gillsjö C, Berglund M. [Health care professionals' experiences of possibilities and constraints in caring for older adults living with long-term pain in community home care.](#) *Journal of Aging Studies* 2023;65:101134.

*Caring for a growing population of older adults with complex health problems in their homes is part of every-day work for many health care professionals in the world. This qualitative interview study explores the way health care professionals perceive possibilities and constraints when caring for older adults living with long-term pain in community home care in Sweden.*

<https://doi.org/10.1016/j.jaging.2023.101134>

## Conflits moraux des professionnels de santé en réanimation

Joolae S, Cook D, Kozak J, et al. [Intensive care unit professionals' responses to a new moral conflict assessment tool: a qualitative study.](#) *Nurs Ethics* 2023;9697330231151352.

*Moral distress is a serious problem for health care personnel. Surveys, individual interviews, and focus groups may not capture all of the effects of, and responses to, moral distress. Therefore, we used a new participatory action research approach-moral conflict assessment (MCA)-to characterize moral distress and to facilitate the development of interventions for this problem. Aim : To characterize moral distress by analyzing responses of intensive care unit (ICU) personnel who participated in the MCA process.*

<https://doi.org/10.1177/09697330231151352>

## Domicile et personnes âgées

Blackler A, Craig C, Brophy C, et al. [Making a "home" into a home: how design of aged-care homes impacts residents.](#) *Journal of Aging Studies* 2023;65:101135.

*The move into residential aged care is a difficult transition for many people. The place may be called an aged-care or nursing "home", but for many residents it does not feel like a home at all. This paper explores issues experienced by older people who are trying to make themselves at home in aged care. The authors present two studies examining residents' perceptions of the aged-care environment.*

<https://doi.org/10.1016/j.jaging.2023.101135>

## Consentement éclairé des adolescents en oncologie pédiatrique

Tanaka K, Hayakawa M, Mori M et al. [Medical staff's sense of awareness of informed consent for adolescent cancer patients and the need for decision-making support practiced from the perspective of trauma-informed approach.](#) *BMC Med Ethics* 2023;24:28.

*It has not been established how to assess children's and adolescents' decision-making capacity (DMC) and there has been little discussion on the way their decision-making (DM). The purpose of this study was to examine actual situation and factors related to difficulties in explaining their disease to adolescent cancer patients or obtaining informed consent (IC).*

<https://doi.org/10.1186/s12910-023-00907-y>

## Signalement juridique des patients par le personnel infirmier

Jenkins D, Wolfe I, Dillard-Wright J. [Nurses as disciplinary agents of the state: ethical practice and mandatory reporting in the United States](#). *ANS Adv Nurs Sci* 2023.

*This article reviews legislative initiatives that mandate nurses to report patients, families, and clinicians to law enforcement. Most recently, these laws target transgender and gender diverse (TGD) youth and people seeking abortion. In this article, we examine the ethics of such laws through professional ethical codes. Furthermore, through a biopolitical lens, we critically analyze examples of nurses' participation in complying with laws that harm patients. Finally, we discuss the damage these laws have on the nursing profession and assert the necessity of a resituating of professional ethics that considers the complexity of nursing care amidst increasingly blatant state-sanctioned violence.*

<https://doi.org/10.1097/ANS.0000000000000503>

## Perspective soignante de la fin de vie à domicile

Tappen RM, Sopcheck J. [Nursing home resident, family, and staff perspectives on achieving comfort at end of life: a qualitative study](#). *J Hosp Palliat Nurs* 2023.

*Increasing numbers of US older adults die in long-term care facilities. This qualitative study explored nursing home resident, family member, and staff perspectives and preferences regarding end-of-life care for the resident. From 67 potential participants referred by staff, 47 were found eligible and consented, including 16 residents, 10 family members, and 20 staff.*

<https://doi.org/10.1097/NJH.0000000000000953>

## Philosophie et construction du savoir en soins infirmiers

Waldow VR. [Philosophy as a contribution for the construction of knowledge in nursing](#). *Rev Gaucha Enferm* 2023;43:e20220299.

*Objective = To make considerations about Nursing knowledge and the inclusion of Philosophy, pointing out the contributions for Caring. Method: Theoretical text based on the literature from authors of Philosophy and Nursing scholars and theorists.*

<https://doi.org/10.1590/1983-1447.2022.20220299.en>

## Aspects éthiques des soins infirmiers en contexte de catastrophe

Fithriyyah YN, Alda AK, Haryani H. [Trends and ethical issues in nursing during disasters: a systematic review](#). *Nursing Ethics*. 2023.

*During a disaster, nurses face complex ethical challenges because of risky situations. It is necessary to identify trends and ethical issues of nurses in disasters to improve the quality of care and impact for nurses.*

<https://journals.sagepub.com/doi/abs/10.1177/09697330231155602>

# BIOÉTHIQUE



## Dépistage préconceptionnel et enjeux éthiques

Cogan G. [De quelques problèmes éthiques posés par le dépistage préconceptionnel](#), *Éthique & Santé* 2023; 20(1): 23-29.

L'autorisation du dépistage préconceptionnel en population générale a été discutée lors des dernières lois de bioéthique. Il permettrait à tout couple ayant un projet de grossesse d'accéder, sur une base volontaire, à son risque de transmettre une maladie génétique à transmission autosomique récessive. Les différentes instances éthiques françaises ont été amenées à se positionner sur le sujet : si le Conseil d'État et l'OPECST ont émis des avis réservés, le CCNE, l'ABM, le rapporteur de l'Assemblée nationale ainsi que la SFMPP semblent plus favorables à une ouverture des droits

## Résultats de tests génétiques dans le dossier médical informatique

Rasmussen LV, Agrawal AH, Botsford P et al. [Challenges of integrating APOL1 genetic test results into the electronic health record](#). *Appl Clin Inform* 2023;14:321–5.

Integrating genetic test results into the electronic health record (EHR) is essential for integrating genetic testing into clinical practice. This article describes the organizational challenges of integrating discrete apolipoprotein L1 (APOL1) genetic test results into the EHR for a research study on culturally sensitive genetic counseling for living kidney donors.

<https://doi.org/10.1055/s-0043-1767680>

## Représentations bioéthiques dans la médecine nazie

Schütz M, Braswell H. [Ethicizing history. Bioethical representations of Nazi medicine](#). *Bioethics* 2023.

The article presents and analyzes different approaches of U.S. bioethicists in comprehending the Nazi medical crimes after 1945. The account is divided into two sections: one dealing with discussions on research ethics and the Nuremberg Code up until the 1970s and the other ranging from the 1970s to the present and highlighting bioethics' engagement with Nazi analogies.

<https://doi.org/10.1111/bioe.13168>



## Enjeux éthiques de la culture cellulaire de viande

Alvaro C. [A virtue-ethical approach to cultured meat](#). *Nat Food* 2022;3:788–90.

*The proposed benefits of cultured meat fail to track our moral intuitions because they are focused on the practical aspect of cultured meat production and consumption. A virtue-oriented approach can show cultured meat in a different light.*

<https://doi.org/10.1038/s43016-022-00601-z>

## Faux-espoirs et procréation médicalement assistée

Accoe D, Segers S. [“False hope” in assisted reproduction: the normative significance of the external outlook and moral negotiation](#). *J Med Ethics* 2023;jme-2023-108916.

*Despite the frequent invocation of 'false hope' and possible related moral concerns in the context of assisted reproduction technologies, a focused ethical and conceptual problematisation of this concept seems to be lacking. We argue that an invocation of 'false hope' only makes sense if the fulfilment of a desired outcome (eg, a successful fertility treatment) is impossible, and if it is attributed from an external perspective.*

<https://doi.org/10.1136/jme-2023-108916>

## Inégalités sociales et accès aux services communautaires des familles après séquençage génétique

Ackerman SL, Brown JEH, Zamora A, et al. [“I have fought for so many things”: Disadvantaged families’ efforts to obtain community-based services for their child after Genomic Sequencing](#). *AJOB Empir Bioeth* 2023:1–10.

*Families whose child has unexplained intellectual or developmental differences often hope that a genetic diagnosis will lower barriers to community-based therapeutic and support services. However, there is little known about efforts to mobilize genetic information outside the clinic or how socioeconomic disadvantage shapes and constrains outcomes.*

<https://doi.org/10.1080/23294515.2023.2209747>

## Consentement au don d’organe et de tissus

Walton P, Pérez-Blanco A, Beed S et al. [Organ and tissue donation consent model and intent to donate registries: Recommendations from an international consensus forum](#). *Transplant Direct* 2023;9:e1416.

*Consent model and intent to donate registries are often the most public facing aspects of an organ and tissue donation and transplantation (OTDT) system. This article describes the output of an international consensus forum designed to give guidance to stakeholders considering reform of these aspects of their system.*

<https://doi.org/10.1097/TXD.0000000000001416>

## Valeurs et principes de la mise en œuvre des règles de compatibilité en matière de transplantation rénale

Slomp C, Edwards L, Burgess M et al. [Public values and guiding principles for implementing epitope compatibility in kidney transplantation allocation criteria: results from a Canadian online public deliberation](#). *BMC Public Health* 2023;23:844.

*Epitope compatibility in deceased donor kidney allocation is an emerging area of precision medicine (PM), seeking to improve compatibility between donor kidneys to transplant candidates in the hope of avoiding kidney rejection. Though the potential benefits of using epitope compatibility are promising, the implied modification of deceased organ allocation criteria requires consideration of significant clinical and ethical trade-offs. As a matter of public policy, these trade-offs should consider public values and preferences.*  
<https://doi.org/10.1186/s12889-023-15790-w>

## Perspectives des professionnels de santé

Arkell K, Gyngell C, Stark Z, et al. [Rapid genomic testing in intensive care: Health professionals' perspectives on ethical challenges](#). *Children (Basel)* 2023;10:824.

*Ultra-rapid genomic sequencing (urGS) is increasingly used in neonatal and pediatric intensive care settings (NICU/PICU), demonstrating high diagnostic and clinical utility. This study aimed to explore the perspectives of healthcare professionals (HPs) and the challenges raised by urGS, particularly when making treatment decisions. Four focus groups and two interviews were conducted with HPs who had experience using urGS in NICU/PICU. Inductive content analysis was used to analyze the data.*  
<https://doi.org/10.3390/children10050824>

## Encadrement du diagnostic prénatal dans la sélection sexuelle des embryons

Taylor-Sands M, Warton C, Bowman-Smart H. [Regulating non-invasive prenatal testing \(NIPT\) for fetal sex determination](#). *Med Law Rev* 2023:fwad014.

*Non-invasive prenatal testing (NIPT) can be used to determine the chromosomal sex of the fetus at an early stage in a pregnancy. The use of NIPT for fetal sex determination raises concerns about potential selective termination of pregnancy by prospective parents who desire a child of a particular sex.*  
<https://doi.org/10.1093/medlaw/fwad014>

## Analyse des enjeux éthico-juridiques de l'accès à la congélation d'ovocytes en Chine

Wang H. [Single women's access to egg freezing in mainland China: an ethicolegal analysis](#). *J Med Ethics* 2023:jme-2023-108915.

*In the name of safeguarding public interests and ethical principles, China's National Health Commission bans unmarried women from using assisted reproductive technology (ART), including egg freezing. Supported by local governments, the ban has restricted single women's reproductive rights nationwide.*  
<https://doi.org/10.1136/jme-2023-108915>

## Accès inconditionnel au dépistage prénatal non invasif

Marks IR, Mills C, Devolder K. [Unconditional access to non-invasive prenatal testing \(NIPT\) for adult-onset conditions: a defence](#). *J Med Ethics* 2023:jme-2023-109070.

*Over the past decade, non-invasive prenatal testing (NIPT) has been adopted into routine obstetric care to screen for fetal sex, trisomies 21, 18 and 13, sex chromosome aneuploidies and fetal sex determination. It is predicted that the scope of NIPT will be expanded in the future, including screening for adult-onset conditions (AOCs).*  
<https://doi.org/10.1136/jme-2023-109070>

## Aspects éthiques de l'utilisation des ovocytes congelés à des fins de don

Pennings G. [When elective egg freezers become egg donors: practical and ethical issues.](#) *Reprod Biomed Online* 2023;S1472-6483(23)00206-7.

*Many people hope that the unused and unwanted eggs frozen by women for self-use could be applied to reduce the shortage of donor eggs. However, several practical (additional screening and counselling) and ethical (informed consent and reimbursement) issues may dampen this hope. This paper also considers the question of whether elective egg freezers who want to donate their eggs should be reimbursed for the costs they have met for the IVF cycle and storage. It is argued that a partial reimbursement for the collection (hormonal stimulation and retrieval) is morally acceptable because it is limited to proven expenses (and does not violate the altruism rule) and because the recipients should contribute to the costs of a scheme from which they are benefiting.*

<https://doi.org/10.1016/j.rbmo.2023.03.019>

## Risques éthiques et bénéfiques de la génomique sociale et comportementale

Meyer MN, Appelbaum PS, Benjamin DJ et al. [Wrestling with social and behavioral genomics: Risks, potential benefits, and ethical responsibility.](#) *Hastings Center Report* 2023;53:S2–49.

*In this consensus report by a diverse group of academics who conduct and/or are concerned about social and behavioral genomics (SBG) research, the authors recount the often-ugly history of scientific attempts to understand the genetic contributions to human behaviors and social outcomes. They then describe what the current science—including genome wide association studies and polygenic indexes—can and cannot tell us, as well as its risks and potential benefits.*

<https://doi.org/10.1002/hast.1477>

## Réinterprétation des classifications de variants génétiques

Watts G, Newson AJ. [Is there a duty to routinely reinterpret genomic variant classifications?](#) *J Med Ethics* 2023;jme-2022-108864.

*Multiple studies show that periodic reanalysis of genomic test results held by clinical laboratories delivers significant increases in overall diagnostic yield. However, while there is a widespread consensus that implementing routine reanalysis procedures is highly desirable, there is an equally widespread understanding that routine reanalysis of individual patient results is not presently feasible to perform for all patients. Instead, researchers, geneticists and ethicists are beginning to turn their attention to one part of reanalysis-reinterpretation of previously classified variants—as a means of achieving similar ends to large-scale individual reanalysis but in a more sustainable manner.*

<https://doi.org/10.1136/jme-2022-108864>

# ÉTHIQUE DE LA RECHERCHE



## Participation des patients à la recherche en santé

Bogaert B. [Les patients partenaires dans des recherches en santé: les enjeux éthiques et épistémologiques à prendre en compte pour concevoir une collaboration fructueuse.](#)

Revue française d'éthique appliquée 2022;13:131–42.

<https://doi.org/10.3917/rfeap.013.0131>.

## Consentement et recherche en néonatalogie

Katheria A, Schmölzer GM, Janvier A et al. [Narrative review of the rationale for conducting neonatal emergency studies with a waived or deferred consent approach.](#) *Neonatology* 2023:1–9

*Emergency research studies are high-stakes studies that are usually performed on the sickest patients, where many patients or guardians have no opportunity to provide full informed consent prior to participation. Many emergency studies self-select healthier patients who can be informed ahead of time about the study process.*

<https://doi.org/10.1159/000530257>

## Partenariats de santé globale au sein de la recherche académique en santé

Amisi JA, Cuba-Fuentes MS, Johnston EM et al. [A pragmatic approach to equitable global health partnerships in academic health sciences.](#) *BMJ Global Health* 2023;8:e011522

*Global partnerships offer opportunities for academic departments in the health sciences to achieve mutual benefits. However, they are often challenged by inequities in power, privilege and finances between partners that have plagued the discipline of global health since its founding. In this article, a group of global health practitioners in academic medicine offer a pragmatic framework and practical examples for designing more ethical, equitable and effective collaborative global relationships between academic health science departments, building on the principles laid out by the coalition Advocacy for Global Health Partnerships in the Brocher declaration.*

<https://doi.org/10.1136/bmjgh-2022-011522>

## Éthique et gouvernance de la recherche sur le vieillissement

Peng Y, Ding L, Song M et al. [Acting on ethics and governance of aging research](#). *Trends in Molecular Medicine* 2023:S1471-4914(23)00064-3.

Rapid advances in aging research and clinical translation come with numerous ethical and societal issues that the current regulatory framework may not be sufficient to address. To fill this gap, we propose a responsible and comprehensive governance framework to cope with these issues while maximizing the benefits of aging research. <https://doi.org/10.1016/j.molmed.2023.03.004>

## Recherche clinique et personnes sourdes

Kushalnagar P, Nicolarakis O, Mirus G et al. [Barriers and facilitators to the inclusion of deaf people in clinical trials](#). *Clinical Trials* 2023:17407745231177376.

This article discusses the barriers that prevent deaf people from participating in clinical trials and offers recommendations to overcome these barriers and ensure equal access to study participation. <https://doi.org/10.1177/17407745231177376>

## Enjeux éthiques de l'utilisation des données de santé numériques

Okun S, Hanger M, Browne-James et al. [Commitments for ethically responsible sourcing, use, and reuse of patient data in the digital age: co-creation process](#). *J Med Internet Res* 2023;25:e41095.

Personal information, including health-related data, may be used in ways we did not intend when it was originally shared. However, the organizations that collect these data do not always have the necessary social license to use and share it. Although some technology companies have published principles on the ethical use of artificial intelligence, the foundational issue of what is and is not acceptable to do with data, not just the analytical tools to manage it, has not been fully considered. <https://doi.org/10.2196/41095>

## Enjeux éthiques et intégrité de la recherche en science ouverte

Lindemann T, Häberlein L. [Contours of a research ethics and integrity perspective on open science](#). *Front Res Metr Anal* 2023;8:1052353.

This article argues that adopting a research ethics and integrity perspective could support researchers in operationalizing the open science guiding principle "as open as possible, as closed as necessary" in a responsible and context-sensitive manner. <https://doi.org/10.3389/frma.2023.1052353>

## Recherche clinique en santé publique et justice sociale

Varma T., [Diversity in clinical research: public health and social justice imperatives](#), *Journal of Medical Ethics* 2021

It is well established that demographic representation in clinical research is important for understanding the safety and effectiveness of novel therapeutics and vaccines in diverse patient populations. In recent years, the National Institutes of Health and Food and Drug Administration have issued guidelines and recommendations for the inclusion of women, older adults, and racial and ethnic minorities in research. <http://dx.doi.org/10.1136/medethics-2021-108068>

## Éthique de la recherche clinique qualitative

Narayanan G, Murthy P. [Ethics of qualitative research in substance use disorders](#). *Asian J Psychiatr* 2023;85:103617.

*Ethics in substance use disorder research has evolved through the years into two distinct school of thoughts, including neuro-ethics and social ethics. Qualitative methods of conducting studies provide rich descriptive knowledge of underlying processes in use of substances, although their governing ethical principles and decision-making are fairly blurred.*

<https://doi.org/10.1016/j.ajp.2023.103617>

## Enjeux éthiques et consentement à la recherche clinique

Verbeke K, Krawczyk T, Baeyens D et al. [Informed consent and debriefing when deceiving participants: A systematic review of research ethics guidelines](#). *J Empir Res Hum Res Ethics* 2023:15562646231173476.

*Informed consent and debriefing of research participants in studies that use deception are ethical safeguards for which existing scholarly work on their implementation remains variable and insufficiently clear. A systematic review of research ethics guidelines was conducted to sketch a picture of whether, why and how informed consent and debriefing are recommended when using deception.*

<https://doi.org/10.1177/15562646231173477>

## Prévention des conflits éthiques au sein de la recherche autour du COVID-19

Falcó-Pegueroles A, Viola E, Poveda-Moral S et al. [Protective factors of ethical conflict during a pandemic-quali-ethics-COVID-19 research part 2: an international qualitative study](#). *J Clin Nurs* 2023.

*To determine which factors can be considered protective of ethical conflicts in intensive care unit healthcare professionals during a pandemic.*

<https://doi.org/10.1111/jocn.16754>

## Éthique de la recherche et numérique

Molina JL, Tubaro P, Casilli A, et al. [Research ethics in the age of digital platforms](#). *Sci Eng Ethics* 2023;29:17.

*Scientific research is growingly increasingly reliant on "microwork" or "crowdsourcing" provided by digital platforms to collect new data. Digital platforms connect clients and workers, charging a fee for an algorithmically managed workflow based on Terms of Service agreements.*

<https://doi.org/10.1007/s11948-023-00437-1>

## Concilier philosophie et science dans la recherche contre le cancer

Pradeu T, Daignan-Fornier B, Ewald A, et al. [Reuniting philosophy and science to advance cancer research](#). *Biol Rev Camb Philos Soc* 2023.

*Cancers rely on multiple, heterogeneous processes at different scales, pertaining to many biomedical fields. Therefore, understanding cancer is necessarily an interdisciplinary task that requires placing specialised experimental and clinical research into a broader conceptual, theoretical, and methodological framework.*

<https://doi.org/10.1111/brv.12971>

## Consentement éclairé recueilli par téléphone et recherche clinique

Klint A, Leatherman SM, Taylor O et al. [Telephone informed consent in a pragmatic point-of-care clinical trial embedded in primary care](#). *Contemp Clin Trials* 2023;107239.

*One benefit of pragmatic clinical trials is reduction of the burden on patients and clinical staff while facilitating a learning healthcare system. One way to decrease the work of clinical staff is through decentralized telephone consent.*

<https://doi.org/10.1016/j.cct.2023.107239>

## Enjeux éthiques de l'utilisation des données de santé dans la recherche clinique et le diagnostic génétique

Noroozi M, Bahmani F, Mousavizadeh K et al. [To use or not to use? An ethical analysis of access to data and samples of a deceased patient for genetic diagnostic and research purposes](#). *J Med Ethics Hist Med* 2022;15:13.

*Using genetic tests on deceased patients' samples for diagnostic purposes affects the family members' health and lives but raises some ethical issues in today's practice of medicine and research. In this paper, we address a common ethical dilemma of clinicians regarding whether to perform genetic tests on a deceased patient's sample upon a request from first-degree relatives against the patient's wishes in the last days of life.*

<https://doi.org/10.18502/jmehm.v15i13.11569>

## Empathie, neurosciences et robotique

Chin JH, Haring KS, Kim P. [Understanding the neural mechanisms of empathy toward robots to shape future applications](#). *Front Neurobot* 2023;17:1145989.

*This article provides an overview on how modern neuroscience evaluations link to robot empathy. It evaluates the brain correlates of empathy and caregiving, and how they may be related to the higher functions with an emphasis on women. We discuss that the understanding of the brain correlates can inform the development of social robots with enhanced empathy and caregiving abilities. We propose that the availability of these robots will benefit many aspects of the society including transition to parenthood and parenting, in which women are deeply involved in real life and scientific research.*

<https://doi.org/10.3389/fnbot.2023.1145989>

# SANTÉ PUBLIQUE, ÉCONOMIE ET ORGANISATION DE LA SANTÉ



## Médecine et droits humains

Muyskens K. [A human right to what kind of medicine?](#) *J Med Philos* 2023;jhad020.

*The human right to health, insofar as it is widely recognized, is typically thought to include the right to fair access to adequate healthcare, but the operating conception of healthcare in this context has been under-defined. This lack of conceptual clarity has often led in practice to largely Western cultural assumptions about what validly constitutes "healthcare" and "medicine".*

<https://doi.org/10.1093/jmp/jhad020>

## Stratégie de prise de décision et management

Chapman M, Xu L, Lapeyrolerie M, et al. [Bridging adaptive management and reinforcement learning for more robust decisions.](#) *Philos Trans R Soc Lond B Biol Sci* 2023;378:20220195.

*From out-competing grandmasters in chess to informing high-stakes healthcare decisions, emerging methods from artificial intelligence are increasingly capable of making complex and strategic decisions in diverse, high-dimensional and uncertain situations. But can these methods help us devise robust strategies for managing environmental systems under great uncertainty?*

<https://doi.org/10.1098/rstb.2022.0195>

## Engagement communautaires et recherche en médecine de précision

Shim JK, Foti N, Vasquez E et al. [Community engagement in precision medicine research: organizational practices and their impacts for equity.](#) *AJOB Empir Bioeth* 2023:1–12.

*In the wake of mandates for biomedical research to increase participation by members of historically underrepresented populations, community engagement (CE) has emerged as a key intervention to help achieve this goal. Using interviews, observations, and document analysis, we examine how stakeholders in precision medicine research understand and seek to put into practice ideas about who to engage, how engagement should be conducted, and what engagement is for.*

<https://doi.org/10.1080/23294515.2023.2201478>



## Éthique et allocation des ressources pendant la pandémie de COVID-19

Da Silva Neto PK, de Souza MT, de Gouvêa AR et al. [Health professionals' knowledge about ethical criteria in the allocation of resources in the COVID-19 pandemic](#). *Monash Bioeth Rev* 2023.

*Due to the rapid advance of the pandemic caused by COVID-19, several countries perceived that human and material resources would be insufficient to meet the demand of infected patients. The aim of this study is to analyze the knowledge of health professionals working in the pandemic about the application of ethical criteria in decision-making in situations of resource scarcity.*

<https://doi.org/10.1007/s40592-023-00174-y>

## Données de santé et entreprises privées

Winkler EC, Jungkunz M, Thorogood A et al. [Patient data for commercial companies? An ethical framework for sharing patients' data with for-profit companies for research](#). *J Med Ethics* 2023:jme-2022-108781.

*Research using data from medical care promises to advance medical science and improve healthcare. Academia is not the only sector that expects such research to be of great benefit. The research-based health industry is also interested in so-called 'real-world' health data to develop new drugs, medical technologies or data-based health applications. While access to medical data is handled very differently in different countries, and some empirical data suggest people are uncomfortable with the idea of companies accessing health information, this paper aims to advance the ethical debate about secondary use of medical data generated in the public healthcare sector by for-profit companies for medical research*

<https://doi.org/10.1136/jme-2022-108781>

## Partage des données de santé dans les essais cliniques et intelligence artificielle

Aggarwal R, Farag S, Martin G et al. [Patient perceptions on data sharing and applying artificial intelligence to health care data: cross-sectional survey](#). *J Med Internet Res* 2021;23:e26162.

*Considerable research is being conducted as to how artificial intelligence (AI) can be effectively applied to health care. However, for the successful implementation of AI, large amounts of health data are required for training and testing algorithms. As such, there is a need to understand the perspectives and viewpoints of patients regarding the use of their health data in AI research.*

<https://doi.org/10.2196/26162>

## Politiques de santé en matière prénatale au Royaume-Uni

Cassinelli EH, McKinley MC, Kent L et al. [Preconception health and care policies, strategies and guidelines in the UK and Ireland: a scoping review protocol](#). *BMJ Open* 2023;13:e067822.

*Preconception care can significantly improve maternal and infant outcomes, and thus optimise intergenerational health. The aims of this scoping review are to (1) provide an up-to-date summary of preconception health and care strategies, policies, guidelines, frameworks and recommendations across the UK and Ireland and (2) explore preconception health and care services and interventions in Northern Ireland as a case study.*

<https://doi.org/10.1136/bmjopen-2022-067822>

## Équité, justice, solidarité et santé

Jotterand F, Spellecy R, Homan M, et al. [Promoting equity in health care through human flourishing, justice, and solidarity](#). *The Journal of Medicine and Philosophy* 2023;48:98–109.

*In this article, we develop a non-rights-based argument based on beneficence (i.e., the welfare of individuals and communities) and justice as the disposition to act justly to promote equity in health care resource allocation. To this end, we structured our analysis according to the following main sections. The first section examines the work of Amartya Sen and his equality of capabilities approach and outlines a framework of health care as a fundamental human need. In the subsequent section, we provide a definition of health equity based on the moral imperative to guarantee that every individual ought to have the freedom to pursue health goals and well-being. In the later part of the article, we outline a non-right approach to health care based on three pillars: (1) human flourishing, (2) justice as a disposition not a process, and (3) solidarity.*

<https://doi.org/10.1093/jmp/jhac015>

# NUMÉRIQUE, IA ET TECHNOLOGIES



## Biais et intelligence artificielle en santé publique

Flores L, Kim S, Young SD. [Addressing bias in artificial intelligence for public health surveillance](#). *J Med Ethics* 2023;jme-2022-108875.

*Components of artificial intelligence (AI) for analysing social big data, such as natural language processing (NLP) algorithms, have improved the timeliness and robustness of health data. NLP techniques have been implemented to analyse large volumes of text from social media platforms to gain insights on disease symptoms, understand barriers to care and predict disease outbreaks. However, AI-based decisions may contain biases that could misrepresent populations, skew results or lead to errors. Bias, within the scope of this paper, is described as the difference between the predictive values and true values within the modelling of an algorithm.*

<https://doi.org/10.1136/jme-2022-10887>

## Biais et intelligence artificielle

Tan TF, Teo ZL, Ting DSW. [Artificial intelligence bias and ethics in retinal imaging](#). *JAMA Ophthalmol* 2023.

*Artificial intelligence (AI) and deep learning applications have shown promise in detecting retinal conditions,1,2 such as diabetic retinopathy and age-related macular degeneration. Excitement around AI technologies has been further boosted by the recent release of ChatGPT, a deep learning-based language model conversational AI chatbot. However, this excitement is modulated by rising concerns on the use, regulation, and integrity of manuscripts using chatbot technology in the medical and nonmedical world*

<https://doi.org/10.1001/jamaophthalmol.2023.1490>

## Intelligence artificielle et dispositifs médicaux

Fraser AG, Biasin E, Bijmens B et al. [Artificial intelligence in medical device software and high-risk medical devices - a review of definitions, expert recommendations and regulatory initiatives](#). *Expert Rev Med Devices* 2023;1–25.

*Artificial intelligence (AI) encompasses a wide range of algorithms with risks when used to support decisions about diagnosis or treatment, so professional and regulatory bodies are recommending how they should be managed. AI systems may qualify as standalone medical device software (MDSW) or be embedded within a medical device. Within the European Union (EU) AI software must undergo a conformity assessment procedure to be approved as a medical device. The draft EU Regulation on AI proposes rules that will apply across industry sectors, while for devices the Medical Device Regulation also applies. In the CORE-MD project (Coordinating Research and Evidence for Medical Devices), we have surveyed definitions and summarize initiatives made by professional consensus groups, regulators, and standardization bodies.*

<https://doi.org/10.1080/17434440.2023.2184685>

## Réflexion générale sur la place de l'éthique dans le développement de l'IA en médecine

María Soledad Paladino MSP. [Artificial intelligence in medicine. Ethical reflections from the thought of Edmund Pellegrino](#). *Cuad Bioet* 2023;34:25–35.

*The current scenario of health sciences, and of Medicine in particular, is characterized by the growing role of Artificial Intelligence (AI), thus projecting towards the consolidation of a new model of Medicine. Along with the undeniable advantages offered by the application of AI for the diagnosis and treatment of complex clinical problems, some ethical questions arise, which demand careful reflection.*

<https://doi.org/10.30444/CB.140>

## Intelligence artificielle et recherche clinique

Novak LL, Russell RG, Garvey K et al. [Clinical use of artificial intelligence requires AI-capable organizations](#). *JAMIA Open* 2023;6:oad028.

*Artificial intelligence-based algorithms are being widely implemented in health care, even as evidence is emerging of bias in their design, problems with implementation, and potential harm to patients. To achieve the promise of using of AI-based tools to improve health, healthcare organizations will need to be AI-capable, with internal and external systems functioning in tandem to ensure the safe, ethical, and effective use of AI-based tools. Ideas are starting to emerge about the organizational routines, competencies, resources, and infrastructures that will be required for safe and effective deployment of AI in health care, but there has been little empirical research.*

<https://doi.org/10.1093/jamiaopen/oad028>

## Perceptions chez les enfants de l'intelligence artificielle en santé

Mathews DJH, Ferryman K, Faden R. [Designing health care artificial intelligence that comports with the values of patients. Children are people whose voices must be heard](#). *JAMA Netw Open* 2023;6:e2310605

*In this qualitative study, Thai and colleagues interviewed young people with varying levels of interaction with the health care system to solicit their values and perspectives regarding the integration of artificial intelligence (AI) into health care research and clinical care. Using a sound qualitative approach, including both targeted educational content and appropriately leveled vignettes focusing on different themes, participants were invited to share their thoughts regarding data use, informed consent, and other salient features of clinical research and clinical practice.*

<https://doi.org/10.1001/jamanetworkopen.2023.10605>

## Intelligence artificielle et responsabilité

Stahl BC. [Embedding responsibility in intelligent systems: from AI ethics to responsible AI ecosystems](#). *Sci Rep* 2023;13:7586.

*Intelligent systems that are capable of making autonomous decisions based on input from their environment have great potential to do good, but they also raise significant social and ethical concerns. The discourse on ethics and artificial intelligence (AI) has covered these concerns in depth and developed an array of possible ways of addressing them. This article argues that a shortcoming of this discourse is that it concentrates on specific issues and their mitigation but neglects the nature of intelligent systems as socio-technical systems of systems that are often described as ecosystems.*

<https://doi.org/10.1038/s41598-023-34622-w>

## Intelligence artificielle dans les services d'urgence

Pettersson L, Vincent K, Svedberg P et al. [Ethical perspectives on implementing AI to predict mortality risk in emergency department patients: a qualitative study](#). *Stud Health Technol Inform* 2023;302:676–7.

*Artificial intelligence (AI) is predicted to improve health care, increase efficiency and save time and resources, especially in the context of emergency care where many critical decisions are made. Research shows the urgent need to develop principles and guidance to ensure ethical AI use in healthcare. This study aimed to explore healthcare professionals' perceptions of the ethical aspects of implementing an AI application to predict the mortality risk of patients in emergency departments.*

<https://doi.org/10.3233/SHTI230234>

## Intelligence artificielle et chirurgie

Kavian JA, Wilkey HL, Patel PA, et al. [Harvesting the power of artificial intelligence for surgery: uses, implications, and ethical considerations](#). *Am Surg* 2023;31348231175454.

*Artificial intelligence is rapidly advancing, especially with the advent of ChatGPT technology, and its role in the world of medicine is expanding. Within surgery, AI has the capacity to improve efficiency and results in surgical treatments; however, it similarly has the potential to impose harm onto patients and undermine the role of medical providers.*

<https://doi.org/10.1177/00031348231175454>

## Acceptation du recours et au développement de l'intelligence artificielle par les équipes de soins

Huo W, Yuan X, Li X et al. [Increasing acceptance of medical AI: the role of medical staff participation in AI development](#). *Int J Med Inform* 2023;175:105073.

*Medical artificial intelligence (AI) in varying degrees has exerted significant influence on many medical fields, especially in the midst of the COVID-19 pandemic. However, little is known regarding how to address the reluctance of medical staff to use AI technology. While recent research has highlighted the importance of medical staff participation in the development of AI, the current understanding of influence of medical staff participation on acceptance of AI is limited. Objective : To provide insights into the mechanism that how medical staff participation impacts on the medical staff's acceptance of AI and to examine the moderating effect of speciesism.*

<https://doi.org/10.1016/j.ijmedinf.2023.105073>

## Usages de l'intelligence artificielle en épidémiologie des maladies rares

Lapidus D. [Strengths and limitations of new artificial intelligence tool for rare disease epidemiology](#). *J Transl Med* 2023;21:292.

The recent paper by Kariampuzha et al. describes an exciting application of artificial intelligence to rare disease epidemiology. The authors' AI model appears to offer a major leap over Orphanet, the resource which is often a "first stop" for basic epidemiological data on rare diseases.

<https://doi.org/10.1186/s12967-023-04152-0>

## Usages thérapeutiques de l'intelligence artificielle conversationnelle

Hurley ME, Lang BH, Smith JN. [Therapeutic artificial intelligence: does agential status matter?](#) *Am J Bioeth* 2023;23:33–5.

In their paper, "Conversational Artificial Intelligence in Psychotherapy: A New Therapeutic Tool or Agent?" Sedlakova and Trachsel (2023) claim that therapeutic insights and therapeutic changes are definitionally circumscribed to interpersonal conversations between two rational agents, and thus, CAI cannot contribute to real therapeutic progress. Because of this, they suggest that patients should be warned of the inability of CAI to provide such insights and that the use of CAI in the psychotherapeutic context should be limited.

<https://doi.org/10.1080/15265161.2023.2191037>

## Menaces causées par l'intelligence artificielle sur l'humanité et la santé humaine

Federspiel F, Mitchell R, Asokan A et al. [Threats by artificial intelligence to human health and human existence](#). *BMJ Glob Health* 2023;8:e010435.

While artificial intelligence (AI) offers promising solutions in healthcare, it also poses a number of threats to human health and well-being via social, political, economic and security-related determinants of health. We describe three such main ways misused narrow AI serves as a threat to human health: through increasing opportunities for control and manipulation of people; enhancing and dehumanising lethal weapon capacity and by rendering human labour increasingly obsolescent.

<https://doi.org/10.1136/bmjgh-2022-010435>

## Intelligence artificielle conversationnelle en psychothérapie

Haltaufderheide J, Ranisch R. [Tools, agents or something different? - the importance of techno-philosophical premises in analyzing health technology](#). *Am J Bioeth* 2023;23:19–22.

In their careful analysis of conversational artificial intelligence (CAI) in psychotherapy, Sedlakova and Trachsel (2023) propose a framework for the ethical evaluation of such technologies that locates CAIs on a continuum between mere tools and agents. It is argued that treating CAIs as agents would direct ethical questions "towards questions of defining duties, responsibilities or values that are typical for subjects" (Sedlakova and Trachsel 2023).

<https://doi.org/10.1080/15265161.2023.2191029>

## Économie, choix moraux et machine learning

Smeele NVR, Chorus CG, Schermer MHN et al. [Towards machine learning for moral choice analysis in health economics: a literature review and research agenda](#). *Soc Sci Med* 2023;326:115910.

*Discrete choice models (DCMs) for moral choice analysis will likely lead to erroneous model outcomes and misguided policy recommendations, as only some characteristics of moral decision-making are considered. Machine learning (ML) is recently gaining interest in the field of discrete choice modelling. This paper explores the potential of combining DCMs and ML to study moral decision-making more accurately and better inform policy decisions in healthcare.*

*An interdisciplinary literature search across four databases - PubMed, Scopus, Web of Science, and Arxiv - was conducted to gather papers. Based on the Preferred Reporting Items for Systematic and Meta-analyses (PRISMA) guideline, studies were screened for eligibility on inclusion criteria and extracted attributes from eligible papers. Of the 6285 articles, we included 277 studies.*

<https://doi.org/10.1016/j.socscimed.2023.115910>

## Recommandations de l'Organisation mondiale de la santé

[WHO calls for safe and ethical AI for health](#) n.d. (accessed May 29, 2023)

*The World Health Organization (WHO) is calling for caution to be exercised in using artificial intelligence (AI) generated large language model tools (LLMs) to protect and promote human well-being, human safety, and autonomy, and preserve public health.*

<https://www.who.int/news/item/16-05-2023-who-calls-for-safe-and-ethical-ai-for-health>

# SANTÉ ET SOCIÉTÉ



## Expertise pénale et appréciation judiciaire

Benahmed C. [Où finit l'analyse de l'expert et où commence l'appréciation du juge lors d'une expertise ADN en matière pénale ? Analyse critique d'un cas concret](#), *Médecine & Droit*, 2023.

*L'expertise judiciaire, plus spécifiquement l'expertise d'identification par empreinte génétique est de plus en plus sollicitée dans le procès pénal. Son intérêt n'est plus à démontrer, il est en effet établi que l'expertise génétique est un outil incontournable mis à disposition de la justice pour apporter une réponse pénale. Elle en est ainsi que si elle demeure exploitée selon le cadre légal qui régit son administration en tant que preuve pénale.*

## Fin de vie à domicile

Poterre M. et al. [Palli'HAD : l'étude du parcours de fin de vie en hospitalisation à domicile en Île-de-France](#), *Médecine Palliative* 2023; 22(2):77-83.

*Les patients en soins palliatifs sont souvent pris en charge en Hospitalisation à domicile (HAD), mais peu de données existent sur ce mode de prise en charge. Notre objectif était d'étudier ce parcours sur une grande série de patients.*

<https://www.em-consulte.com/article/1549118/tableaux/palli-had%C2%A0-l-etude-du-parcours-de-fin-de-vie-en-ho#:~:text=Les%20symptômes%20les%20plus%20fréquents,fin%20de%20vie%20au%20domicile>

## Avortement et clause de conscience

Randall P, Mago J. [Abortion restrictions: the case for conscientious non-compliance on the part of providers](#). *J Med Ethics* 2023;jme-2023-108964.

*This paper offers a qualified defence of physician non-compliance with antiabortion legislation in the wake of the Supreme Court's decision in Dobbs v. Jackson Women's Health Organization. The paper examines two ethically troubling trends of post-Dobbs legislation: narrow and vague maternal health exemption clauses and mandatory reporting of miscarriages in jurisdictions where patients may criminal prosecution for medically induced abortions.*

<https://doi.org/10.1136/jme-2023-108964>



## Opposition aux aspects commerciaux du suicide assisté

Della Croce Y. [Against commercial-assisted suicide](#). *Bioethics* 2023.

*The idea of commercial-assisted suicide lives a marginal existence in the bioethical literature, despite its significant presence in popular culture. The practice of commercial-assisted suicide (CAS) is defined as suicide assistance performed for a financial reward through a contractual agreement between a customer and a service-provider, who does not necessarily need to be a medical professional.*

<https://doi.org/10.1111/bioe.13173>

## Euthanasie et suicide assisté en psychiatrie

Scopetti M, Morena D, Padovano M et al. [Assisted suicide and euthanasia in mental disorders: ethical positions in the debate between proportionality, dignity, and the right to die](#). *Healthcare (Basel)* 2023;11:1470.

*The admission of people suffering from psychiatric and neurocognitive disorders to euthanasia and physician-assisted suicide (E/PAS) in some European and non-European countries represents a controversial issue. In some countries, the initial limitation of E/PAS to cases of severe physical illness with poor prognosis in the short term has been overcome, as it was considered discriminatory; thus, E/PAS has also been made available to subjects suffering from mental disorders.*

<https://doi.org/10.3390/healthcare11101470>

## Suicide assisté et psychiatrie

Pollmächer T. [Assisted suicide from a psychiatric perspective](#). *Nervenarzt* 2023.

*Assisted suicide has been the subject of controversial debates for years, particularly intensively since a ruling by the Federal Constitutional Court of Germany (BVerfG) in 2020, which postulated that the only prerequisite for the legitimacy of assistance is the free decision to commit suicide. This brings the issue into the focus of psychiatry.*

<https://doi.org/10.1007/s00115-023-01497-1>

## Peine de mort et don d'organes

Hansman L, Reis-Dennis S. [Death-row organ donation, revisited](#). *Bioethics* 2023.

*In 2011, bioethicists turned their attention to the question of whether prisoners on death row ought to be allowed to be organ donors. The discussion began with a provocative anti-procurement article by Arthur Caplan and prompted responses from an impressive lineup of commentators. In the 10 years since, the situation for death-row inmates seeking to donate has hardly changed: U.S. prison authorities consistently refuse to allow death-row procurement.*

<https://doi.org/10.1111/bioe.13164>

## Réseaux sociaux et prise en charge des enfants et de leurs parents en pédiatrie

Clover-Brown I, Moore B, Andrews CG, et al. [Ethical issues with patient-provider interactions in an evolving social media landscape](#). *Pediatrics* 2023:e2022060066.

*Billions of people use social media, including many patients, families, and providers. As social media has evolved, so have the challenges users face when choosing to share or view content. These challenges are even more complex when providers care for patients and families who post publicly about their experience in the medical system, especially when they have many followers.*

<https://doi.org/10.1542/peds.2022-060066>

## Violence contre les femmes et les enfants

Peterman A, Devries K, Guedes A et al. [Ethical reporting of research on violence against women and children: a review of current practice and recommendations for future guidelines](#). *BMJ Global Health* 2023;8:e011882.

*Changes in research practice during the COVID-19 pandemic necessitates renewed attention to ethical protocols and reporting for data collection on sensitive topics. This review summarizes the state of ethical reporting among studies collecting violence data during early stages of the pandemic.*

<https://doi.org/10.1136/bmjgh-2023-011882>

## Indemnisation du don vivant d'utérus

Lee J-Y. [Ethics of live uterus donor compensation](#). *Bioethics* 2023.

*In this paper, I claim that live uterus donors ought to be considered for the possibility of compensation. I support my claim on the basis of comparable arguments which have already been applied to gamete donation, surrogacy, and other kinds of organ donation.*

<https://doi.org/10.1111/bioe.13169>

## Place des familles dans l'euthanasie et le suicide assisté des patients déments

Scheeres-Feitsma TM, van Laarhoven AJMK, de Vries R et al. [Family involvement in euthanasia or physician assisted suicide and dementia: a systematic review](#). *Alzheimers Dement* 2023.

*Objective : To assess how families are involved in situations of euthanasia or physician assisted suicide (PAS) in dementia. Systematic review searching literature in nine databases from inception up to October 2021. We included studies on family involvement in euthanasia from the perspective of persons with dementia and family caregivers. Themes were formulated through thematic analysis.*

<https://doi.org/10.1002/alz.13094>

## Diminution de l'âge minimal pour accéder à l'identité du donneur de gamètes

Pennings G. [Lowering the age limit of access to the identity of the gamete donor by donor offspring: the argument against](#). *J Med Ethics* 2023;jme-2023-108935.

*Countries that abolished donor anonymity have imposed age limits for access to certain types of information by donor offspring. In the UK and the Netherlands, a debate has started on whether these age limits should be lowered or abolished altogether. This article presents some arguments against lowering the age limits as a general rule for all donor children.*

<https://doi.org/10.1136/jme-2023-108935>

## Enjeux éthiques et juridiques des neuro-droits

Ligthart S, Ienca M, Meynen G et al. [Minding rights: mapping ethical and legal foundations of "neurorights"](#). *Camb Q Healthc Ethics* 2023:1–21.

*The rise of neurotechnologies, especially in combination with artificial intelligence (AI)-based methods for brain data analytics, has given rise to concerns around the protection of mental privacy, mental integrity and cognitive liberty - often framed as "neurorights" in ethical, legal, and policy discussions. Several states are now looking at including neurorights into their constitutional legal frameworks, and international institutions and organizations, such as UNESCO and the Council of Europe, are taking an active interest in developing international policy and governance guidelines on this issue.*

<https://doi.org/10.1017/S0963180123000245>

## Don d'organes après un suicide assisté

Ray R, Martin D. [Missed opportunities: saving lives through organ donation following voluntary assisted dying](#). *Intern Med J* 2023.

*Organ donation after voluntary assisted dying (VAD) in Australia may potentially increase organ transplant rates. Despite significant international experience with donation after VAD, there has been little discussion of this in Australia. We review potential ethical and practical concerns relating to donation after VAD and advocate action to establish programmes in Australia that ensure safe, ethical and effective donation after VAD.*

<https://doi.org/10.1111/imj.16085>

## Modélisation des pandémies et gouvernance démocratique

Sandset T, Villadsen K. [Pandemic modelling and model citizens: governing COVID-19 through predictive models, sovereignty and discipline](#). *Sociol Rev* 2023;71:624–41.

*Pandemic modelling functions as a means of producing evidence of potential events and as an instrument of intervention that Tim Rhodes and colleagues describe as entangling science into social practices, calculations into materializations, abstracts into effects and models into society. This article seeks to show how a model society evinced through mathematical models produces a model not only for society but also for citizens, showing them how to act in a certain model manner that prevents an anticipated pandemic future.*

<https://doi.org/10.1177/00380261221102023>

## Typologie des troubles de la conscience

Fingelkurts AA, Fingelkurts AA. [Patients with disorders of consciousness: are they nonconscious, unconscious, or subconscious? expanding the discussion](#). *Brain Sci* 2023;13:814.

*Unprecedented advancements in the diagnosis and treatment of patients with disorders of consciousness (DoC) have given rise to ethical questions about how to recognize and respect autonomy and a sense of agency of the personhood when those capacities are themselves disordered, as they typically are in patients with DoC. At the intersection of these questions rests the distinction between consciousness and unconsciousness.*

<https://doi.org/10.3390/brainsci13050814>

## Analyse intersectionnelle des différentes phases de la fin de vie

Weßel M, Schweda M. [Recognizing the diverse faces of later Life: old age as a category of intersectional analysis in medical ethics](#). *The Journal of Medicine and Philosophy* 2023;48:21–32.

*Public and academic medical ethics debates surrounding justice and age discrimination often proceed from a problematic understanding of old age that ignores the diversity of older people. This article introduces the feminist perspective of intersectionality to medical ethical debates on aging and old age in order to analyze the structural discrimination of older people in medicine and health care. While current intersectional approaches in this field focus on race, gender, and sexuality, we thus set out to introduce aging and old age as an additional category that is becoming more relevant in the context of longer life expectancies and increasing population aging.*

<https://doi.org/10.1093/jmp/jhac038>

## Réflexions autour de l'enregistrement des patients en psychiatrie

Sadowsky J, Smith K. [Reflections on the use of patient records: privacy, ethics, and reparations in the history of psychiatry](#). *J Hist Behav Sci* 2023.

*One of the most common questions we get asked as historians of psychiatry is "do you have access to patient records?" Why are people so fascinated with the psychiatric patient record? Do people assume they are or should be available? Does access to the patient record actually tell us anything new about the history of psychiatry?*  
<https://doi.org/10.1002/jhbs.22260>

## Deuxième chance après le rejet d'une transplantation hépatique

Shenoy A, Appel JM. [Rethinking second chances: when rejected liver transplant candidates seek reevaluation elsewhere](#). *J Clin Ethics* 2023;34:196–203.

*Liver transplantation offers a lifesaving treatment for patients suffering from end-stage liver failure, but not all candidates in the United States are eligible owing to center-specific criteria. When a patient is rejected at a transplantation center for medical, surgical, or psychosocial issues, they are often referred to other centers. We focus on this practice of reevaluation at a second center when the candidate was rejected for psychosocial reasons.*  
<https://doi.org/10.1086/724232>

## Stratégies en vue de l'optimisation sociale des vaccins rares

Armitage RC. [Socially optimal dosing for scarce vaccines: ethical analysis through the principlism framework](#). *J Eval Clin Pract* 2023.

*Under conditions of vaccine scarcity, the socially optimal dosing (SOD) strategy administers a lower dose of vaccine to a larger number of people than the individually optimal dosing (IOD) strategy, which administers a higher dose of vaccine to a smaller number of people. In the context of vaccines that generate diminishing returns of effectiveness with each additional dose beyond the first, SOD therefore generates a greater total amount of vaccine-induced protection than IOD and, as such, constitutes the socially optimal strategy. While the clinical and public health arguments in favour of SOD have previously been outlined, this article conducts an ethical analysis of SOD for scarce vaccines through the ethical framework of principlism.*  
<https://doi.org/10.1111/jep.13850>

## Médecine de précision et enjeux éthiques

Delston JB. [The ethics of precision health](#). *Bioethics* 2023;37:440–8.

*In this paper, I defend an account of the ethics of precision medicine that can explain both its possibilities and limits. Creating a new conceptual and normative model of the ethics of precision health can ensure that good medicine is also excellent and that excellent medicine is also good by providing a resource to scientists and clinicians.*  
<https://doi.org/10.1111/bioe.13162>

# ENSEIGNEMENT DE L'ÉTHIQUE ET DEMARCHE ÉTHIQUE



## Enseignement de l'éthique en maïeutique

Hazif-Thomas C, Chandès G, Thomas P. [L'enseignement à la réflexion éthique est d'abord une maïeutique](#), *Ethique et Santé* 2023 ; 20(2): 121-129.

*La maladie d'Alzheimer touche en règle le sujet âgé ou très âgé. Elle affecte progressivement et inéluctablement la mémoire mais non nécessairement la compréhension de l'autre. Elle altère la coévolution du malade avec le reste du monde. La rigidité systémique des systèmes de soins ne permet pas toujours une adaptation à la progression de la maladie et à l'évolution du malade. Parcours de soins impliquant soignants, aidants et malades et parcours de vie du malade et de son entourage peuvent voir se creuser un écart neuro-involutif qui s'aggrave avec le temps, un écart entre le temps vécu des uns et celui des autres, au risque d'écarter l'accès au sens du malade déjà confronté à ce qui ne fait plus sens avec la démence.*

<https://www.em-consulte.com/article/1591910/article/l-ethique-des-soins-a-l-epreuve-du-temps-vecu-par>

## Démarche éthique au sein des commissions d'espace éthiques régionaux

Einaudi M-A, Marcucci L. [Spécificités de la démarche d'éthique appliquée dans une commission d'espace éthique régional](#). *Revue française d'éthique appliquée* 2022;13:143–53.

*Les espaces de réflexion éthique régionaux ont vocation à favoriser la réflexion éthique dans les pratiques soignantes, susciter et coordonner les initiatives éthiques. Les commissions de réflexion éthique y participent en leur sein. De composition pluriprofessionnelle et pluridisciplinaire, elles encouragent et facilitent débat, confrontation des opinions et rencontres. L'objectif de l'article est de présenter une démarche d'éthique appliquée déployée par la commission « prévention-protection de l'enfance » de l'espace de réflexion éthique régional paca-Corse à partir d'une situation de violences conjugales en temps de pandémie. Il ne s'agit pas d'une situation type, construite artificiellement, mais au contraire d'une situation vécue, ce qui fait tout son intérêt.*

<https://doi.org/10.3917/rfeap.013.0143>.

## L'enseignement de l'éthique par le débat chez les étudiants en sciences infirmières

Napoleon B, Kuchenrither C. [Debates as an active learning strategy to enhance students' knowledge of ethics in professional nursing practice and health care](#). *Nurse Educ* 2023.

*Ethical debates as an active learning strategy encourage students to think critically through complex ethical issues while using evidence-based literature to compare views and support decision-making actions that affect patient outcomes. The current complexity of health care implies that nurses will continue to encounter ethical dilemmas that demand essential knowledge of ethical principles, critical thinking strategies, and practical communication skills.*

<https://doi.org/10.1097/NNE.0000000000001429>

## Stratégies éducatives de l'enseignement de l'éthique dans les écoles infirmières

Jahangasht Ghoozlu K, Vanaki Z, Mohammad Khan Kermanshahi S. [Ethics education: Nurse educators' main concern and their teaching strategies](#). *Nurs Ethics* 2023;9697330231153684.

*To practice nursing ethics, students must first understand the ethical concepts and principles of their profession, but despite this knowledge, students face challenges in implementing ethical principles in clinical settings. The educational performance of nurse educators is critical in resolving these challenges. This study focused on the lived experiences of nurse educators. Objective : To address the main concern of educators when teaching ethics to undergraduate nursing students and how they deal with it.*

<https://doi.org/10.1177/09697330231153685>

## Internat de chirurgie et enseignement de l'éthique

Golubkova A, Liebe H, Leiva T et al. [Ethics of resident involvement in surgical training](#). *J Clin Ethics* 2023;34:175–89.

*Attending surgeons must maintain balance between promoting education and assuring safe, transparent patient care. This investigation aimed to define ethics that guide surgical training. We hypothesized that resident autonomy in the operating room is influenced by attending approach to patients, specifically patients considered to be vulnerable.*

<https://doi.org/10.1086/725083>

## Enseignement de l'éthique dans la psychiatrie interventionnelle et l'utilisation des neurotechnologies

Giacobbe P, Burhan AM, Waxman R, et al. [Interventional psychiatry and neurotechnologies: education and ethics training](#). *Can J Neurol Sci* 2023;50:s10–6.

*The last two decades have seen dramatic growth in the application of procedurally based interventions for treating refractory psychiatric conditions, leading to interest in developing the foundations for the subspecialty of "Interventional Psychiatry." However, there is cause for concern that the rate of expansion of clinical advances in this field may be outpacing the ability of postgraduate curricula to provide sufficient exposure to and teaching and supervision of these treatments.*

<https://doi.org/10.1017/cjn.2023.27>

## Diffusion de la culture éthique au sein de la protection de l'enfance

Marcucci L, Einaudi M-A. [Questionner les repères éthiques et accompagner l'autonomie en protection de l'enfance](#), *Ethique et Santé* 2023 ; 20(2): 121-129.

*La commission protection de l'enfance de l'espace de réflexion éthique régional PACA-Corse discute les enjeux éthiques des situations remontant du terrain qui lui sont rapportées. Par-delà la singularité d'un récit analysé en commun, dans une perspective d'amélioration des pratiques et de diffusion de la culture éthique, elle a souhaité élargir la réflexion aux spécificités et enjeux de l'accompagnement en protection de l'enfance encore peu connus et étudiés.*

<https://doi.org/10.1177/09697330231153685>

## Promotion des débats autour de la fin de vie

Gonella S, Dimonte V, Arnone Y et al. [Interventions to promote end-of-life conversations: A systematic review and meta-analysis](#). *J Pain Symptom Manage* 2023:S0885-3924(23)00505-5.

*Although several interventions aimed to promote end-of-life conversations are available, it is unclear whether and how these affect delivery of end-of-life conversations. Measuring the processes associated with high-quality end-of-life care may trigger improvement.*

*To estimate the effect of interventions aimed to promote end-of-life conversations in clinical encounters with patients with advanced chronic or terminal illness or their family, on process indicators of end-of-life conversations.*

<https://doi.org/10.1016/j.jpainsymman.2023.05.001>

# DÉMOCRATIE ET PARTICIPATION EN SANTÉ



## Gestion des pénuries de médicaments

Gibert J. Pénuries de médicaments : quelles conditions à l'adaptation de collectifs de professionnels au sein d'entreprises pharmaceutiques ? *Revue française d'éthique appliquée* 2022;13:103–16.

Notre enquête qualitative, menée en France auprès de professionnels de différentes entreprises pharmaceutiques, a permis de décrire les conditions à l'adaptation de collectifs aux risques de pénuries de médicaments. L'approvisionnement en médicaments procède de systèmes d'actions complexes, aux équilibres fragiles et incertains. Dans un contexte de ressources économiques limitées, comment des individus, aux représentations et valeurs plurielles, s'accordent-ils sur des actions communes tout en conservant leur part d'autonomie ? On postule qu'une éthique de la relation est primordiale. Elle préside à la transformation nécessaire d'un collectif, observé en situations de crise, grâce à un processus de coopération à l'origine de solutions créatives. Ces solutions permettent de s'adapter ensemble aux problématiques rencontrées pour garantir aux patients la disponibilité en médicaments.

<https://doi.org/10.3917/rfeap.013.0103>.

## Diffusion de la culture éthique dans les établissements scolaire

Galichon I. Un concours d'écriture sur le Covid pour les étudiants du collège des sciences de la santé de Bordeaux, Vol 20(2): pp. 76-84.

Dans le cadre du projet « Récits face au Covid » porté par l'institut de médecine intégrative et complémentaire (IMIC) du CHU de Bordeaux, soutenu par le groupe Impulsion « Domofrance et Crédit Mutuel du Sud-Ouest » et accompagné par la fondation Bordeaux université, un concours d'écriture a été proposé aux étudiants en sciences de la santé du Collège des Sciences de la santé de Bordeaux, afin d'explorer par le récit comment la pandémie avait modifié leur regard sur le soin.

<https://www.em-consulte.com/article/1591917/article/un-concours-d-ecriture-sur-le-covid-pour-les-etudi>



## Démocratie sanitaire, aspects historiques

Sergent L. [Malades en action, démocratie sanitaire en question](#), Editions Erès, Collection Intervention sociale, 2023, 144p.

*L'histoire tumultueuse de la démocratie sanitaire est faite de conflits, de compromis, de victoires et d'échecs. Contrairement aux idées reçues, elle ne se limite pas aux années sida. Alors que nous fêtons les 20 ans de la loi sur les droits des malades, il est important de saisir les enjeux d'hier pour comprendre les tensions d'aujourd'hui.*

## Prestataires de soins à domicile et participation sociale des personnes âgées

Nordin T, Lundgren AS, Nilsson I. [Constructing loneliness: Home care providers' notions of older adults' social needs and the possibilities of the home care profession to support social participation](#). *Journal of Aging Studies* 2023;65.

*Quality of care is determined not only by political decisions but also by how those policies are understood and managed by professionals when put into action. Home care services, the most common form of elder care in Sweden today, should include social support, which is very important for health and wellbeing.*

## Activité des comités d'éthique de la recherche dans les situations d'urgence et de non-urgence en matière de santé publique

Kudaibergenova T, Ibrahim M, Jain N, et al. [Documentary assessment of the abilities of Kyrgyzstan's research ethics committees during public health emergency and non-emergency situations](#). *J Empir Res Hum Res Ethics* 2023:15562646231176712.

*Institutional Research Ethics Committees (RECs) play crucial roles in the impartial and competent review of scientific research, particularly during public health emergencies. In this report, we examined their ability and capacity to provide this basic service during public health emergencies and non-emergency situations. Our qualitative documentary analysis revealed that there are currently no legal regulations guiding the activities of Kyrgyz RECs during public health emergencies.*

<https://doi.org/10.1177/15562646231176711>

## Participation des patients dans la recherche génomique

Zhang TR. [Ethics of "Counting me in": Framing the implications of direct-to-patient genomics research](#). *J Med Ethics* 2023:jme-2022-108741.

*Count Me In (CMI) was launched in 2015 as a patient-driven research initiative aimed at accelerating the study of cancer genomics through direct participant engagement, electronic consent and open-access data sharing. It is an example of a large-scale direct-to-patient (DTP) research project which has since enrolled thousands of individuals.*

<https://doi.org/10.1136/jme-2022-108741>

## Enjeux communicationnels entre patients et équipe de recherche dans le recueil du consentement éclairé

Eeckhout D, Aelbrecht K, Van Der Straeten C. [Informed consent: Research staff's perspectives and practical recommendations to improve research staff-participant communication](#). *J Empir Res Hum Res Ethics* 2023;18:3–12.

*Informed consent (IC) is the process of communication between research staff and potential research participants. However, ensuring that participants clearly understand what research participation entails, raises significant challenges. The aim of this study is to provide insight into some communication barriers that research staff are confronted with and make practical recommendations to improve communication between research staff and participants. A qualitative research study using semi-structured interviews (n = 13) with research staff from Ghent University Hospital was conducted. Data were transcribed verbatim and coded thematically. Our results indicate that communication- and process-related factors affect the IC process. Emergent recommendations include communication training, more interactive information materials and the use of digital alternatives, increasing general knowledge about research participation and patient- and public involvement.*  
<https://doi.org/10.1177/15562646221146043>

## Consultation lycéenne sur la fin de vie

Claeys S, Castoldi N, Ponelle V, Gzil F. [Rapport de la consultation lycéenne sur la fin de vie en Île-de-France](#), Espace éthique Île-de-France. *Débat public #2 Fin de vie*, 2023

*Ce rapport est issu des débats qui ont eu lieu lors de la consultation des lycéens et étudiants sur la fin de vie organisée par l'Espace éthique Île-de-France aux mois de novembre et décembre 2022. Il ne prétend pas faire la synthèse de l'ensemble des enjeux de la fin de vie, mais offre des parcours de réflexions possibles sur les enjeux qui ont été identifiés par les participants.*

[https://www.espace-ethique.org/sites/default/files/230419\\_debat\\_public\\_2\\_web.pdf](https://www.espace-ethique.org/sites/default/files/230419_debat_public_2_web.pdf)

## Débat sur la fin de vie dans les lycées

Cournaire P. [Réflexions sur la fin de vie](#), *Médecine & Droit* 2023;179:33-40.

*Les réflexions qui suivent portent sur la « fin de vie ». Elles ont pris la forme d'un cours adressé à des étudiants de Classes Préparatoires d'un Établissement parisien : le Lycée Franklin. L'intention qui préside à leur développement est de croiser l'actualité d'un débat citoyen, décidé par le pouvoir exécutif, et des questions « inactuelles », c'est-à-dire des questions de toujours.*

<https://www.sciencedirect.com/science/article/abs/pii/S1246739122001099>

## Autorité morale de l'expérience chez les femmes universitaires noires

Fletcher FE, Lapite FC, Best A. [Rethinking the moral authority of experience: Critical insights and reflections from black women scholars](#). *Am J Bioeth* 2023;23:27–30.  
<https://doi.org/10.1080/15265161.2022.2146807>

## Définition de l'expérience pertinente dans la démarche éthique

Konnoth C. [The problem of "Relevant experience"](#). *Am J Bioeth* 2023;23:36–8.  
<https://doi.org/10.1080/15265161.2023.2146412>