## **BIOETHICS AND TEACHING ETHICS IN UNITED STATES OF AMERICA**

### Interview with Nada Gligorov, Associated Professor to Mount Sinai University, New York, US, done by Maria Aluaș

## Question 1: "What is, in your opinion, the definition of a bioethicist? What exactly does a bioethicist do in the US context?"

Bioethics is an interdisciplinary field and bioethicists in the US can come from a variety of different backgrounds; they can be philosophers, lawyers, medical professionals, and clergy from a variety of different denominations. Depending on their background, bioethicists can serve a variety of different roles. In the U.S. philosopher bioethicists who work in philosophy departments might primarily do academic work, i.e., teach about and write on topics in bioethics. If they work in academic medical centers, they might assume additional roles, such as serving as ethics consultants or they might serve as members of ethics committees. Bioethicists who are non-philosophers and who work in academic medical centers will also consult on ethical issues as they arise in medical practice and research. In medicine such consultation might take different forms, they might occur at the bedside or as part of an ethics committee. In research, bioethicists might be members of Institutional Review Boards (IRBs) (in the US IRBs review and approve all studies that use human participants), but there is also an effort to establish research ethics consultation services which would make ethical consultants available to researchers throughout all of the stages of research - starting from conception and design to participant recruitment.

## *Question 2: "Tell us something about the difficulties of the work in a multidisciplinary team. What are the most usual challenges of this work?"*

I think there are a variety of difficulties. One of them is accepting the importance of interdisciplinary approaches and respecting different expertise. Each person on an interdisciplinary team has a background that determines their approach to patient care, for example, and because of that they might be reluctant to accept alternative perspectives. Bioethicists who are not medical professionals or researchers might face particular challenges when it comes to being accepted into an interdisciplinary team because they might be perceived

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as outsiders or as not having the required expertise. Being well acquainted with the hospital and clinical environments can help dispel the assumption that bioethicist are not well suited to such environments. Similarly, for research ethicists familiarity with the context within which researchers do their work can help.

Communication is also sometimes and issue because people assume that things they know or understand are obvious to everybody else. Members of an interdisciplinary team need to help fill in gaps in expertise and express facts and reasons in a way that does not assume a particular background. The need to explicitly state all of your assumptions and explain your approach to an ethical issue can help precipitate a resolution of the case. Medical decisions, for example, are often based on judgments about values, such as judgments about acceptable quality of life, and once those are expressed, it is easier to discuss the appropriateness of those assumptions and resolve the problem.

# *Question 3: "What the most discussed bioethics topics in the US medical universities?"*

I do not know of data that would help answer that question accurately. Based on anecdotal evidence only, end-of-life issues most often trigger an ethics consultation. Questions about surrogacy--who should decide for the patient if the patient cannot decide for him or herself--are frequently discussed as well. In research ethics, issues of informed consent are probably the most prominent.

Issues discussed in the bioethics literature have a much wider range because they are not anchored by the practical considerations of doing research or treating patients. So if the question is about the trendy topics in bioethics, it is even harder to answer that objectively. It seems to me that ethical issues in neuroscience have been receiving a lot more coverage, but that impression is based partially on my interest in that area of ethics.

# Question 4: "In your opinion, what could be the most appropriate way to introduce ethical and bioethical debates in our (Eastern Europe) hospitals, universities, and societies?"

To start, it is important to work to raise the awareness that ethical issues in medicine and research exist; that they are intrinsic to the practice of medicine; and, that resolving bioethical issues requires expertise in ethics.

I think in academic medical centers and hospitals it is important to focus on education for all medical professionals to help them identify ethical issues in medicine and teach them some basic tools for how to approach these problems. Educating healthcare professionals to accurately identify ethical issues fosters the understanding that ethics consultations services or ethics committees can be useful resources for physicians.

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Similarly for researchers, I think that promoting education, such as requiring courses in research ethics or responsible conduct of research for all who are completing doctoral programs in science is a good first step.