Pediatric Ethical Considerations in the Time of Covid

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Disclosures

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There will be some difficult topics discussed during this presentation including ventilator triage, ethics of rationing care, etc.
Objectives

• Define four principles of medical ethics
• Discuss ethical dilemmas in allocation of medical resources
• Understand issues at the intersection of personal and professional obligation
• Describe ethical issues affecting pediatricians as a result of the COVID-19 pandemic
• Understand the ways that pediatricians can advocate for their patients during a pandemic
Principles of Medical Ethics

• Autonomy
  • Right of the patient to make their own medical decisions about their own care

• Nonmaleficence
  • First, do no harm

• Beneficence
  • Take positive and direct steps for the good of others

• Justice
  • Fairness in medical decision making
Allocation of resources

• Based in the ethical principle of justice
• Deontological ethics
  • Designating an action as "right or wrong" based on moral code
  • Consequences not considered
  • Double effect doctrine
• Utilitarian ethics
  • Designating an action as “right or wrong” based on maximum positive outcome
  • Shifting toward utilitarian ethics during pandemic
Allocation of Resources

• Appropriate considerations (AMA Code of Ethics)
  • Likelihood of benefit
  • Urgency of need
  • Change in quality of life
  • Duration of benefit
    • Life years gained
    • Not necessarily age related
  • Resources required
    • Amount, duration, etc
Allocation of Resources

• Inappropriate considerations (AMA Code of Ethics)
  • Ability to pay
  • Contribution to society
    • Wealth
    • Status
  • Perceived obstacles to treatment
  • Contribution of patient to medical condition
    • Retaliatory exclusion
  • Past use of resources
Allocation of resources – COVID considerations

- High risk patients (>65, chronic medical conditions)
  - Highest risk for morbidity and mortality
  - Least number of life years gained
- Healthcare workers
  - Increased ability to care for others
  - Typically have access to PPE
- Essential workers
  - Important to keep economy and services operational
- Children
  - Greatest number of life years gained
  - Decrease asymptomatic spreader pool
  - Safer reopening of schools (education, hunger, decreased abuse)
Ventilator triage

- Who lives and who dies?
  - Immediate and tangible effects
- Limited resource
  - Summer 2020, US has about 60,000 full functioning and 100,000 basic ventilators
  - In the beginning of the pandemic, CDC estimated number of patients needing mechanical ventilation could be as high as 31 patients per ventilator
Ventilator triage

- National Institute for Health and Care Excellence (NICE) guidelines focus on probability of survival
- Balance between utility and equity
  - Equity - fairness, based on each patient's need
  - Utility - greatest good
- Three step process
  - Application of exclusion criteria (shock, etc)
  - Mortality risk using SOFA (Sequential Organ Failure Assessment) or PEOLD (Pediatric Logistic Organ Dysfunction)
  - Continuous assessment
Ventilator triage

• Protocols and panels should be in place
  • Mitigate implicit bias
  • Follow laws and regulations
  • Displace burden on clinicians
    • Someone still has to extubate the patient
  • Restricted family access increases physician relationship with patient
    • More difficult to make objective decisions
Experimental therapeutics and vaccinations

• Unequal distribution between states and between groups
  • Florida allocating vaccines outside of CDC recommendations
  • Healthcare workers > high risk patients > essential workers > general population

• Unequal distribution between wealthy and poor countries
  • Wealthy nations have snatched up almost all available doses of the vaccine
  • Poor countries have greater need (inadequate healthcare, sanitation, poverty)
  • WHO COVAX initiative aims for equitable distribution of covid vaccine
    • First doses administered in Ghana this week
    • Made possible through donations and special programs (US joined mid-February)
Healthcare resources

• "Elective" surgery
  • Determination of what is truly elective
  • Non-emergent surgery cancellation may have long term consequences (hernia repair, tympanostomy tubes, epilepsy surgery, etc)

• Subspecialty care
  • Reduced access leading to delayed diagnosis and treatment
  • Increased burden on primary care

• PPE

• Medical personnel
  • Redeployment of staff and physicians will have consequences
Caring for patients

• "imperative to care for patients and to alleviate suffering and place patients' welfare above the physicians own self-interest or obligation to others" - American Medical Association Code of Ethics

• This is not a new conversation…
  • HIV, SARS, Ebola
  • Pediatrics deal with this daily to a lesser extent – triage sick patients (chickenpox, measles)

• Balance between professional obligation and the idea that appropriate training and resources are rights of the healthcare worker
Caring for patients

• PPE
  • Caring for high-risk patients without PPE causes "harm" by decreasing amount of healthcare providers available for future patients
• Physicians in high-risk groups need special accommodations
  • >65, immunocompromised, pregnant, comorbid conditions
• State level workforce determinations
  • Requiring work outside scope of practice
  • Reactivation of licenses and drafting
Caring for patients

- Physicians have an obligation to care for own family and protect them from harm
  - Complicated by lack of PPE
  - Lack of support from employers and government
- Government and healthcare institutions carry the obligation for well-being of healthcare workers
- False narrative of the “healthcare hero”
  - Focus on sacrifice instead of the root cause of the problem
  - Displaces personal responsibility
Caring for patients

- Caring for patients that don’t follow regulations
  - Morally distressing for physicians and healthcare workers
- Retaliatory exclusion
  - Violates the AMA Code of Ethics, specifically inappropriate allocation of resources
- Informed choices
  - Are these patients making informed decisions?
  - Consider informed consent as a guideline
  - Siloed realities/toxic individualism
Stanford study

- Large gatherings where masking and social distancing regulations largely not followed
- Directly responsible for COVID-19:
  - 30,000 cases
  - 700 deaths
- Positivity rates increased sharply following gatherings
Moral injury

“Moral injury occurs when we perpetrate, bear witness to, or fail to prevent an act that transgresses our deeply held moral beliefs.” - Wendy Dean, MD

- Contrast to burnout due to implication of blame

Medscape survey
- 64% of physicians stated COVID-19 pandemic worsened ‘burnout’

Sources of stress
- Treating terminal patients, being support person at end of life
- Lack of PPE and personal risk
- Contraction of COVID-19 and concern about family support if death or disability incurred as a result

Coping mechanisms
- Increasing food intake, alcohol consumption, prescription drug use
Moral injury

- 'Death by 1000 Cuts': Medscape National Physician Burnout & Suicide Report 2021

How Has COVID-19 Affected Your Worklife Happiness?

- Very unhappy: 10% currently, 4% pre-pandemic
- Somewhat unhappy: 24% currently, 15% pre-pandemic
- Neither happy nor unhappy: 17% currently, 12% pre-pandemic
- Somewhat happy: 34% currently, 41% pre-pandemic
- Very happy: 15% currently, 28% pre-pandemic
Redeployment of pediatricians

- Treating adult patients or practicing outside scope of specialty
  - Would this cause more good than harm?
- Tiered care
  - Patients up to 26 or with pediatric issues, etc
- Taking away from regular duties leading to missed care opportunities for preventative medicine
- Liability concerns
- Informal poll of US pediatricians showed 16% of 270 respondents have been asked to treat adult patients
Medical needs of children

• Decreased access to healthcare
  • Transportation
  • Loss of insurance
  • Lack of parent/guardian escort
• Decreased availability of home health services
• Virtual speech therapy
• Virtual PT/OT
• Suspension of early intervention services
Medical needs of children

• Infants born to SARS-CoV-2 Moms unique challenge
• Encourage breastfeeding (AAP and WHO)
  • “WHO recommends that mothers with suspected or confirmed COVID-19 should be encouraged to initiate or continue to breastfeed. Mothers should be counselled that the benefits of breastfeeding substantially outweigh the potential risks for transmission.”
• Do not separate infant-mother dyads (AAP and WHO)
  • Encourage hand washing, masking and social distancing when possible
Preventative medicine

• AAP Recommendations for Well-Care
  • Prioritize in-person care for WCC newborn – 24 months
  • Continue well checks in-person or via telehealth as needed
• Risks of delaying Well-Care
  • Decline in vaccination rates
  • Missed hearing and vision screening
  • Decreased fluoride varnish application
  • Lack developmental surveillance
  • Decreased visibility to mandated reporters
Preventative medicine

- Weekly changes in Vaccines for Children (VFC) orders and Vaccine Safety Datalink (VSD) doses administered Jan-April 2020
- Large decline in vaccination overall
- Better rates in <24m age group
Mental Health

- Decreased community resources for children and caretakers
- Increased incidence of substance abuse
  - Direct use
  - Lack of access to rehabilitation services
- Internet and gaming addictions
  - Long term sequelae not well understood
- Loss of family members to COVID-19
- Social isolation
  - Depression
  - Suicide
Educational needs

- Access to equipment and internet
  - Lansing area schools ran out of laptops leaving a cohort of students without any instruction
  - Migrant and refugee family virtual school burden may fall on non-English speaking family members
- Space
  - One-bedroom apartment with multiple children not conducive to learning
- 504 and IEP
  - Schools are still required to fulfill their obligations
  - Plans may need to be adjusted for virtual school challenges
Educational needs

- ADHD
  - Medications may need to be titrated
  - Diagnostic difficulty as decreased observers and settings
  - Special accommodations needed
- Special needs
  - POHI programs
  - Paraprofessionals
  - Caretakers not equipped to provide special education
- School based therapy
  - PT/OT
  - Speech
Educational needs

- In person education necessary for
  - Literacy and numeracy
  - Emotional development and social interaction
  - Cognitive development
  - Learning about hand hygiene, social distancing, mask wearing
  - Access to breakfast and lunch
  - Access to utilities (water, heat, electricity, internet)
Hunger

- Annual income of $33,000 for a family of 4 qualifies for free/reduced lunch
- Detroit Public Schools
  - 42,843 students
Hunger

• Hamtramck Public Schools
  • 94% eligible for free/reduced lunch
  • 59% living in poverty
• Northville Public Schools
  • 7% eligible for free/reduced lunch
  • 2% living in poverty
9-year-old girl cries to virtual class that she's 'starving,' local food bank steps in

After the third-grader's classroom incident, a social worker connected the family to a local food bank.
Violence, exploitation and abuse

• Public health emergencies increase risk for child abuse and neglect because of increased stressors and loss of financial and social supports.
  – CDC MMWR
Violence, exploitation and abuse

- Risk Factors (CDC)
  - Individual
    - Children <4 years
    - Children with special needs
    - Parental lack of understanding of child needs and development
    - Parental history of abuse or neglect
    - Substance abuse and/or mental health issues
    - Parent characteristics: young age, low education, single parent, large number of children, low income
    - Transient caregivers
  - Family
    - Social isolation
    - Family stress
    - Parenting stress
  - Community
    - Community violence
    - Neighborhood disadvantage, poor social connections
Violence, exploitation and abuse

• Protective Factors (CDC)
  • Family
    • Supportive family and social networks
    • Support for basic needs
    • Stable family relationships and nurturing parenting skills
    • Parental employment
    • Parental education
    • Adequate housing
    • Access to health care and social services
    • Caring adults outside the family serving as role models
  • Community
    • Community supporting parents and preventing abuse
Violence, exploitation and abuse

- Decreased visibility to mandate reporters
  - Colleague at CPS stated call volumes down ~50% per her estimation, consistent with MMWR data
- Physical abuse increases after economic crisis and natural disasters
- Lack of supervision
  - Death in the family
  - Increasing work restrictions on guardian
  - Lack of school
- Difficulty with foster care placement
  - Lack of willing caregivers
  - Delay in license and certification
Child Abuse

- ED visits related to child abuse decreased 53% in early 2020 compared to 2019
- Proportion of ED visits related to child abuse increased
- Consistent number of child abuse related visits requiring hospitalizations
- CDC MMWR, Dec 2020
Health inequity

• When groups and/or individuals experience avoidable differences in health outcomes as a result of systematic disadvantages attributed to unequal distribution of power, money and resources
  • Migrants
  • Refugees
  • Unemployed
  • People of color
  • People living in poverty
Health inequity

- Inability to social distance
  - Multi-generational housing
  - Unsafe neighborhoods
- Lack of hygiene and cleaning supplies
  - Access to bleach, wipes, toilet paper, paper towel etc
    - WIC cards reloaded at beginning of the month
  - Access to clean water, electricity, heat
- Increased share of frontline and minimum wage jobs
  - Clerks, waitresses etc
- Lack of access to healthcare
- Poor health literacy
  - ~50% of adults in Detroit are functionally illiterate (2011)
Advocacy

- Communication with lawmakers and VOTING
  - Michigan Senate [https://senate.michigan.gov/](https://senate.michigan.gov/)

- Connection with legal resources
  - Michigan community resources [https://mi-community.org/](https://mi-community.org/)
  - Michigan Legal Services [https://milegalservices.org/](https://milegalservices.org/)

- Food banks support and referral
  - AAP Huger Vital Signs
  - Connect with community food banks
Advocacy

• Advocating for adequate housing
  • Eviction moratorium
  • Get in touch with your local shelters
• Safe outdoor space
  • Reduces exposure to pests and pollutants
  • Parks and playgrounds reopening
  • Warm weather approaching!
Advocacy

• Access to utilities and sanitation
  • Cleaning supplies, clothing, water
  • The Heat and Warmth Fund [https://thawfund.org/](https://thawfund.org/)
  • 2-1-1
References

References