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Patient Advocacy and Autonomy

Patient Advocacy, Autonomy and Informed Consent

Patient advocacy is the right of a patient to have his or her health care choices carried out in a manner that conforms to their personal philosophy. It allows a patient to choose whether to accept or refuse a therapy or any medical procedure without any interference of coercion. Proponents of patient autonomy dictate that one should always protect patient's interests and choices without allowing their own values to influence treatment. However, nurses are allowed to assist patients and make recommendations that will enable them to make a better decision. In the event of patients being unable to articulate their health wishes, then a medical professional should discuss the best course of action with family members.

Patient autonomy implies having the authority to make decisions as well as the freedom to conform to one's professional knowledge. Therefore, patients have the right to select suitable treatment among various medical procedures and receive necessary medical information. However, autonomy is not confined to allowing patients to make their own decisions. In fact, medical practitioners have the prerogative of creating necessary conditions for an autonomous choice. It will involve the presentation of treatment in the form that the patient can easily understand. However, the medical practitioner should not make a decision for the patient. Adhering to patient's autonomy is the foundation of medical ethics.

Informed consent is a process where one gets permission before administering a healthcare intervention to a person. For instance, a healthcare provider may ask a patient whether to receive a therapy before providing it. However, before a patient gives a green light, the physician should ensure the one has all facts of every procedure as well as the risks involved. Patients should also listen to physicians and ask questions what they do not understand. When obtaining informed consent from minors and incompetent individuals, parents, guardians or siblings ought to be consulted. The ulterior objective for informed consent is that the patient is given a platform to be an informed participant in his or her healthcare decisions.

A Discussion of the Nuremberg Code and the Declaration of Helsinki

The Nuremberg Code is a plethora of research ethics principles involving human experimentation. It stems from Nuremberg trials, which took place at the end of the Second World War. The code incorporates the principle of informed consent, absence of coercion as well as beneficence towards experiment participants. It encompasses ten principles that cater for the wellbeing of human beings. The proponents of the Nuremberg Code dictate that the voluntary consent of humans is vital. Additionally, performed experiments should focus on fruitful results that benefit society. Similarly, such experiments

should be embedded in previous procedures. While performing an experiment, the physician should avoid unnecessary physical and mental suffering. In the event of the experiment implying a risk of death or injury, the physician should not proceed.

Proponents of the Nuremberg Code also lay emphasis on the correlation between the risks involved in a human experiment and the expected benefits. There ought to be adequate preparations and facilities that protect against any accruing risks. In addition, those performing experiments should be proficient and well-trained. However, the patient has the right to stop the experiment if the one finds it impossible to continue. Similarly, when an experiment is on-going, the scientist in charge should consider stopping it if he or she feels that continuation may be dangerous.

The Declaration of Helsinki is a cornerstone document in human research ethics. It was instigated by the World Medical Association (WMA) and uses the Nuremberg Code as its foundation. The declaration is morally binding on physicians providing higher standards of human protection. It lays emphasis on the importance of ensuring that biomedical research conforms to scientifically accepted principles. In addition, when publishing the research results, physicians should reserve their right to ensure accuracy, which proves their proficiency. The research protocol should also contain a statement of ethical considerations to ensure that the principle in the declaration has been complied with. In addition, physicians involved in a research should always protect the health, dignity and integrity of all research participants. Moreover, there should be appropriate treatment

and compensation for patients who may be harmed while conducting the research. Medical practitioners should also ensure their research exhibits causes, development and effects of diseases that improve therapeutic interventions. All research protocols should also be bound by the involved ethical considerations.

Events that Led up to the Development of Ethical Guidelines for Conducting Human Clinical Trials and IRB

The impetus behind ethical guidelines for conducting clinical trials stems from the verdict delivered on August 20, 1947. It was against Karl Brandt and twenty-two other doctors who took part in human experiments in concentration camps. The case suspects had engaged in the sterilization of German citizens as well as mass murder. The defendants were accused of the conspiracy to commit war crimes against humanity and perform medical experiments without the subject's consent. The latter comprised experiments on twins, as well as head injury, freezing, malaria, seawater and mustard gas. These were inhuman and deplorable and led to the loss of lives. The involved doctors were torturing the participants by subjecting them to inhuman acts. A vast majority of the victims were of special interest such as being mentally ill or physically impaired. In May of the same year, Dr. Leo Alexander established six points to pinpoint legitimate medical

research. Other four points were added by the trial verdict to constitute the ten points in the Nuremberg Code. It explains the origin of ethical guidelines for conducting human clinical trials.

How the Belmont Report Works to Protect Special Populations

The Belmont Report protects special populations by ensuring respect for persons, beneficence and justice. In regards to the respect for persons, the report protects the autonomy of all people by treating them with courtesy and respect. In addition, it allows for informed consent and ensures that researchers are always truthful and do not engage in deception. The dynamics of respect for persons dictates that human subjects should voluntarily take part in a medical research. The issue with respecting persons is that it stems from blanking competing claims urged by the principle of respect. Beneficence protects special populations by ensuring that persons are ethically protected by securing their wellbeing.

The welfare of research participants should always be the goal of any clinical trial. The beneficence concept encompasses four major aspects. They include removing and preventing evil or harm, practicing good and the lack of orchestrating evil or harm. Beneficence sums up acts of kindness or charity that surpass strict obligation. Justice

ensures the protection of special populations by enhancing the orchestration of non-exploitative and well-considered procedures. The distribution of costs also takes place fairly among the involved research participants. However, cases of injustice may take place when an individual is not accorded a benefit he or she is entitled to without a proper explanation. Similarly, questions of justice should not be associated with social practices that involve political representation, taxation and punishment.

Conclusion

The nursing procedure is based on the ethical guidelines that dictate the relationship between the physician and the patient. When administering any medical procedure, a patient has the right to choose the best option without being coerced. Similarly, the physician should provide information and facts that will enable the patient to make a better decision.