

Ethical questions in Health Care

Task 1: Draw a simple cause-effect diagram as you read the first paragraph.

Task 2: Choose the correct answers to the questions. Before you start looking for the information (scanning), make a list of possible key words which refer to the topic.

1. According to the traditional definition of death, a person is dead

- a. when the heart stops beating
- b. when certain parts of the brain stop functioning
- c. when the patient has no hope of recovery

Key words:

2. The writer describes the different opinions of two groups of people. What is the opinion of the first group of people the writer mentions in the passage?

- a. There are circumstances in which a patient can be allowed to die without more treatment.
- b. The duty of a doctor is to prolong a patient's life, regardless of the circumstances.
- c. It is dangerous to give people the right to decide that a patient is not to receive any more treatment.

Key words:

Task 3: This activity provides opportunity for you to organize details for a synthesis of what you have read.

Choose the sentence that best expresses the main or central idea of the passage:

- a. There is disagreement in the United States about a question that is raised by modern medical technology: Should we prolong life in all circumstances?
- b. Although medicine has benefited greatly from modern technological advances, doctors are still not capable of improving the condition of all their patients.
- c. A lot of people in the United States believe that it is always wrong to stop giving treatment to incurably ill patients.

Task 4: Focus on the general idea of paragraphs 2, 3, and 4 of this passage

What side does the writer support in the discussion?

- a. The writer clearly agrees with the people who believe that patients must be kept alive in all circumstances.
- b. The writer does not make his opinion clear.
- c. The writer clearly agrees with the people who believe that incurably ill patients have the right to ask for their treatment to be stopped.

Ethical Questions in Health Care

In the past ten years, advances in medical technology have enabled doctors to treat medical conditions that they were not able to treat before. For many patients, the new technology has brought new life and new hope. For the medical profession and for society, however, it has also created a number of very difficult ethical and moral problems.

Even with the new technology, doctors are often not capable of improving the condition of their patients; in these cases, the new machines merely prolong life instead of improving it. Sometimes conscious patients continue to live and suffer because they are kept alive by machines. There are also other patients in U.S. hospitals who have been unconscious for long periods of time because parts of their brain are not functioning. They are kept alive by modern drugs and life-support systems but there is often little or no chance of recovery. Situations like these are forcing us to reconsider our ideas about the goals of medicine. For example is one goal to prolong life, regardless of the quality of that life? Alternatively, are there circumstances where doctors can stop treatment and allow the disease to reach its natural and – often the death of the patient?

Many people in the United States answer this second question with a definite “Yes”. They believe that a patient’s survival regardless of the circumstances is absolutely not the goal of medicine. Many state legislators agree, and many states now define death in a way different from the traditional way. According to the law in these states, a patient is dead when certain parts of the brain stop functioning, not when the heart stops. And in more than twelve states, patients can now request their doctors not to prolong their lives if they have no hope of recovery.

However, other people fear that these developments will contribute to the growth of a society that places less importance on human life. They point out that already in some cases, babies with massive brain damage are not given treatment for some other unconnected illness. They have been allowed to die because it was decided that they had no chance of living a normal human life. In the case of other patients who are unconscious and incapable of deciding for themselves, the critics ask, who will make the decisions about stopping or continuing treatment? Do we really want, they ask, a society where someone else can decide whether we live or die?

Pakenham, J. (1998), Making Connections, CUP