# Medical heroin use in cancer treatment: ethical appraisal



Medical heroin use in cancer treatment: ... - Paper Example

Page 2

HEROIN USED IN CANCER TREATMENT- ETHICAL OR NOT

Name: Engin LAP

INTRODUCTION

Our research in cancer treatment used heroin, morphine ethical assessment of the use of such agents will be carried on. The method used will be used as a qualitative method. Research investigating various literature, obtained via literature will be discussed. Cancer is one of today's most important health problems. Frequent and due to the high deadly is a public health problem (Eti, 2005). Of patients with cancer of the biggest fears that a deadly disease of cancer, the second biggest fears of the disease have been shown to cause severe pain. Cancer diagnosed patients, %20-35 disease middle period %30-50 of patients and advanced stage patients in the %60-100 lesion type and

by substituting moderate or severe pain in the draw (Eti, 2005).

Treatment and care of patients with health care professionals and health care institutions struggle for managers of ethics requires an array. When it comes to cancer, the situation is more delicate and complicated. The goals of medicine in the decision (to maintain health, to improve quality of life, to prevent untimely death, to relieve pain and suffering) are difficult to obtain (Uçan, 2007). Every decision indirectly affect the patient's quality of life and life expectancy due to the oncologist, treatment and care of cancer patients are expected to adhere to the highest ethical standards (Ersoy, 2009). Pain in cancer patients appears to be the most common symptoms and in the last stages of life are increasing in prevalence and severity. By adversely affecting quality of life and integrity for patients and their relatives than even https://assignbuster.com/medical-heroin-use-in-cancer-treatment-ethicalappraisal/

death itself can be a source of great fear (Uzunoglu, 2011). Solving the pain or the pain was not addressed, inadequacy and pain sufferers have decreased the quality of life of people. Uncontrolled pain person physical activity, social relationships negatively affect psychological tension increases. The food habits of people with chronic pain, sleep patterns and social structure are adversely affected. The relationship between pain and psychological well-being is extremely complex and inversely proportional. Mood, perception of pain and pain-related experience can increase the intensity. Likewise, the presence of pain is the most important determinant of mood.

Pain Management is a Patient Rights. The most important purpose of the rights of patients of health care to everyone, equally accessible and can be delivered in a continuous manner. When evaluated in terms of ethical pain; Do not leave people in pain that can be corrected is contrary to human rights has been concluded. Everyone deserves to be in pain pain relief. If this right stems from respect for human rights in the world. Health workers also an important responsibility is to provide adequate analgesia to pain sufferers. Cancer of the disease compared to people suffering from the disease are experiencing pain. In determining the source of pain intensity is the patient. Subjective complaints in which the objective evaluation of pain measurement scales which are usually between 0-10 verbal or numerical scale used. Pain assessment scale of five or more is important that both of the patient's pain, as well as an indication of the quality of life is greatly distorted. 7 pain measurement scale 1-4 mild pain, moderate pain is 5-6, while 7-10 is classified as severe pain apioid are used for pain relief. To be

effective in treating different types of pain, route of administration due to the diversity and reliable property constitutes the main treatment in cancer pain. During Cancer Treatment; The methods used for the treatment of severe pain in the second step involved with drugs or unavailability of adequate effective in cases where the pain is very severe opioid weak to strong opioids are used instead of the WHO analgesic ladder system should be made to step 3. Strong opioids are quick and slow-release preparations. Morphine, hydromorphone, bupren-fun, methadone, fentanyl, alfentanil, heron strong opioids are the most commonly used in Europe. These include oral, parenteral, buccal, transdermal, transmucosal and transnasal ways be given. Optimal pain control, analgesic doses given on a regular basis can be realized by (Ripamonti C., 2009 & Messina J., 2008).

# İnforming

A pain relieving the pain of suffering related to how health services should be clear and easy to reach. Pain for the patient's own case that the interference characteristics, risks, benefits the right to know exactly if there are alternatives. Physicians to withhold information would be more useful in patients with faith may not be familiar with the consent of the family. For example, many cancer patients disease in our country what it is, or what awaits them in dealing with the disease do not know. Patient status of chronic pain patients to pain and disability in order to eliminate planned painkillers to be used as analgesics angle (morphine, heroin) operation characteristics of the patient analgesic in terms of expected contribution about the transfer of information understandable language, foreign words that are not to be done with.

https://assignbuster.com/medical-heroin-use-in-cancer-treatment-ethical-appraisal/

# Approval

appraisal/

The prerequisite for any medical intervention after the patient's informed consent for the procedure is planned. The surgery patients have the right to refuse or stop. In such a case the patient should be explained the consequences of the attempt made. Patients will not be reported to the contrary, a statement in an emergency or if the attempt is made in advance. If the attempt to get the approval of the patient's legal representative can be made (Evren, 1997). Even if the patient's legal representative should participate in the decision making process itself. The use of all components of the human body and is essential for maintaining the patient consent. However, diagnosis, treatment and care Heroin, Morphine drug use can be applied without the consent of the patient when needed (TellioÄŸlu, 2002).

Addiction, Tolerance and Detoxification

All serious side effects of pain medications and methods are available. When considered ethically adequate pain relief pain patients and physicians, the balance should be made available with minimal side effects, morphine used in cancer treatment, there are side effects of substances such as heroin.

Addiction, tolerance and physical dependence on the substance of abuse was defined as. Tolerance, substance repeated, exposure, in the form of a reduction in the pharmacological response represents adaptation.

Physiological dependence, uptake ceases or is reduced significantly, emerging situations that are marked with withdrawal symptoms. Withdrawal symptoms, substance starts as soon disappear from the body via metabolism, and excretion of the substance initially in the direction opposite https://assignbuster.com/medical-heroin-use-in-cancer-treatment-ethical-

of the effect of "rebound" effects (Evren, 1997). Detoxification is the first step to start treatment and stay out without real success is not the situation. The more difficult aspects of treatment, drug-taking behavior is protection again. The adaptability of the body, treated with any known drug and is not dependent on tolerance and withdrawal symptoms often occur should be noted that (Evren, 1997). Detoxification of patients addicted to heroin and other opioids, just stay away from long-term substance or opioid antagonist with maintenance helps to prepare rehabilitation. Because most patients relapse quickly because they are away from substances remain in the program, although supported by society and the private health care system, even though detoxification is usually unsuccessful. Heroin is used in medical terms (recreational drug) use of terms can be highly addictive (Evren, 1997). Again there is no detoxification. However, opioid withdrawal syndrome in medical terms used obtrusive, though, is not life threatening and long acting opioids, such as morphine, can be easily treated by reducing the dose gradually (Evren, 1997).

Heroin/Morphine usability in Cancer Treatment

Adequate pain management in cancer patients can not be provided without the dedication of the function. It is not possible to extend the design life in cancer patients. Then the latest objectives of should be to prolong life. These objectives and priority in making belüien both clinicians and patients also should play a role. As mentioned previously proposed methods for the treatment of pain serious side effects may be undesirable (Cansız, 2002). For example for cutting pain opioid tolerance can lead to the high dose. This tolerance is a state abbreviation patient survival but reduces the quality of https://assignbuster.com/medical-heroin-use-in-cancer-treatment-ethical-appraisal/

life. briefly outlined and exemplified patient rights and physician to the patient of their duties properly fulfilled only physicians as health provision employees interests are not at the same time the government, hospitals, nurses, insurance companies, health care workers providing education to medical schools, nursing schools as institutions that are interested with. In different countries in different stages of this hierarchical order is clogged (Cansız, 2002). For example in some countries for the treatment of pain and the morphine-like analgesics can be achieved due to various causes is still very difficult. At this point, after obtaining these drugs from the government until the pharmacist is responsible for everyone. Human rights and ethical principles that can be treated when viewed in the light of a serious crime is not limited to pain relief enough. Some of insensitivity on this issue when the system is insensitive clinicians are dragging. The problem is systemic and widespread legal size already out anyone who can not examine the moral dimensions of this problem (Cansız, 2002).

### **METHOD**

In this research in cancer treatment used heroin, morphine ethical assessment of the use of such agents will be carried on. In the research literature will be scanned and analyzed. The method used will be used as a qualitative method. Research investigating various literature, obtained via literature will be discussed.

## DISCUSSION

Cancer patient's welfare should be provided, the patient must be protected from potential harm. Patients and their families should be provided for all of https://assignbuster.com/medical-heroin-use-in-cancer-treatment-ethical-appraisal/

effective method is the effective treatment of pain and other symptoms. In the treatment of patients with cancer pain, inability to use one's free will, have the ability to be able to use various dilemmas arising out is considered (Ersoy, 2009). Sometimes patients refuse treatment. Patients rejected pain when they are required to investigate the cause of the clinician. We all know the pain which is caused by cancer drugs, radiotherapy and surgery as a treatment for these patients is generally insufficient and emergency assistance is needed analgesic (Ersoy, 2009). Despite the side effects of the recent target for cancer patient should be pain relief. Cancer patient's welfare should be provided, the patient must be protected from potential harm. Patients and their families should be provided for all of the support, the pain should be minimized. For this purpose, the most effective method is the effective treatment of pain and other symptoms.

### **CONCLUSION**

Cancer is one of today's most important health problems. Frequent and killing is high, is a public health problem. The development of diagnostic possibilities and opportunities to benefit from health care organizations with the increase of cancer cases are diagnosed each year more. Patients undergoing cancer treatment is undergoing a painful process. Untreated pain; the patient's physiological functions, mental functions such as thinking and communication, reduce quality of life by adversely affecting their social relations and psychological disorders can cause. Cancer related pain can be seen as a result of suicide attempts. So removal of pain during cancer treatment is very important. If the patient's pain during cancer treatment https://assignbuster.com/medical-heroin-use-in-cancer-treatment-ethical-appraisal/

doctors in terms of blocking requires ethical responsibility. Heroin is used for the prevention of pain, such as morphine can be thought as an ethical matter. An arduous process in which cancer pain and in the treatment of a legal requirement that patients' rights, Approval, Information and ethically when we think of patients with this stage to accept the result of the treatment and pain relief methods, in terms of the methods used is ethical considered.

### REFERENCES

Ağrı ve etik ahlakı, AÄŸrı ve analjezikler

Arslan, D., Tatlı, A. M., & Üyetürk, Ü. (2013) Kansere BaÄŸlı AÄŸrı ve Tedavisi.

Cansız, K. H., İnangil, G., Kuyumcu, M., Yedekçi, A. E., Åžen, H., Özkan, S., & DaÄŸlı, G. (2012). Respiratory Depression Caused by Heroin Use. *TAF*Preventive Medicine Bulletin, 11 (2), 248-250.

Çelik M. (2009) Kanser aÄŸrısını giderici yöntemler

Ersoy N. (2009). Etiğe uygun kanser bakım sistemi. *Hacettepe T>p*Dergisi; 40: 102-107

Eti, Z. (2005) Kanserde ağrı tedavisi.

Evren C.(1997) BAĞIMLILIK İÇİN ARAÅŽTIRMA TEMELLİ Ä°LAÇ TEDAVİLERİNİN TANZİMİ KAYACAN, N., KARSLI, B., & Anesteziyoloji, A. Ü. T. F. Kanserde AÄŸrı Tedavisi.

Kebudi, R. (2006). Terminal dönemde kanserli çocuk ve ailesine yaklaşım. *Türk Onkoloji Dergisi*, *21* (1), 37-41.

nonfarmakolojik yöntemler.  $F\ddot{A}\pm rat$  Sa $\ddot{A}\ddot{Y}\ddot{A}\pm k$  Hizmetleri Dergisi , 2 (4), 124-133.

Keskinbora, K., & Keskinbora, K. Ağrı ve Tıbbi Etik. *Clinic Medicine*, 1306-2123.

Ripamonti C, Bandieri E.(2009) Pain therapy. Crit Rev Oncol Hematol 70(2): 145-59..

Tellioğlu, T., & Tellioğlu, Z. (2012). Tıbbi esrar psikiyatrik bozuklukların tedavisinde kullanılabilir mi?. *Klinik Psikofarmakoloji Bulteni*, *22* (1).

Uçan, Ö., & Ovayolu, N. (2007). Kanser aÄŸrısının kontrolünde kullanılan yöntemler

Uzunoğlu S. (2011). Kanser Hastalarında AÄŸrıya Yaklaşım, 24: 14-20