Critical thinking on ethical considerations in genetics and genomics

Science, Genetics



Abstract

Working as a medical practitioner requires a keen observation of ethical controversies regarding patient confidentiality as defined in the medical code of conduct and ethics. However, there are some instances when medical practitioners are faced with a dilemma of disclosing patient's confidence data as stated in the HIPAA incidental disclosures regulation. Some instances are where there is a third party who may be affected by the consequential withholding of the patient's private medical history especially in case of hereditary and deadly transmitted diseases.

The ethical dilemma in this case involves a patient, Mrs. Joan Smith with ovarian/breast cancer that is genetically defined and the disease is likely to affect the patient's sister but she did not wish her medical issues to be discussed to any family member. This brings out an ethical contradiction since the sister is also a patient in the same hospital and by informing her, there is likelihood that she can be prevented from contracting the disease since she has a probability of one to two in inheriting the disease.

As a nurse, it is both illegal and unethical to disclose the private information of a patient as per the nurses' code of conduct which insists on patient's confidentiality, non-partisan treatment and fairness. This is because, patients' privacy at the hospital is required as they need to have complete trust in the nurse so as to open up to him/her knowing that all her health issues are privately kept in a safe and secure place.

However in the case of Mrs. Joan Smith, withholding this medical information to the patient's sister will be putting the latter in danger as the nurses and the patient already knows they share genetic characteristic with the sister. In be disclosed to her sister because they are not in good terms. The sister shares similar genetic make-up as the patient and hence, she is likely to suffer from the same genetic disease.

According to the HIPAA regulations on incidental disclosure, a medical practitioner has to always maintain the code of conduct unless they are faced with a dilemma of disclosing private data of the patient to the family in certain circumstances. This is applicable when a member of the family is directly likely to be affected, if the patient has refused to willingly inform the family and if the family members are accessible by the medical practitioner. In this case, the nurse had a responsibility of informing the sister or the patient's family even though it is legally unethical to disclose the information without Mrs. Smith's consent.

First, the patient's sister is already exposed to a risk of having the genetic cancer and even though she is a patient in the hospital, she cannot be screened without first getting an explanation as to why the cancer check-up is necessary (Burke, 2006). The only explanation she can get is by being informed of her sister's situation.

Secondly, Mrs. Smith's personal problems with the sister have prevented her from disclosing the information to her on her own consent. HIPAA recommends that the patient inform the third party especially if they are directly likely to suffer from the situation. However she should be encouraged to do this on her own by educating her on the risks that her sister is exposed into and the importance of informing the family as early as possible (Offit, 1998). If she refuse to willingly tell the sister that she has cancer which is genetically defined, then the nurse has to practice a ' duty to warn' and inform the sister on the risk she is exposed into so that she can take early precautions (Harris, 2005). This is even easier since the sister is assessable to the nurse and the technology can help the exposed party prevent or cure the disease as early as possible.

Finally, the nurse should weigh the potential harm that is likely to occur if the information is disclosed. In this case, disclosing the information will affect the trust that Mrs. Smith has on the nurse and also cause emotional harm to the patient. On the other hand, withholding the information exposes the patient's sister to the risk of developing a critical ovarian cancer which can be prevented or treated successfully if it is in early stages.

Conclusion

Despite the legal issues surrounding medical practitioners in the United States encouraging them to observe ethical issues on patient's confidentiality, the nurse in this case has a right to violate these ethical requirements and share the information with the sister. This will enable the sister undergo medical screening for any chance of the infections and as such she can take early medical precautions.

References

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