

Coronavirus and Medical Ethics

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Abstract

Medical ethics has been followed in most of the nations from decades. But during COVID 19 pandemic situation, again every nation has to deal with the ethics related to categorize patients and health care distribution while maintaining community health. To solve the dilemma of consequentialist and non-consequentialist theories, major focus was driven on community health. But while looking at the rate of infected, cured and death, it's the alarming sign to India to strengthen the medical resources and follow the common good approach. Every Indian citizen's has the right to get proper treatment and funeral after death. Considering the problem associated with the spreading the virus through dead bodies, cremation was done by medical staff. Due to limited availability of medical staff and lack of electric furnace, many dead bodies were cremated after long time. Due to inadequate medical professionals and technical constraints, number of infectivity rate is increasing which is affecting economy, mental strength and social values. Hence, now we have to start thinking and working on strengthening of hospital, diagnostic labs and sophisticated cremation centers to avoid negligence and to follow ethics.

Keywords: Consequentialist; Triage Ethics; Corona; Medical Ethics; Covid-19

Introduction

COVID-19 outbreak due to the infection of the novel coronavirus, SARS-CoV-2 has attacked countless individuals in more than 173 countries and territories worldwide [1].

COVID-19 pandemic again raise the questions about the ethics related to medical profession. Concerns are associated with antibiotic stewardship, false lab report, ventilator availability, awareness program and cremation of

bodies. Prognostic theories suggested by French surgeon Dominique Jean Lorry, are suitable during this pandemic situation. These theories are

1. Death after treatment
2. Possibility of survival without treatment
3. Requisite of treatment for the survival.

Medical sorting protocols have been based on above categorical theories. Triage ethics deals with the prioritizing prospective

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patients by setting some rules. Triage decisions are dependent upon the availability of insufficient resources like staff, medicine and, space [2]. In COVID-19 pandemic situation, major limiting resources were bed, ventilators, PPE kit, testing kits and medicines in India where population is more. Medical ethics which include utilitarian approach of consequentialist theory, which suggests that “best life is one which produces least pain and distress”. Nonconsequentialist theory includes deontological ethics where moral rules are considered [3]. During handling the COVID-19 pandemic, every nation gave importance to health of the group rather than individualistic approach. During this pandemic situation, medical ethics were not properly handled in India to avoid outbreak and to control the infectivity rate. Efforts implemented by government and medical professionals, were found to get failed to implement the deontological ethics. Inadequacy of testing, treatment, precautionary measures and most important people awareness, leads to 5.31million infected people and 85,619 death cases on today’s date. Maharashtra state is on the first rank in the corona cases.

Most of the hospitals were treating patient with same protocol like giving herbal decoction, protein diet, treatment of Remdesivir for patients on oxygen support, antiviral and antiprotozoal treatment. During treatment, adequacy of dosage i.e. antibiotic stewardship program was not followed. To meet the demand the drugs, sanitizers, face shield and personal protective equipment kit, quality was compromised by most of the suppliers. Some entrepreneurs find this covid19 situation as the opportunity to set business

by linking their products with immunity without any scientific proofs.

This situation again dealing with the gap between availability of medical resources and population. For every nation, to handle any pandemic conditions, triage ethics and equity ethics are important [2]. Equitable distribution of health care delivery has to be implemented to handle such crisis and to maintain community health.

Issues related to handling dead bodies and its respectful funeral

Ethical treatment is not only related to individual who is alive but after death of the patient, cremation has to be carried out as per the ritual within short time. During cremation process, regional and ecological issues are primarily concerned. Corpses will be the possible sources of viruses, hence instead of burying; cremation in electric furnace was the preferred choice among people. In some religion, burial process has been followed to respect the dead soul and as memory repository.

Guidelines	Agency	Reference
1. Give highest priority to staff handling dead bodies, by implementing forensic best practices.	WHO	[4,5]
2. Maintain the dignity of the dignity of deceased and their relatives.		
3. Proper documentation has to be created and maintained.		

4. Safety precautions has to be implemented during postmortem of suspicious death.		
Precautions for body handlers: 1. Wear (Filtering face piece) FFP3 masks or N95 respirators. 2. Disinfect hands, equipment. 3. Avoid contact with eyes and face. 4. Shoe protection is needed.	International Committee of the Red Cross (ICRC)	[6]
Rules for Importation of Human Remains into the United States for Burial, Entombment, or Cremation	CDC	[7]

Table 1: Describes the fundamental principles for the ethical management of dead bodies.

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Discussion

Issues in forensic testing

In previous days, forensic investigation was done on crime scene with some precautions as there was no threat of transmission of virus from biological samples.

Centers for Disease Control and Prevention (CDC) suggested rules during this pandemic situation for handling body fluids like respiratory droplets, blood etc.[8]. Every crime scene has been recommended to consider it as a 'Hot zone' [9].

Conclusion

Currently India is facing lots of ethical issues while handling this COVID-19 pandemic situation. From the beginning, medical ethics were not properly implemented by all the stakeholders. Control over this condition can be achieved by following triage and equity of care. Every nation has to implement the knowledge about medical ethics to all the citizens to handle community health.