

**33rd EUROPEAN CONFERENCE
ON PHILOSOPHY OF MEDICINE AND HEALTH CARE
7 – 10 August 2019**

PHILOSOPHY AND ETHICS AT THE EDGE OF MEDICINE

PROGRAMME

Wednesday 7 August	
16.00-18.00	VENUE: UNIVERSITY OF OSLO GEORG SVERDRUPS HUS – UNIVERSITY LIBRARY MOLTKE MOES VEI 39
	REGISTRATION
18.00-18.15	OPENING CEREMONY SPEAKERS: PROF. REIDAR PEDERSEN, HEAD OF CENTRE FOR MEDICAL ETHICS, INSTITUTE OF HEALTH AND SOCIETY, FACULTY OF MEDICINE, UNIVERSITY OF OSLO PROF. JAN HELGE SOLBAKK, HEAD OF RESEARCH, CENTRE FOR MEDICAL ETHICS, INSTITUTE OF HEALTH AND SOCIETY FACULTY OF MEDICINE, UNIVERSITY OF OSLO ROOM: A
18.15-19.45	Plenary panel 1: SPEAKER PROF. LISA TESSMAN: “Moral distress at the edge of culpability” PREPARED COMMENTARY: ASSOCIATE PROFESSOR MORTEN MAGELSSSEN <i>Chair: Dr. Anne Kari Tolo Heggestad</i> ROOM: A
19:45	WELCOME RECEPTION GEORG SVERDRUPS HUS – UNIVERSITY LIBRARY

Thursday 8 August (morning)										
VENUE: UNIVERSITY OF OSLO GEORG SVERDRUPS HUS – UNIVERSITY LIBRARY MOLTKE MOES VEI 39										
08.30-10.00	Plenary panel 2: SPEAKER: PROF. MARK KUCZEWSKI: "Migration, Medicine, and Bioethics: Lessons from the U.S" PREPARED COMMENTARY: PROF. SØREN HOLM Chair: Dr. , Rosemarie Bernabe ROOM: A									
10.00-10.30	BREAK									
	Session 1.1 Robotics, machine learning, & big data ROOM: B Chair: Renzo Pegoraro	Session 1.2 Crisis & trauma ROOM: C Chair: John Lizza	Session 1.3 Concepts of health & disease Room: D Chair: Darryl Gunson	Session 1.4 Clinical ethics & medical decision making ROOM: E Chair: Bettina Schmietow	Session 1.5 Decisions at the end of life ROOM: F Chair: Jos Welie	Session 1.6 Mental health ROOM: G Chair: Tim Mosteller	Session 1.7 Reflections on medicine & bioethics ROOM: H Chair: Soren Holm	Session 1.8 Professionalism ROOM: I Chair: Eugenijus Gefenas		
10.30-10.55	Considering AI/Machine Learning and Intellectual Resource Allocation Robeson, Richard	The Concept of Moral Injury: A Critique Lang, Johanne; Schott, Robin May	The need to clarify the concept of health among hospital leadership Byrnes, Jeffrey	The Role and Goal of Clinical Ethics Support Services: Patients and Charts? Eijkholt, Marleen; Olsman,E	Incorporation of the principle of the child's best interest in end-of-life-decisions for infants Klungland, Bahus Marianne	Ethical trade-offs in Digital Phenotyping for Mental Health Lyreskog, David M	Medicine at the Edge of Bioethics King, Nancy M. P	Ethical Climate for Healthcare Professionals: A Systematic Review Hamada,Namiko		
11.00-11.25	Digital Anthropology - Robotics and Artificial Intelligence in Medical Practice Sahn, Stephan	The ethics of touch in a therapeutic relationship in physiotherapy Przyluska-Fiszler, Alicja; Długolecka, Alicja; Rekowski, Witold	Narrative Norms in Sickness: The physician as an exegete. Del Fabbro, Olivier; Muller, Xavier	Reproductive Medicine in the United States, Women's Rights, and the Ragged Edge of Legal Personhood for the Unborn Nelson, Lawrence	Between the Individual and the Family: The Family's Role in Decision making at the End of Life Yakov, Gila; Samson, Tali	Sensing mental health. The use(s) of sensor technologies in mental health care Slokvik Lian, Hans Gunnar	The roles of solidarity in Philosophy of Health Care Puyol, Angel	The moral challenges of mandatory vaccination; the case of Health Care Professionals (HCPs) Damanaki, Maria; Gorantonaki, Anthoula		Session 1.9
11.30-11.55	Pillo Health Digital Home Companion, Lowering Costs While Improving Outcomes Osuji, Peter Ikechukwu	Medical tourism – Palestinian / Israeli infertility treatments Samara, Nivin; Barilan, Y M	The circle of hope and ethical challenges in clinical trials Godskesen, Tove E; Erikson, StefaEdln	Decision-Making Ability as Borderline: A Pedagogical Reconceptualization of a Legal and Medical Construct Gibson, David	Should patients with cognitive impairment be involved in advance care planning? Saevareid, Trygve Johannes Lereim	Ethical challenges in outpatient commitment Lovsletten, Maria	Evidence-based medicine – a critical history Louhiala, Pekka	Borderline medicine and incongruent ethics: The case of UK occupational medicine Tamin, Jacques		Special seminar (see below)
12.00-12.25	Retaining Moral Responsibility in the Face of Medical Technology Tigard, Daniel W	The excess of empathy or why we can't resolve moral dilemmas with good intentions only. Devisch, Ignaas	Choice, Health and Reason of State Anastasya Manuilova	Best interests at the edge of medicine: The case of child protection interventions Krutzinna, Jenny	Follow up on rejected euthanasia requests Van de Vathorst, Suzanne; van den Ende, Caroline	The dark side of care - Inadequate care, abuse and neglect in Norwegian mental health care Husum, Tonje L; Nortvedt, P; Pedersen, R; Aasland, O	Physicians and retirement: why are retired persons often relegated to an "outlier" status in society? Shandera, Wayne X			
12.30-12.55	Promoting structural justice through mobile health technologies? Sauerborn, Ela; Eisenhut, Katharina; Wild, Verina	Whose Vulnerability? Rethinking the Violence Against Physicians Hwang, Im Kyung; Lee, Soyoung; Noh, Dae Won	Is suicide tourism a moral phenomenon? Sperling, Daniel	Ethical Counseling - the Next Step Golan, Orit; Yakov, Gila	The end at the beginning: consideration of end of life decision making in ventilator independent neonates with ultrashort gut syndrome'. Peterson, Jennifer	Barriers to family involvement in mental health care during severe mental illness. Hansson, Kristiane M				
13.00-14.00	LUNCH GEORG SVERDRUPS HUS – UNIVERSITY LIBRARY									

Thursday
8 August
(morning)

VENUE:
UNIVERSITY OF OSLO
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Session 1.9
ROOM: A

**Special seminar:
New-old ethical perspectives on the development of prenatal testing practices**

Chair: Christoph Rehmann-Sutter

Topic: Mainly triggered by non-invasive testing (NIPT) for Trisomies 21, 13 and 18, and also by the prospect of more comprehensive easy prenatal genetic testing, the discussions on ethical issues around prenatal tests and diagnostic practices in different societies have again become very lively in the last few years. New regimes of screening and selection are emerging, formally based on the principle of reproductive autonomy.

Where are societies steering to? How is the inclusion of differently abled people in society connected with the moral issues of prenatal testing and selective abortion? What are the pressing societal issues of justice and injustice in relation to prenatal diagnosis? Which are the relevant ethical questions to ask?

This international Special Seminar is linked to an ongoing interdisciplinary comparative study between Germany and Israel. Its aim is to look at NIPT as a potentially disruptive technology in the context of prenatal diagnosis practices. The two countries Israel and Germany are known to take much different approaches to human genetics in general, and prenatal testing in particular. This will both highlight and re-align important categories and issues in reproductive genetics along several lines including:

- Moving health professionals and prospective users from the era of tentative pregnancy and moral pioneering to “non-deterministic counseling” and moral/translational gambling;
- Highlighting the considerable heterogeneity of views of parents of Down Syndrome children pro and con NIPT;
- Globally reducing as well as re-affirming cultural differences.

This opens an international space for empirically informed bioethical discussions also about other countries' prenatal diagnostic and prenatal selection practices. And it is a basis for raising the very fundamental philosophical questions that are implied in them. The special seminar consists of five 15 minutes input talks and an open roundtable where the audience can participate.

Contributions:

- Tamar Nov Klaiman (Ben Gurion University Be'er Sheva, Israel):
“Attitudes of Israeli Parents of Children with Down Syndrome towards Non-Invasive Prenatal Testing and the Scope of Prenatal Screening”
- Stefan Reinsch & Christoph Rehmann-Sutter (University of Lübeck, Germany):
“Women’s views on the normative dimension of health insurance coverage for NIPT”
- Vardit Ravitsky (Université de Montréal, Canada):
“Non-Invasive Prenatal Whole Genome Sequencing: ethical and regulatory implications for post-birth access to information”
- Aviad Raz (Ben Gurion University Be'er Sheva, Israel) & Yael Hashiloni-Dolev (Academic College of Tel-Aviv Yaffo):
“Pandora’s Pregnancy”. NIPT (as well as chromosomal microarray analysis and whole genome sequencing) – A new era for prenatal genetic testing”
- Hannes Foth & Christina Schües (University of Lübeck, Germany):
“Prenatal genetic diagnosis and the conditions of childhood”

10.30-12.55

Thursday 8 August (afternoon)								VENUE: UNIVERSITY OF OSLO GEORG SVERDRUPS HUS – UNIVERSITY LIBRARY MOLTKE MOES VEI 39							
14.00-15.30		Plenary panel 3: SPEAKER: PROF. REIDUN FØRDE: “Clinical ethics - At the edge of medicine and philosophy” PREPARED COMMENTARY: DR. SUZANNE VAN DE VATHORST <i>Chair:</i> Prof. Cynda Rushton ROOM: A													
15.30-16.00		BREAK													
		Session 2.1 Research ethics I ROOM: B <i>Chair: Stuart Rennie</i>		Session 2.2 Health insurance & DTC testing ROOM: C <i>Chair: Vardit Ravitsky</i>		Session 2.3 Involvement of patients, relatives, & other parties ROOM: D <i>Chair: Shlomit Zuckerman</i>		Session 2.4 Mental health II ROOM: E <i>Chair: Amy VanDyke</i>		Session 2.5 Sensor & monitoring technology ROOM: F <i>Chair: Kurt Schmidt</i>		Session 2.6 Precision & prediction ROOM: G <i>Chair: Nancy King</i>			
16.00-16.25		Incidental Findings in Pragmatic Clinical Trials: Ethics at the Margins of Practice Sugarman, Jeremy et al.		Behaviour-based insurance models: a just allocation of resources? Kuhn, Eva; Buyx, Alena		Epistemic injustice in clinical ethics consultation Holm, Søren		On the edge of medicine: virtual companions and the curious case of sexual lethargy Firth, Steven James		Medicine 4.0 – Development of a criteria matrix for the ethical assessment of health-related apps Schmietow, Bettina; Lindinger, Georg		The precision paradox in personalized medicine: How can uncertainty be reduced when statistics do not apply? Vogt, Henrik; Hofmann, Bjørn; Solbakk, Jan Helge			
16.30-16.55		. Harm, Responsibility, and Justice: How Well-Intended Political Considerations Overshadowed the Ethical Case against Animal Suffering Häyry, Matti		Money for monitoring: the ethical challenges posed by data-sharing with health insurance apps Martani, Andrea; Shaw, David; Elger, Bernice Simone		Patient involvement when facing severe mental illness and coercion - A qualitative study Pedersen, Reidar		Two perspectives on dual relationships Unhjem, Jeanette Varpen		Wearable and transparency strategies Lorella Meola		Organoid biobanking for precision medicine: stakeholder perspectives Lensink, Michael A; Boers, Sarah N; Jongsma, Karin R; Bredenoord, Annelien L		Session 2.7 Special seminar (see below)	
17.00-17.25		The Wives of the Tuskegee Study: An Untold History Otero-Bell, RayLee		Regulations on Direct-to-Consumer Genetic Testing in Taiwan and China: Current Status and Problems Liu, Hung-En		Participation in Clinical Decision-making Processes: Could a Human Rights-based Approach be helpful? Hack, Caroline; Herrler, Christoph		Unraveling the interplay of mental illness and treatment decision making: Implications for clinical ethics Rushton, Cynda Hylton; Zwemer, Weare A		mHealth, self-management and empowerment: digital health technologies from a public health perspective Hendl, Tereza		Traditional Chinese Medicine and the new “Personalized Medicine” / P4 Barilan, Y Michael		Room:A	
17.30-17.55		The primacy of human being and the findings of non-beneficial research Rozynska, Joanna		DTC Genetic Testing vs Incidental Findings: Pros and Cons Gefenas, Eugenijus; Lekstutiene, J		Digital health: Implications for the doctor-patient relationship Amann, Julia; Vayena, Effy; Blasimme, Alessandro		Is self-expression through typing (SETT) a valid method of meaningful communication for minimally verbal (MNV) autistics? Simonstein, Frida; Mashiach-Eizenberg, Michal; Cohen, Yael							

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Session 2.7
ROOM: A

**Special seminar:
Communitarian bioethics**

Chairs: Mark Kuczewski & Morten Magelssen

16.00-17.55

Topic: Arguably, the communitarian tradition in ethics provides rich resources for bioethics which have for the most part been yet to be harnessed. This session will draw on communitarian thinkers such as MacIntyre, Walzer and Taylor in order to highlight areas where communitarian perspectives can enrich and expand the bioethical discourse. Such efforts will identify new pertinent topics, as well as pose critical questions to mainstream liberal bioethics. For many physicians, altruistic motivations for entering the profession have eroded, in part because health care as a social structure fails to create space for the type of moral community necessary to reflect on the meaning one might find in the practice of medicine. If medicine is a «practice» in the communitarian sense, what should follow – for professional identity formation in education, and for an account of the virtuous physician and a flourishing profession? Relatedly, a communitarian understanding of the ethos of clinical ethics can help us to identify and address social injustices such as the poor treatment of particular populations such as immigrant patients. Other examples that lend themselves well to illustrating central features of a communitarian approach are priority setting and rationing of care, and the balancing of autonomy and safety in home-based care. Finally, a critical communitarian analysis of modernity and moral philosophy, such as the one found in MacIntyre's works, can inspire a method of «deconstructive» analysis of normative work in bioethics. Central to this method would be the uncovering of implicit premises and presupposed accounts of practical rationality and the moral life, then showing how such presuppositions are problematic. The contention of the session is that communitarian perspectives can sometimes be much-needed correctives to bioethics performed within hegemonic liberal paradigms. This special session consists of three talks (20 mins each) followed by open discussion where the audience can participate.

Contributions:

- Morten Magelssen (University of Oslo, Norway):
“MacIntyrean bioethics: Four applications in bioethics of Alasdair MacIntyre’s critical and constructive ethics”
- Mark Kuczewski (Loyola University Chicago, USA):
“The practice of clinical ethics: Can it address social issues?”
- Michael McCarthy (Loyola University Chicago, USA):
“Constructing Communities that Foster Physician Formation and Professional Identity”

<p style="text-align: center;">Friday 9 August (morning)</p> <p style="text-align: center;">VENUE: UNIVERSITY OF OSLO GEORG SVERDRUPS HUS – UNIVERSITY LIBRARY MOLTKE MOES VEI 39</p>									
08.30-10.00	<p style="text-align: center;">Plenary panel 4: SPEAKER: PROF. SIGRID STERCKX: “Medical end-of-life practices in Belgium - The good, the bad, and the ugly” PREPARED COMMENTARY: PROF. RENZO PEGORARO Chair: Prof. Reidar Pedersen ROOM: A</p>								
10.00-10.30	BREAK								
	<p>Session 3.1 Research ethics II ROOM: B Chair: Peter Kakuk</p>	<p>Session 3.2 Gene editing, gene drives ROOM: C Chair: William Stempsey</p>	<p>Session 3.3 Female genital mutilation & male circumcision ROOM: D Chair: Suzanne v. d. Vathorst</p>	<p>Session 3.4 Oncology ROOM: E Chair: Riaan Rheeder</p>	<p>Session 3.5 Geroethics & dementia ROOM: F Chair: Ignaas Devish</p>	<p>Session 3.6 Donation & transplantation ROOM: G Chair: Erik Malmqvist</p>	<p>Session 3.7 Identity-related conditions ROOM: H Chair: Frida Simonstein</p>		
10.30-10.55	<p>Checklist for applying to RECs: ethical and legal issues post GDPR Tzortzatau, Olga</p>	<p>Germline gene therapy of sickle-cell disease and β-thalassemia needs to change the gene therapy paradigm Sýkora, Peter; Chima, Sylvester C</p>	<p>The Ethics of Clitoris Transplantations: A Constructive Response to Female Genital Cutting Campo-Engelstein, Lisa</p>	<p>Cancer screening and the ethics of solidarity Reid, Lynette</p>	<p>Are we asking the right questions? Ethical issues of digitalization and new medical technology in care of the elderly Inthorn, Julia</p>	<p>Anonymous donation in the ethics of transplant medicine Łuków, Paweł</p>	<p>Body Modifications for Gender Expression and Why the Blurry Boundary between Health and Wellbeing May not Always Matter Murphy, Timothy F</p>		
11.00-11.25	<p>Availability of post-trial access in clinical trials Jimenez, Edlyn B; Virtudazo, Jessa Mae P; Torres, Cristina E; Bernabe, Rosemarie</p>	<p>An analysis of the ethics of human genome editing, grounded in African moral thought Behrens, Kevin</p>	<p>A case-based examination of obligations to reinstate female circumcision following childbirth in the United States VanDyke, Amy</p>	<p>Precision medicine and the fragmentation of solidarity Fleck, Leonard</p>	<p>Deciding on the use of biomarkers to estimate one’s risk to develop Alzheimer’s dementia: Applying the method of reflective equilibrium Smedinga, Marthe; Richard, Edo; Schermer, Maartje</p>	<p>What it means to respect a child’s agency in a no-choice situation. The case of bone marrow transplantation between siblings Rehmann-Sutter, Christoph</p>	<p>The (Un)Desirability of Difference: Theories of Health & Body Integrity Identity Disorder Gibson, Richard</p>	<p>Session 3.8</p> <p>Special seminar (see below)</p> <p>ROOM: A</p>	
11.30-11.55	<p>The Use of Homeless Populations in Phase 1 Clinical Trial: Is It Ethical? Kimberé-Zayas, Lisette</p>	<p>Protecting the Best Interests of the Future Child in the Regulation of Gene Editing Technologies Mulligan, Andrea</p>	<p>Two ways of belonging? Ritual circumcision of boys in liberal European democracies Solberg, Berge</p>	<p>Moving beyond the friend-foe myth. The use of social media in adolescent and young adult oncology De Clercq, Eva; Rost, Michael; Elger, Bernice</p>	<p>Ethico-Political Aspects of Conceptualizing Screening: The Case of Dementia Gunnarson, Martin; Kapeller, Alexandra; Zeiler, Kristin</p>	<p>Sharing body material. The case of bone marrow transplantation between siblings Schües, Christina</p>	<p>Self-harm and autonomy. Some theoretical reflections on the diagnosis of borderline personality disorder Gelhaus, Petra</p>		
12.00-12.25	<p>Views and experiences of transcranial direct stimulation (tDCS) in children– findings from an interview study Sierawska, Anna</p>	<p>Nothing if not family? On the meaning of genetic connections Cutas, Daniela</p>	<p>Ethics of pursuing targets in public health: the case of voluntary medical male circumcision programs in Western Kenya Rennie, Stuart et al.</p>	<p>Men’s repair work, care, and masculinity in the aftermath of prostate cancer treatment Brüggemann, Jelmer</p>					
12.30-12.55	<p>Lived experience of Hereditary Chronic Pancreatitis: between biographical contingency and biographical disruption Müller, Regina et al.</p>	<p>CRISPR, CCR5 and the Chinese Twins: does scientific progress sometimes require unethical practice? Gunson, Darryl</p>	<p>Revisiting traditional male initiation in South Africa. A global bioethical perspective Rheeder, Riaan AL</p>	<p>Reframing cancer Stenmarck, Mille Sofie; Engen, Caroline; Strand, Roger</p>					
13.00-14.00	<p>LUNCH GEORG SVERDRUPS HUS – UNIVERSITY LIBRARY</p>								

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Session 3.8
ROOM:A

**Special seminar:
A Kodak moment? The effects of consumer genetics on medicine & society**

Organizers: Nordic Committee on Bioethics and the Norwegian Biotechnology Advisory Board
Chairs: Madeleine Hayenhjelm & Truls Petersen

Topic: In 2017, a direct-to-consumer (DTC) genetic test was one of the top 5 best-selling products on Amazon.com during the Black Friday weekend. Genetic tests to learn about ancestry have become particularly popular. While sales are peaking, some unexpected effects of DTC genetic testing are beginning to surface. The biobanks of DTC companies have been accessed by the police on several occasions to solve cold cases. Anonymous sperm and egg donors have been found and contacted by their biological offspring. Children have discovered that their father is not their biological father.

DTC genetic tests also provide information about health. In the US, DTC genetic tests for Alzheimer's disease, heritable cancers and pharmacogenetics have been available since 2017 despite their controversial analytic and clinical validity. Broad use of such tests may affect the way we, as a society, think about health, disease, and responsibility for health. It may also create new demands on health care systems, clinicians, and patients. The regulations governing DTC genetic tests remain incomplete. In the US, DTC genetic tests were first introduced in the US market in 1996 partly due to a loophole in the legislation. In the EU, the IVD (In Vitro Diagnostics) directive regulates medical tests. However, in most European countries, genetic tests sold online fall outside of the scope of the legislation. In the Nordic countries, the debate on regulation is scarce and leaves many legal, ethical, medical, and philosophical questions unresolved.

This seminar will focus on main ethical questions raised by the use of DTC genetic tests:

- How does the use of DTC genetic tests affect our understanding of health and disease?
- What will the impact of DTC genetic tests be on the boundaries between established medical norms and values such as curiosity and the right to know?
- Are DTC tests a useful supplement to health care systems or an additional strain on already scarce resources?
- How will DTC genetic tests affect relationships between the state, individuals, and the public and the private sector?
- Is it possible and desirable to regulate or ban DTC genetic tests?

The organizers, the *Nordic Committee on Bioethics and the Norwegian Biotechnology Advisory Board*, collaborate with a well-established network of scholars, practitioners, patient organizations, and politicians.

Contributions:

- Emilia Niemiec (Centre for Research Ethics & Bioethics, Uppsala University, Sweden):
"New offers of direct-to-consumer genetic testing and new ethical problems"
- Henry Alexander Henrysson (University of Iceland. National Bioethics Committee):
"DTC GT in a Small and Homogenous Population: The Future of Health Care or a Pandora Box of Insurmountable Societal Challenges?"
- Santa Slokenberga (Centre for Research Ethics & Bioethics, Uppsala University, Sweden):
"Ascertaining child's 'best interests' through direct-to-consumer genetic testing: what could possibly be wrong with that?"
- Anne-Marie Axø Gerdes (The Danish Council of Ethics):
"The Danish Council on Ethics recommendations about Genome Testing with focus on Direct to consumer genetic testing"

10.30-12.55

Friday 9 August (afternoon)							
VENUE: UNIVERSITY OF OSLO GEORG SVERDRUPS HUS – UNIVERSITY LIBRARY MOLTKE MOES VEI 39							
	Session 4.1 Enhancement I ROOM: B <i>Chair: Richard Robeson</i>	Session 4.2 Trust ROOM: C <i>Chair: Rolf Ahlzén</i>	Session 4.3 Euthanasia & suicide ROOM: D <i>Chair: Gerrit Kimsma</i>	Session 4.4 Artificial intelligence ROOM: E <i>Chair: Henrik Vogt</i>	Session 4.5 The limits of autonomy ROOM: F <i>Chair: Marleen Eijkholt</i>	Session 4.6 Priority setting & responsibility ROOM: G <i>Chair: Steve Firth</i>	
14.00-14.25	Maybe she's born with it, maybe it's epigenetics: Cosmetic enhancement and fight against lookism Räsänen, Joonas	The Fragility of Patient-Trust Spear, Andrew	The borderline between suicide and medical aid-in-dying Margaret Battin	AI – Giving medicine an edge and pushing privacy to its edge Bentzen, Heidi Beate	What does autonomy mean in a clinical setting? Sahm, Antonia	Priority setting in primary health care – a qualitative study on allocation of nursing home placements Heggestad, Anne Kari Tolo; Førde, Reidun	Session 4.7 Special seminar (see below) ROOM: A
14.30-14.55	Are we designing now or what? Segers, Seppe	Personalized (PM) medicine, expertise and trust Myskja, Bjørn K; Steinsbekk, Kristin S	There is no morally relevant distinction between active and passive euthanasia Guerrero, Jose	Human intelligence and artificial intelligence: which cooperation and ethical implications? Pegoraro, Renzo; Benanti, Paolo	Is a more paternalistic framework needed to respect and enhance participant's autonomy? The challenge of electronic informed consent Lõuk, Kristi	The Possibility of Collective Needs Gustavsson, Erik	
15.00-15.25	The medicalization of appearance Pahle, Andreas Saxlund; Vogt, Henrik	Trust, death, and suspicious circumstances - a 21st century Jekyll & Hyde case? Schmidt, Kurt W	To let Die or not to let Die? Decision making, Medical Practice and Court Rulings in Light of the Dying Patient Act in Israel Zuckerman, Shlomit	Beyond the four Vs. An exploration of researchers' definition of Big Data Favaretto, Maddalena; De Clercq, Eva; Elger, Bernice Simone	Surrogacy as a practice of autonomy – an attempt to formulate a practical concept Korbacz, Katarzyna	Personal responsibility for health is a futile project Ahola-Launonen, Johanna	
15.30-15.55	Metaphysical Realism as a Cure for Chronic Cases of Medical-Ethical Fuzziness Mosteller, Tim	Medicine and human evil Nortvedt, Per					
16.00-16.30	BREAK						
16.30-17.30	ESPMH GENERAL ASSEMBLY ROOM: A						
19.00-23.00	CONFERENCE DINNER "ECKBO" SELSKAPSLOKALER AS, JEGERVEIEN 4, OSLO						

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Session 4.7
ROOM: A

**Special seminar:
Medical indication & medical practice – philosophy of a neglected concept**

Chair: Stephan Sahlm

14.00-15.55

Topic: The notion of medical indication represents a cornerstone of medical practice. It is obvious that any medical indication contains a significant element of evaluation. It is not surprising that this fact is the cause of ethical challenges. In a way the concept entails a hidden agenda: who has the power in medicine? Ideas about appropriate medical acts and interventions may differ: between patients and physicians; between one physician and another. What are the values physicians source from when placing an indication? The concept of medical indication may be seen as an evaluative link between diagnosis and treatment. Where is the place in medical practice to give an account of the evaluative elements included in any indication placed? To place an indication is held to be a prerogative accorded to physicians only. Yet, what are the limits of power physicians are equipped with? Looking into medical practice the hidden tension and conflicts associated with the concept of medical indication come to light. They may be identified easily in many circumstances. E.g. if a decision has to be made to limit medical interventions such as cardio-pulmonary resuscitation. Should physicians follow their clinical judgement, or should they obey patients' wishes all the times even if outcomes will be disastrous? ("Is there such a thing as "fake resuscitation" or "slow code" interventions)? Similar problems arise for instance in the field of neonatal care. What is the indication to start intensive and lifesaving treatments in premature babies? How is the decision to be made if conflicts arise with parents? It would be easy to continue the row of similar conflicts arising in clinical care. It may be held that there is an obligation of the medical profession to disclose "indication policies". Surprisingly the concept has never been elaborated despite being a cornerstone of philosophy of medicine. In this seminar the concept of medical indication will be scrutinized from various perspectives:

Contributions:

- Michal Stanak:
"Ethic of nudging in neonatal care"
- Ana Borovecki:
"Medical indication and the perspective of public health"
- Stephan Sahlm:
"Medical indication and limiting life sustaining treatments"
- William Stempsey (College of the Holy Cross, MA, USA):
"Indication Creep and Covert Values"

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Saturday 10 August (morning)	<p>Plenary panel 5: SPEAKER: PROF. BJØRN HOFMANN: "Balancing on the edges of medicine: What is the role of ethics and philosophy?" PREPARED COMMENTARY: PROF. FREDRIK SVENAEUS <i>Chair: Prof. Bert Gordijn</i> ROOM: A</p>							
10.00-10.30	BREAK							
	<p>Session 5.1 Enhancement II ROOM: B <i>Chair: Ana Borovecki</i></p>	<p>Session 5.2 Mothers & embryos Room: C <i>Chair: Julia Inthorn</i></p>	<p>Session 5.3 Genomics & reproductive medicine ROOM: D <i>Chair: Luciana Caenazzo</i></p>	<p>Session 5.4 Death & the brain ROOM: E <i>Chair: Per Nortvedt</i></p>	<p>Session 5.5 Global bioethics ROOM: F <i>Chair: Peter Osuji</i></p>	<p>Session 5.6 Dilemmas, failure & residue ROOM: G <i>Chair: Petra Gelhaus</i></p>	<p>Session 5.7 Suffering & pain ROOM: H <i>Chair: Christoph Rehmann-Sutter</i></p>	<p>Session 5.8 Special seminar (see below) ROOM: A</p>
10.30-10.55	<p>Cognitive enhancement defined as a function of identity Rogers, Julie; Havyer, Rachel</p>	<p>Maternal-fetal surgery: A challenge to existing notions? Begovic, Dunja</p>	<p>Young women's perspective on social egg freezing, results of a pilot study on Italian university students Caenazzo, Luciana; Tozzo Pamela</p>	<p>Are Organ Donors Really Dead? Brain Death and Personal Identity Meier, Lukas</p>	<p>Providing Content for the Human Right to Health Gunderson, Martin</p>	<p>Bullying, Harassment and Undermining in Medicine Through the Lenses of Moral Failure and Morality of Violence Theories Weber, Alan S</p>	<p>Medicalization of Chronic Pain Stempsey, William</p>	
11.00-11.25	<p>Genetically modified primates in neuroscience Arnason, Gardar</p>	<p>Potentiality, Futures of Value, and Abortion Lizza, John P</p>	<p>Ethical Challenges in Genomic Approaches to Infectious Disease: The Case of Phylogenetic Tuberculosis Sequencing Juengst, Eric</p>	<p>Moral status of the brain-dead patient: Defying the Dead Donor Rule Zonenszain Laiter, Yael</p>	<p>The Devils in the DALY: Evaluating disease burden in the Global Burden of Disease study Solberg, Carl Tollef et al.</p>	<p>When the moral equation does not add up – on the phenomenon of moral residue Solbakk, Jan Helge; Michelsen, Øivind</p>	<p>To Die Well: The Phenomenology of Suffering and End of Life Ethics Svenaeus, Fredrik</p>	
11.30-11.55	<p>For the Sake of Convenience? Implantable Microchips and the Future of Work Lawrence, David</p>	<p>Beyond moral status: the reification of the human embryo Smajdor, Anna</p>	<p>In vitro gametogenesis: The end of egg donation? Carter-Walshaw, Sarah</p>	<p>Defining Premature Death Sørheim, Preben; Gamlund, Espen; Solberg, Carl Tollef</p>	<p>Addressing pollution from antibiotics production through institutional systems in high-income countries: ethical tensions and trade-offs Malmqvist, Erik; Munthe, Christian</p>	<p>Predictive testing and diagnostic testing – a dubious dichotomy? Starke, Georg; Shaw, David; Elger, Bernice</p>	<p>Natality between Philosophy and Medicine Wuensch, Ana Miriam</p>	
12.00-12.25	<p>Capabilities and Genetic Enhancement in Sport Neiders, Ivars</p>	<p>Against exceptionalism in healthcare decisions (when capacity is in doubt), and how to get rid of it. Zawila-Niedzwiecki, Jakub</p>	<p>Posthumous paternity Katzenelson, Edna</p>	<p>The case for psychophysical dualism Ahlzén, Rolf</p>				
12.30-13.00	<p>CLOSING SESSION ROOM: A</p>							

Saturday
10 August
(morning)

VENUE:
UNIVERSITY OF OSLO
GEORG SVERDRUPS HUS – UNIVERSITY LIBRARY
MOLTKE MOES VEI 39

Session 5.8
ROOM: A

**Special seminar:
Professional Health Care Associations Reactions to Legalized Assisted Suicide & Euthanasia**

Chair: Jos Welie

10.30-12.25

Topic: In all jurisdictions where assisted suicide and/or euthanasia (AS/E) were legalized, the responsibility for these practices was assigned to physicians (and in rare cases other medical professionals). This assignment appears to have happened without significant critical reflection inside the professions involved, and with even less discussion among politicians and the public at large. Concurrent with – and more commonly subsequent to – this process, different professional health care associations have changed their own ethics positions in which involvement by their members in AS/E has been rejected, to positions in which such involvement is tolerated, permitted or even embraced. Not only are these changes generally a departure from a long held prohibitive stance, in some instances the change appears at odds with other core moral commitments of these professions. Examples of such paradoxical departures include suicide prevention professionals not opposing the legalization of assisted suicide; opponents of physician assistance in suicide opposing physician assistance with lethal executions; and some palliative care specialists insisting that AS/E is a form of palliative care contrary to earlier held convictions about the goals of palliative care.

The aim of this panel discussion with the audience is to explore the forces that are causing health care associations to abandon their traditional opposition to AS/E and embrace it, even when it appears to undermine other core moral convictions. We propose 4 short 10-15 min. presentations, followed by debate with the audience.

Contributions:

- Leslie Bennett (The Sage Colleges, Troy NY, USA):
“The surprising silence of the American Occupational Therapy Association vis-à-vis the increasing demand for assisted suicide when life has lost meaning”
- Cynthia R. Hall (Florida A&M University College of Pharmacy and Pharmaceutical Sciences, USA):
“What’s the big difference? The medicalization of assisted suicide and euthanasia vs. the medicalization of the death penalty”
- Linda Scheirton (Creighton University, Omaha NE, USA):
“The response of the profession of pharmacy to legalized assisted suicide and euthanasia”
- Jos Welie (Creighton University, Omaha NE, USA):
“The response of the WMA, AMA and other professional medical associations to the medicalization of assisted suicide and euthanasia”