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On the Road to a New International Code of Medical Ethics

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Conflict of Interest Statement

The presenter is the Secretary General of the World Medical Association.

There are no commercial or financial interest of the presenter or the association in the work to be presented.



General Deontology

Declaration of Geneva 1948 / 2017

International Code of Medical Ethics 1948 / 2006

Declaration of Helsinki

Ethical Principles for Medical Research Involving Human Subjects 1964 / 2013

Declaration of Tokyo 1975 / 2016

Guidelines for Physicians Concerning Torture and other Cruel, Inhuman or Degrading Treatment or Punishment in Relation to Detention and Imprisonment 1975 / 2016

Declaration of Lisbon on the Rights of the Patient 1982 / 2015

Declaration of Malta on Hunger Strikers 1991 /

Declaration of Taipei on Ethical Considerations regarding Health Databases and Biobanks 2016

Declaration of Geneva

The physicians' pledge

- Created in 1948 to replace the ancient Hippocratic Oath
- codifies our values:
 - the dedication to protect and
 - to caring for patients,
 - to value life and
 - medical secrecy,
 - to avoid harm where possible and
 - to exercise our profession with conscience.

Criticized to be “old fashioned”

Attempts to replace distracted from our values turning our understanding of being a physician into that of a service provider.

Changes adopted in Chicago



General Assembly

Chicago 11- 14 October 2017

- No longer only a pledge of beginners
- Respect for patient autonomy (shared decision making, but not to diminish conscience)
- To share information in teaching or publication and to give due respect to teachers, colleagues, and students.
- To exercise the profession according to the standards of medicine,
- To care for your own health and well-being which also means to lead by example

The revised Declaration of Geneva

The Physician's Pledge

AS A MEMBER OF THE MEDICAL PROFESSION:

I SOLEMNLY PLEDGE to dedicate my life to the service of humanity;

THE HEALTH AND WELL-BEING OF MY PATIENT will be my first consideration;

I WILL RESPECT the autonomy and dignity of my patient;

I WILL MAINTAIN the utmost respect for human life;

I WILL NOT PERMIT considerations of age, disease or disability, creed, ethnic origin, gender, nationality, political affiliation, race, sexual orientation, social standing or any other factor to intervene between my duty and my patient;

I WILL RESPECT the secrets that are confided in me, even after the patient has died;

I WILL PRACTISE my profession with conscience and dignity and in accordance with good medical practice;

I WILL FOSTER the honour and noble traditions of the medical profession;

I WILL GIVE to my teachers, colleagues, and students the respect and gratitude that is their due;

I WILL SHARE my medical knowledge for the benefit of the patient and the advancement of healthcare;

I WILL ATTEND TO my own health, well-being, and abilities in order to provide care of the highest standard;

I WILL NOT USE my medical knowledge to violate human rights and civil liberties, even under threat;

I MAKE THESE PROMISES solemnly, freely, and upon my honour.

Declaration of Helsinki

Ethical Principles for Medical Research involving Human Subjects

Protection for Research Subjects and Researchers

- Informed Consent
- Approval by Ethics Committees
- Transparency





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Original Investigation | October 16, 2013

Universal Glove and Gown Use and MRSA or VRE

In a cluster randomized trial involving 20 intensive care units, Harris and coauthors compared donning gloves and gowns for all patient contact with usual care to determine whether additional precautions would reduce the number of acquisitions of methicillin-resistant *Staphylococcus aureus* (MRSA) or vancomycin-resistant *Enterococcus*.



Centers for Disease Control and Prevention

WORLD MEDICAL ASSOCIATION'S Declaration of Helsinki 7TH REVISION, 2013

[World Medical Association Declaration of Helsinki:
Ethical Principles for Medical Research Involving
Human Subjects](#)

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[The 50th Anniversary of the Declaration of Helsinki:
Important Improvements but Remaining Challenges](#)

Related Viewpoint:

[The Declaration of Helsinki, 50 Years Later](#)

Audio Interview:

Howard Bauchner, MD, interviews WMA representatives Ramin W. Parsa-Parsi, MD, MPH, and Heikki Pålve, MD, PhD.

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Special Communication | October 19, 2013

World Medical Association Declaration of Helsinki

Viewpoint | October 19, 2013

The 50th Anniversary of the Declaration of Helsinki

Viewpoint | October 19, 2013

The Declaration of Helsinki, 50 Years Later

Editorial | October 17, 2013

Donor Oocyte Cycles in Assisted Reproduction

Declaration of Taipei

Consent with information about purpose and procedures (as far as known and protection mechanisms installed) – a guarantee for strong and protective governance

Ethical review with any use of the database or biobank. Determination if additional consent or protections are necessary.



Isn't the Declaration of Helsinki enough of protection?

Declaration of Helsinki

- Single research application
- Defined protocol with one hypothesis and one aim
- Risk can be described before recruitment
- Defined time-line
- Holder and user of data are known at the beginning
- Defined benefit
- High Cost per data set
- Data has to be collected
- Subject data is usually identifiable
- Intellectual property questions are usually subordinate for the subject/patient

Declaration of Taipei

- Multiple use
- Multiple and different protocols
- Multiple and different aims
- Risk can usually not be defined before recruitment
- Time-line unknown
- Holder and user of the data may be different and users may not be known in the beginning
- Benefit undefined
- Low cost per data set
- Data set is available
- User Id may remain anonymous or coded
- IP questions may be relevant for community and or individuals



International Code of Medical Ethics Current Content

Professionalism,

Integrity,

Respect for Patient Autonomy,

Distributive Justice,

Stewardship,

Obligation to care (emergency),

Collegiality



International Code of Medical Ethics Procedure

Professionalism,

Integrity,

Respect for Patient Autonomy,

Distributive Justice,

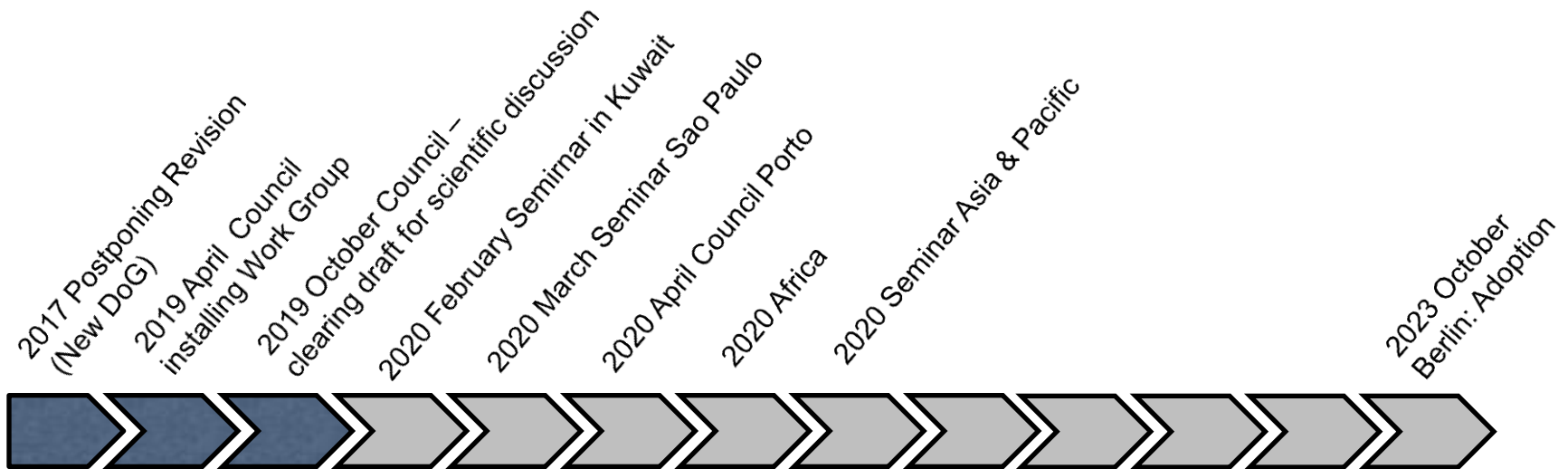
Stewardship,

Obligation to care (emergency),

Collegiality



International Code of Medical Ethics Procedure



**Timeline for drafting a New
International Code of Medical Ethics**



*Caring,
Ethics,
Science*



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