7.K. Skills building seminar: Tackling Antimicrobial Resistance: case studies and ethical reflection

Organised by: EUPHA section on Infectious diseases control and EUPHA section Ethics in public health

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Chairperson(s): Aura Timen – The Netherlands, Peter Schröder-Bäck – The Netherlands

Key objective of this workshop is to sensitize participants to the ethical dilemmas related to the care for people carrying antimicrobial resistant pathogens. Second objective of the workshop is to support ethical reflection skills of professionals in relation to their national prevention guidelines.

Antimicrobial resistance (AMR) has been described as one of the major threats to individual and population health in the present century. Many countries have specific AMR prevention guidelines in order to prevent further introduction and spread of AMR in healthcare facilities.

These guidelines may in many ways affect the lives of carriers of antimicrobial resistant pathogens. This is for instance the case with isolation and quarantine treatment; restrictions in the workplace; refusal of access to important activities; requests to abandon one's pet animal that is colonized with a resistant pathogen; or contact restrictions at the farm of one's family. These situations all result in complex ethical dilemmas. In practice, however, the ethical component of this dilemma remains largely implicit.

An important feature of AMR-dilemmas is that they involve conflicts between the interest of the individuals that carry AMR on the one hand, and the interests of society as a whole, on the other. Such conflicts are at the heart of this workshop: how to balance the public and institutional interests to prevent spread of AMR against the wellbeing and freedom of infected individuals?

Key element of this workshop will be a moderated group discussion. We will first present real-life ethical dilemmas from Dutch and UK practice. We will than introduce values and principle such as Solidarity, Justice and the principle of The Least Intrusive Means. Finally, we will give the floor to the audience: how do other European countries approach comparable AMR dilemmas?

The group discussion will be moderated by Aura Timen, Head of the Dutch National Coordination Centre for Communicable Disease Control and Peter Schröder-Bäck, president of the EUPHA section ethics in Public Health. Also Marlies Hulscher will be present to make the connection between ethics and quality of care.

Key messages:

- AMR policies require a balance of the wellbeing and freedom of an infected individual against the public and institutional interests to prevent spread of AMR
- Addressing these AMR dilemmas requires robust explicit ethical considerations and the use of core public health values

Dilemmas related to being a carrier of a multidrug resistant organism Babette Rump

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Aim of the first presentation is to outline the dilemmas related to being a carrier of a multidrug resistant organism. People that carry multi-resistant microorganisms do often not experience clinical symptoms. In other words, they are healthy carriers, but can transmit the resistant bacterium to their contacts. Spread of resistant microorganisms is a serious problem in healthcare facilities, especially there where patient with severe underlying disease are being cared for. They can become infected with a resistant microorganisms and develop disease that cannot be treated with most of the available antibiotics. Measures taken to prevent further spread are thus imposed on healthy carriers, with the goal to prevent disease in their vulnerable contacts.

This results in complex dilemmas that involve conflicts between the interest of the individuals that carry AMR on the one hand, and the interests of society as a whole, on the other. In the first presentation we will share two real life cases from Dutch practice with the audience to illustrate the dilemmas

(1) A first real-life case address a Dutch medical student found to be persistent carrier of Methicillin-Resistant Staphylococcus Aureus (MRSA). In line with Dutch guidelines the student is not allowed to be involved in patient-care, which implies he cannot participate in internships necessary to finish his medical education. (2) A second real-life cases address a toddler colonized with an AMR. The toddler applies for admission to a medical day-care facility. In the facility, there are other children that would become at risk of becoming colonized with the AMR as well.

Key message:

 Applying AMR policies often involves balancing the wellbeing and freedom of an infected individual against the public and institutional interests to prevent spread of AMR

Value based public health practice and its implications for meeting challenges of antimicrobial resistance and communicable diseases

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This second presentation will highlight and reflect on a recent case of multidrug resistant tuberculosis in southern England and the complex ethical challenges in managing such cases. It will highlight and use some of the emerging public health values developed by the UK Faculty of Public Health to reflect and consider the ethical challenges in addressing issues around antimicrobial resistance and communicable diseases.

Ebola outbreak, migrant crisis, climate change, emerging communicable diseases, and other public health challenges have highlighted the importance of population based approaches, key role of social determinants and inequalities, and explicit consideration of public health ethics and values in addressing such issues.

AMR and effective management of communicable diseases continues to be a major global public health issues requiring genuine collaboration between and within all countries and various agencies and recognition of the coherent role of individuals, communities and institutions. Solidarity, Justice, knowledge, service and interconnectedness offer potential useful public health values to advance the discourse on the ethical challenges and their consideration.

Reflection on key public health values such as solidarity, Justice and others provide useful practical tool for considering some of the ethical challenges to address AMR and emerging communicable diseases.

Key message:

 Addressing the challenge AMR and communicable diseases requires robust explicit ethical considerations and core public health values and recognition of their global nature. There is case to consider coherently the role of individuals, communities and institutions in tackling such issues

AMR and the Principle of the Least Intrusive Means Morten Fibieger Byskov

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To support ethical skills by exploring the value of the principle of the 'least intrusive means' for AMR practice.

The principle of the least intrusive means is commonly seen as a core element in justifications of liberty-limiting interventions in public health (Dute 1994, Krom 2014, Childress et al. 2002; Upshur 2002; Nuffield Council on Bioethics 2007).

One common version entails that health professionals should always choose the least intrusive means available. This, however, seems to be in sharp contrast with the typical strictness of AMR policies, often involving 'zero-tolerance' (Török 2014). This suggests there is little room for ethical concerns about the intrusiveness of such policies. Adding to the complexity, different policies to protect against infections will not only differ in how intrusive they are but also in their expected effect on reducing infection risks. Often there will be a correlation between the two: stringent options being more effective, and vice versa. Choosing the least intrusive option, then, might also mean choosing the least effective option. Hence, it is not obvious that health professionals should choose the least intrusive among effective options if alternative options are more intrusive but may also offer better protection (Verweij 2011; Grill & Dawson 2015).

Can the principle of the least intrusive means play a central role in AMR care? Two strategies will be presented: (1) Rephrasing the principle to leave room for stringent measures, while also protecting individual interests; (2) Testing whether it could support common AMR measures with the help of other moral considerations such as effectiveness and proportionality.

Key message:

• The principle of the least intrusive means can play a role in AMR policy and practice, but in order to do so it requires further qualification