

## Bioethical Decision Making in the Dilemmas Related to Nursing Care

—Consideration through a Case Study—

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### 要 約

Nurses are sometimes worried about ethical dilemmas in nursing care. However, until now we have not discussed much such a problem in spite of its importance. Today, nurses in U.S. are interested in the concept of "nursing advocacy". It means advocacy of patients' best interests and rights by nurses' duties. What kind of method can nurses as "patient advocate" have in order to solve ethical dilemmas in difficult cases? To solve this problem, Thompson J E and Thompson H O present ten steps to bioethical decisions. These are: 1. review the situation 2. gather additional information 3. identify the ethical issues 4. identify personal and professional values 5. identify the values of key individuals 6. identify the value conflicts 7. determine who should decide 8. identify the range of actions and anticipated outcomes 9. decide on a course of action and carry it out 10. evaluate the results etc. In this article, this process is explained concretely through a dementia old woman's case in Japan. It is sure that an ideal method of carrying out ethical nursing care should be made by reviewing today's issues of decision making in nursing care.

### Key words

nursing advocacy, ethical dilemmas in nursing care, patients' best interests, bioethical decision making, bioethical principles

### Introduction

Nurses sometimes experience ethical dilemmas in nursing care. Smith and Davis classified these dilemmas into five categories.<sup>1)</sup>

1. conflicts between two ethical principles one holds
2. conflicts between two possible actions in which there are some reasons for and against the same actions

3. conflicts between a demand for actions and the need for time to reflect on a situation not previously encountered
  4. conflicts between two equally unsatisfactory alternatives
  5. conflicts between one's ethical principles and one's obligations as a nurse
- These are a few examples of the ethical dilemmas for nurses. The first one is an example of category 1. Patient A has a brain tumor and sometimes loses conscious-

ness. Because of this, he is forced to wear a restraining band to prevent a fall from his bed. He does not like it and asks the nurses to remove it. Although the nurses want to release him from the band as requested, they can not do it because of difficulty of constantly attending to him. This is a dilemma between respect for the principle of autonomy and respect for the principle of nonmaleficence.

Here is another example. Patient B is in a terminal stage and does not wish to receive active therapies to prolong his life. His doctor, however, is trying hard to prolong his patient's life. Though nurses do not want to give him injections of anticancer drugs out of respect for the patient's autonomy, it is not permitted for them to oppose the physician's orders. They have an obligation to be loyal to those orders. This is an example of category 5.

When nurses are put in such dilemmas, how do they cope with them? This problem has not been adequately discussed until recently, in spite of its importance. In most cases, influential individuals' intentions, which means physician's intentions etc., have been put into action and problems have been left unsettled without consideration for patients' intentions.

Today, the concept of "nursing advocacy" is attracting the attention of many nurses in the United States. This concept means the advocacy of patients' best interests and rights by nurses. Hereby nurses can be called "patient advocates" and their main ethical responsibility lies in accomplishing this role.<sup>2)</sup> This concept is now introduced in the ethical code for nurses of the American Nursing Association. "Nursing advocacy" is a fundamental idea for solving the ethical dilemmas in nursing care. Nurses as patient

advocates should try to solve the problems ethically in difficult cases, and in the best interests of their patients. If that is the case, what kind of methods can they use to solve these dilemmas? These problems will be considered in this article.

### **A method of bioethical decision making to solve the dilemmas in nursing care**

To solve the problems mentioned above, "Bioethical Decision Making for Nurses" by Thompson J E and Thompson H O will be helpful for nurses. In this book, the authors present ten steps to reach bioethical decisions.<sup>3)</sup>

Step one : Review the situation

Step two : Gather additional information

Step three : Identify the ethical issues

Step four : Identify personal and professional values

Step five : Identify the values of key individuals

Step six : Identify the value conflicts, if any

Step seven : Determine who should decide

Step eight : Identify the range of actions and anticipated outcomes

Step nine : Decide on a course of action and carry it out

Step ten : Evaluate the results

In this article, the way to reach a bioethical decision will be explained concretely by using a case of one old woman suffering from dementia in Japan as an example. This is a real case in one of the facilities for nursing students' practice. However, the author in this article had not a direct connection to it. In this case, a few fictions are also included to guard the privacy of the patient and her family. At each step, the authors' theory will be explained briefly first. The case will be analyzed following

the explanation of the theory.

#### Case

Nurse A, who had just been relocated to a geriatric hospital, was worried about Patient S whom she was in charge of in the ward. Patient S was an eighty-year-old woman diagnosed as having dementia based on multiple cerebral infarctions. She had lived with her eldest son's family before she entered this hospital. Impairment of memory had already existed for three years by that time: sometimes she left the gas cooker on, ate all the food in the refrigerator in the middle of the night, had diarrhea and toilet accidents from overeating, and hid her wet or soiled underwear in drawers. Her family was exhausted and at a loss as to what to do. Her eldest son had been applying for admission to hospitalize her because no one could take care of her in the daytime. Both he and his wife were working outside of the home. There was, however, no vacant bed in the hospital at that time. It was six months before she was eventually admitted to the hospital.

The doubt Nurse A had in the case of Patient S was regarding the use of adult diapers in the daytime. This has been just resumed recently, although the patient was able to control her bladder in the daytime and did not wish to use them. It was appropriate to make her use diapers at night because she sometimes had toilet accidents at night. The patient had no use for adult diapers in the daytime because she was able to control her urination. She could not understand why the hospital was forcing her to use a diaper in the daytime.

Nurse A asked the team leader, nurse T, about this doubt. Looking puzzled, Nurse T said, "Though the head nurse and I also

think this is not good, the circumstances force us to do this. The patient's family made it a condition that the hospital habituates her to the use of diapers in the daytime before they take her back home. Otherwise they will have problems if the patient has a toilet accident at home. In addition to this, as you know, this hospital has a maximum limit of a six-month-stay. Her stay is about to reach the limit. We can not help accepting the condition."

Almost all of the abnormal actions the patient used to have, have not appeared since she was hospitalized, although loss of memory of peoples' faces still remained. She was in a state of remission. Nurse A has been trying hard to stop forcing her to use diapers in the daytime. However, all her efforts were fruitless and the day when Patient S had to leave hospital was soon to come.

#### Steps to bioethical decision making

Step one: Review the situation

In step one, the whole situation of a case has to be reviewed through the following questions. What kind of health problems can you see under the circumstances? What are ethical problems in the case? Who are involved in the case? What kind of solution would be desirable for nurses to cope with ethical dilemmas? However, at this point it is not necessary to analyze them so precisely. The answers to these questions can be examined in detail in the following steps.<sup>4)</sup>

- Analysis of the case by step one -

To begin with, the health problem in this case should be considered. The most serious health problem of Patient S is the dementia based on multiple cerebral infarctions. This

disease is accompanied by many small infarctions of the brain, which is a result of clogged capillary vessels caused by various reasons. This kind of dementia is different from Alzheimer's type. Therefore, it is possible to stop the growth of the disease with proper medical treatment and to expect recovery to some extent by rehabilitation. Abnormal actions and incontinence during the daytime were not present with Patient S in well-regulated life and under the guidance of professionals after she entered the hospital. Further efforts and guidance will be necessary in order to improve her condition as well as to maintain the present condition. However, it is necessary to pay more attention to the reality. The hospital is forcing the patient to use a diaper in the daytime by the family's request, which is in opposition to rehabilitation. Forcing a person to use a diaper will bring rise to incontinence, cause decubitus and worsen dementia from a medical point of view.

Next, what are the ethical issues found at this stage? The main issue is that the hospital has granted her family's request of forcing her into unnecessary use of diapers in the daytime to discharge her from the hospital and ignored her wishes completely. Even if the patient was suffering from dementia, such a decision making is no doubt not ethically acceptable. This decision making is against the ethical principle of autonomy proposed by Beauchamp TL and Childress JF, and it is also against nonmaleficence by them<sup>5)</sup> due to the harmful health effect of the unnecessary use of diapers. From any view point, this needs to be reconsidered.

Taking all issues mentioned above into account, we need to identify the individuals involved in this case and key persons among

those people. Finally, it is desirable to find a solution that pays more attention to the intention of the patient.

#### Step two : Gather additional information

In step two of the decision model, additional information needed in moral reasoning should be gathered.

#### - Analysis of the case by step two -

The gathered additional information shows the following facts.

The patient's family had good reason for having asked the hospital to habituate her to the use of a diaper in the daytime. Although she was in a state of remission, what will happen if the patient has a toilet accident in the daytime? As Patient S will not be able to clean up after toilet accidents, her family will have to do it. However, they could not provide full care for her because both her eldest son and his wife went out to work in the daytime, and their only daughter was still a junior high school student. Besides that, their compassion was already fatigued. Her son did not want to take care of his mother any more. That was the reason why he was so reluctant to take his mother back to his house when her stay was about to reach the hospital's limit of stay. At that time, he even refused to see his mother. Learning that she had to leave the hospital, he set the previously mentioned condition to the hospital to avoid unnecessary troubles. His wife was too exhausted to be nice to the patient. She rarely came to the hospital to see her mother-in-law. The patient had another son who lived far away and was also reluctant to care for her. There was a community nurses' center in their town, but they did not get informations

on it.

When nurses spoke to the patient, she always said, "The aged are useless." She sometimes was stubborn. Such a personality was formed by the hardships she had undergone in her life. After her husband was killed in the war, she brought up the children by herself. As for the use of a diaper in the daytime, she refused it at first but finally accepted it. That was not because she wished to leave the hospital but because she just obeyed the nurses who cared for her with affection.

#### Step three : Identify the ethical issues

In step three, the ethical issues in a case have to be clarified. Here the ethical issues are more clearly identified. Nurses need to learn the fundamental issues in bioethics in order to achieve this.

#### - Analysis of the case by step three -

In this step, the ethical issues mentioned in step one should be identified more clearly. The main ethical problem in this case, as mentioned previously, is that Patient S was forced to use unnecessary diapers in the daytime contrary to her intention by request of the patient's family.

As already mentioned, the practice would work to adversely affect the treatment of dementia and rehabilitation. The problem is that such a harmful action to her health was decided on only to suit the conveniences of the people surrounding her. This goes against the very important principles in bioethics, that is, respect for the autonomy of patients and nonmaleficence. Taking all points into account, it is sure that this decision making is contrary to the responsibility of nurses as advocates of a patient's

interests.

On the other hand, from the family's view point, it might be inevitable that they reached this decision under the circumstances. However, you have to ask whether they really have no other options and if the patient has no any competence for self-determination. These issues will be dealt with again in later steps. Forcing someone to use a diaper unnecessarily is a violation of human dignity.

#### Step four : Identify personal and professional values

In this step, nurses who play key roles in a case should identify their personal and professional values. To identify personal values, it is important for the nurses to make it clear what they believe to be important in a case, and then they should identify their professional values. The "Code for nurses" by the American Nurses Association shall be useful in helping them to do this.<sup>6)</sup>

#### - Analysis of the case by step four -

Nurse A was feeling reluctant to force Patient S to use a diaper in the daytime. Her reluctance is evident because she tried to stop it. Apart from the professional values, people, even if they are not professionals, do not think it is appropriate to put a person in a diaper against his or her will unnecessarily. If ordinary people think so, it is much more natural for a nurse to have doubts about this kind of decision as a patient advocate. The doubt Nurse A had shows that she has a sound sensibility of the nursing profession. It is ethical for nurses to hope their patients will live with as much dignity as possible, even if the patient is suffering from dementia like

Patient S.

Nurse T had also doubts about the use of a diaper in the daytime. However, she, as a leader of the nursing team, chose to respect the intention of the patient's family, who required the hospital to habituate the patient to use a diaper as a condition of taking charge of the patient. While she fully understood the adverse health effect of unnecessary use of diapers as a professional, she chose to be loyal to the hospital's policy of a limited period of stay. Her position in the ward made her do so, but her professional values may be subjected to criticism.

Step five : Identify the values of key individuals

In this step, you are requested to identify the value of the key individuals other than the key nurses involved in the situation. Thompson et al. suggest some methods such as group discussions, personal discussions and questionnaires to learn the values of others.<sup>7)</sup>

- Analysis of the case by step five -

Patient S : She said, " I do not want to go back home, because I do not want to bother anyone." Her remarks showed the spirit of independence that has been a philosophy of her life and has supported her life-style. Therefore, she is now blaming herself for her present dependency on others. Even if she suffers from dementia, a healthy part of her mind still remains. Forcing her to use an adult diaper must have humiliated her.

The patient's eldest son : Judging from the fact that he has taken care of his mother without the help of his brother, he seems to be a responsible person to some extent. However, that does not mean he willingly

cares for her. He thinks he does not have any choice under the circumstances, though he does not want to live with his mother if possible. He is also worrying about having a bad reputation. This son, who is in his fifties, has an old-fashioned way of thinking.

The wife of her eldest son : She behaves as if she has taken care of her mother-in-law unwillingly. The ward staff witnessed that her attitude toward the patient was rough when she came to the hospital to see her mother-in-law. She must have recognized this situation as a hindrance to her dream, if she was working not for financial reasons but for something she lived for. She also, however, understood that there was no option other than taking care of her mother-in-law by herself.

Other individuals : The head nurse of the ward appeared to treat the patient based on as same values as the team leader, Nurse T has. The director of the hospital must have intended to apply the hospital's time limit policy to this patient's case from the administrative view point. This policy was introduced to this hospital for profit-making and to create equal opportunity for all patients to enter the hospital. The doctor in charge appeared to think more about loyalty to hospital rather than the patients' interests.

Step six : Identify the value conflicts, if any

In this step, value conflicts in a case should be identified. There are three types of value conflicts : conflicts within an individual, conflicts between individuals, and conflicts between groups. More specifically, conflicts could take place between a patient and a doctor or a nurse, between a doctor and a nurse, between a patient's family and staff

of a ward, and between a team of physicians and a team of nurses.

The concept of the value hierarchy, which means assigning priorities to each value, is useful to the solution to the value conflicts.<sup>8)</sup> It is important for nurses to gather objective information as much as possible in order to assign priorities impartially in a calm manner along with value judgement.

- Analysis of the case by step six -

Value conflicts among the individuals involved in this case lie (a) between Patient S and her family, (b) between the patient's family and the management policy of the hospital, (c) between the patient's family and the staff nurses other than Nurse A, and (d) between Nurse A and Nurse T or the head nurse. Each value conflict would be :

a : over the use of a diaper in the daytime. Patient S was reluctant to put a diaper on but her family forced her. Her wishes were ignored because she was taken care of.

b : over the time limit of stay. The patient's family insisted on a long stay regardless of the time limit of stay. The hospital insisted on her discharge within the time limit. The patient's family backed down.

c : over the habituation of using a diaper in the daytime. The patient's family requested the staff to habituate the patient to the use of a diaper as a condition to take her back home. The staff nurses tried to turn down the request but they could not help but accept the request because they were obliged to discharge her in response to the hospital policy.

d : over the responsibility of nurses as advocates of patient's interest. Nurse A insisted that nurses should have respect for the autonomy and human rights of patients and

should be advocates of patient's interests. On the other hand, Nurse T and the head nurse insisted that they should grant the request of the patient's family in order to make the patient leave hospital on the date set by the hospital policy. Nurse A eventually backed down, but is still in a dilemma.

While each argument mentioned above has value to some extent, it is clear which one should be given priority over others. The patients' interests should be given the top priority because they are deeply connected to respect for patients' rights.

Step seven : Determine who should decide

In this step, it needs to be determined who could be the most appropriate decision makers. Medical professionals have been regarded naturally as decision makers so far. As self-determination of patients has been attracting more attention, the idea that patients should be decision makers in their own matters has been gaining prevalence recently. In the case where patients are incompetent, their proxies or attorneys should be in charge. Thompson et al. insist that a decision by a medical and health care team including a patient and his or her family would be better.<sup>9)</sup> In the case that it is impossible to make a decision, intervention by the institutional ethics committee could be a possibility.

- Analysis of the case by step seven -

What sort of further efforts should be made by Nurse A for more ethical decision making in this case? The answer is to create opportunities to discuss this matter by the medical and health care team involving the patient's family and Nurse A as a spokeswoman for Patient S. The head nurse, the

doctor in charge and the director of the hospital should take part in this discussion. This is the decision making by a team which Thompson et al. recommended. It is desirable to reach consensus through discussion focusing on the respect for the patient's will. Respect for the autonomy of a patient is the important principle in bioethics.

However, a difficult problem exists here. The patient is suffering from dementia. Is her will worth being respected? Here, a delicate problem regarding how the competency of an individual could be assessed emerges. Whether an individual is competent enough or not to make decision tends to be dealt with easily. However, Drain J F said that the competency level of an individual varies as the degree of the difficulty of the subject varies. Therefore, it is difficult to judge easily whether a patient is competent or not. By the competency scale of Drain, with the subject of the standard 1, even such people as children under ten, mentally retarded children who are able to learn and the aged suffering from mild dementia can be assessed competent since the subject is easy and simple to understand.<sup>10)</sup>

As for Patient S, the subject used to assess her competency at present is the propriety of the use of a diaper when she is not likely to have toilet accidents. She is repelled by unnecessary use of diapers. It is clear that she does not need a diaper when she can control her desire to urinate and the use of a diaper should be avoided as much as possible due to side effects such as skin inflammation. Therefore, the difficulty of this subject is identified as the subject of standard 1 of Drain's competency scale. So, the patient's judgement on this issue was right, we can say she is competent as to this subject. It is desirable to decide on a course

of action respected for her desire and her intention.

Step eight: Identify the range of actions and anticipated outcomes

In this step, as a preparatory step to the final solution, you should identify possible options to solve the problem and anticipated outcomes. Anticipated outcomes need to include emotional effects, economical effects and cultural effects as well as physical effects.

- Analysis of the case by step eight -

In this case, it is possible for us to suggest the following options to solve the problem.

(options)

1. Discharge the patient from hospital without stopping use of a diaper in the daytime as her family requested and leave her in her family's care.
2. Stop the use of diapers in the daytime, then discharge her from hospital without a diaper after explaining the harmful effects caused by diapers to her family and leave her in her family's care.
3. Stop the use of diapers in the daytime and postpone her discharge from hospital to wait for her recovery from dementia.
4. Stop the use of diapers in the daytime, then transfer her to other facilities and leave her in their care in the case that her family will not accept her.
5. Stop the use of diapers in the daytime, make an arrangement to provide care by community nurse at home for the relief of her family, and then discharge her from hospital.

(anticipated outcomes of these options)

Relating to option 1: The request by the

patient's family will be granted, still there is a danger of violation of the patient's dignity. Habitual use of a diaper will worsen dementia, which means she will likely re-enter the hospital.

Relating to option 2: Though the patient's intention will be respected, her family may not accept this proposal. The explanation of the harmful effects caused by diapers will not be enough to convince them even if they compromised on the point of taking her back to their home. They may resume use of diapers after she returns home, which could lead to other trouble.

Relating to option 3: It will be difficult to change the policy of the hospital due to managerial reasons. Moreover, it will not be easy for her to recover from dementia soon.

Relating to option 4: This option would be good in that it would stop the use of diapers in the daytime. However, it would be irresponsible for medical and health care professionals to transfer the patient to other facilities even if her family refused to accept her. Besides that, it is not easy to find other facilities to accept her under existing circumstances.

Relating to option 5: The patient's intention will be respected by stopping the use of diapers in the daytime. Care service by the community nurses will reduce the hardship of her family as well as make them feel secure. They will find room to breathe, and they may be able to feel affection toward her. The patient herself will be released from stress, which will be good for her recovery. The point is whether the community nurses can visit her every day. If this is impossible, other options such as use of a day-care should be considered.

Step nine: Decide on a course of action and carry it out

In the course of screening the options and the anticipated outcomes, the answer should come to our minds voluntarily. However, even if it is so, you should examine the options through the fundamental ethical principles. Then, the decision maker in a case will be able to choose the best option among them. If the decision maker in a case is a patient, nurses can give him or her advice about the morality of each option. If the decision maker is a team, ethical examination by the participants will be necessary.

In examining the morality, there are two main general approaches: an approach by applying consequentialism or utilitarianism and an approach by applying deontology. Also, the model of the pluralistic ethical decision making by Payton R J will be useful.<sup>11)</sup> Thus, the best option is decided, and then it should be carried out.

- Analysis of the case by step nine -

The author in this article examined the options mentioned above using the utilitarian approach and the deontological approach. The option 5 was verified to be the best one. Using the utilitarian approach, it was verified to be the most suitable option because it had utility not only for the patient but also for her family and the hospital. Using the deontological approach, it was also verified to be the best one from the view point of Beauchamp's bioethical principles, that is, autonomy, nonmaleficence, beneficence and justice.<sup>12)</sup>

This option will enable the patient to receive care at home without losing her dignity. She must have hoped for this if the

surrounding permitted it. This also will enable her family to use extra energy for other activities. As for the hospital, they can vacate a bed for a patient who needs medical treatment, which is in keeping with allocation of scarce medical resources and management policy. The responsibilities of nurses as patient advocates are achieved by carrying out the option 5.

#### Step ten : Evaluate the results

In step ten, result from actions carried out should be evaluated. If the results are not as expected, it is necessary to identify the point where a mistake took place and to add alterations, then take steps again.

#### - Analysis of the case by step ten -

The case in this article, which is a real case in Japan, was used to explain the decision model by Thompson et al. and the author was not involved in it. Therefore, the results of the option 5 can not be evaluated.

As a matter of fact, the option 1 was chosen in this case, although Nurse A tried to change it. The result is, the individuals concerned told me, that the condition of the patient has worsened and she was hospitalized again soon after. It is sure that they would have had much more different results if they had chosen the option 5.

#### Conclusion

In this article, the decision model theory to solve the dilemmas in nursing care ethically was applied to one case which took place in Japan, and was developed in that case. Here, the author identified how to solve the dilemmas in nursing care ethically and where the responsibilities of nurses were as

patient advocates.

There may be challenging problems in applying the theory in practice since reality is somewhat different from theory. However, considering how to solve the dilemmas in nursing care and what decision making should be will contribute to the patient centered caring as well as enhancing the autonomy of the nursing profession.

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## 看護行為におけるジレンマと倫理的意思決定

—ケース・スタディーによる考察—

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### 要 旨

看護婦はしばしば臨床の現場で倫理的なジレンマに悩む。しかしそれをどう解決するかについては、これまでほとんど議論がされてこなかった。トンプソン等は著書において、倫理的にジレンマを解決するための10段階のプロセスを示した。即ち、1. 全体的状況の振り返り 2. 補足的情報収集 3. 倫理問題の明確化 4. 看護婦の個人的及び職業的価値観の明確化 5. 鍵となる個々人の価値観の明確化 6. 価値葛藤の明確化 7. 意思決定者の決定 8. 解決のための行為の選択肢と予測結果の明確化 9. 行為の決定と実践 10. 結果の評価、等々である。本論文では、わが国の実例を用いて、この理論が具体的に展開され、ジレンマの倫理的解決のための一手段が提示される。事例は入院期間が制約されている一痴呆高齢者に関するもので、おむつの使用をめぐる、本人、病棟スタッフ、家族等々の葛藤と解決手段が紙上で考察される。看護行為における意思決定のあり方を省察することで、ナーシング・アドボカシーの精神に沿った倫理的な看護行為も可能になると確信できる。

### キーワード

ナーシング・アドボカシー、看護行為における倫理的ジレンマ、患者の最良の利益、倫理的意思決定、生命倫理の原理