Ethics is about moral choice. It concerns the rational and systematic discussion as to making ‘good’ choices. Actions can be: moral, immoral, amoral.

Decisions can be: objective, subjective, relative or absolute, individual or collective.

**BIOETHICS**

*The application of ethical reasoning to medical decision-making – BMA*

Consequentialism

*Judges any action as being ethically right or wrong by it’s consequences (Teleological).

*Egoistic Hedonism – ‘happiness is the ultimate goal of life’ (Epicurus). We behave and decide upon matters to solely benefit ourselves. People act in their own self-interests (Machiavelli/Bentham). All judgments are based on maximizing pleasure and minimizing pain.*

*Utilitarianism – an action should be judged solely on results it achieves (John Stuart Mill). Happiness should be maximized for the greatest number. It can lead to decisions that might be morally wrong.*

Deontological

*Judges an action as right or wrong regardless of the consequences – an act is good, not because of the consequences it produces, but because it is good and right in itself (Immanuel Kant). It is a duty based theory (‘ought’ rather than ‘may’). This means does not justify the ends.*

*The Categorical Imperative - there are no conditions attached to the decision. No-one should be treated as a means to an end. Eg Doctor’s duty to a patient.*

*Critics argue it is impractical.*

Principalism

*This approach relies on a series of overarching principles to guide behaviour. Developed by Beauchamp and Childress.*

*Respect of autonomy - right not to have something done to your body without consent.*

*Non-malefeasance – one person should not cause harm to others. Reflected in the Hippocratic oath. Mcfall v Shimp – strong link with respect for autonomy.*


*Justice – fair, just and reasonable. Relevant in allocation of health resources. Disparities in public health.*

Rights

*Absolute (can’t be infringed whatever circs – Art 3); conditional (only be infringed in certain circs – Art 8); Rights/obligation/rights (they are linked – can’t have a right to something without obligation for someone to supply particular treatment); positive and negative rights (to do/not to do something); rights in medical law- right to life, right to autonomy, right to health care, right to dignity/confidentiality.*

Alternative bioethical approaches

*Virtue ethics; hermeneutics; cautistry; communication/individualistic ethics; pragmatism.*

**JURISPRUDENCE**

*Natural law*

*Religious: the religious interpretation based on the idea of God creating everything for purpose and the end. To do the ‘right thing’ one must act towards that end. Originally developed by Aristotle, St Thomas Aquinas – Summa Theologica. Natural law represents the rational understanding in the following God’s final purpose.*

*Secular: Rawls*

*Positivism*

*Law is a process in which rules are created by society with no reliance as to their validity by reference to any moral norm. The law is valid if posited by the actual lawmaker regardless of ethical, religious, etc values. Note: IS/ought distinction – John Austin/Jeremy Bentham*