



Looking back and looking forward

doi:10.1136/medethics-2022-108463

Jennifer Blumenthal-Barby

This July 2022 issue of the *JME* contains several articles addressing ethical issues related to COVID-19 as well as reproductive ethics—a timely topic, given the leaked U.S. Supreme Court document, anticipating the overturn of *Roe v. Wade*.

On the COVID-19 front, original articles in this issue include an analysis of ethical issues related to sharing research samples and data between low/middle-income countries and high-income countries,¹ a retrospective analysis of European scientific societies' triage policies early in the pandemic,² an assessment of the fairness of the allocation framework used by the WHO for their COVID-19 Vaccines Global Access Facility (COVAX),³ balancing physicians' freedom to express opinions on medical matters with public interest when they run contrary to each other,⁴ and a survey of Americans' views on race-based and place-based COVID-19 vaccine prioritisation.⁵ The articles include a mix of looking back and looking forward.

On the reproductive ethics front, articles include an analysis of when the government is justified in coercing parents and the implications for abortion,⁶ and a Feature Article on the ethics of assisted gestative technologies⁷—along with many insightful commentaries on that topic.

Some of the main arguments that the reader will find in this issue include:

- ▶ That ethical considerations in biobanking (sample collection, storage, sharing) during public health emergencies like the COVID-19 pandemic ought to include respect for research subjects, promoting the common good, solidarity, benefit sharing, and reciprocity. A review of research ethics guidance and regulatory requirements is required to ensure that they reflect these considerations.¹
- ▶ That the European Union (EU) ought to provide criteria for resource allocation within its member states in the management of a pandemic. A review of policies found that Italian and Spanish medical societies both prioritised greater probability of survival

and better prognosis/longer life-years, whereas Swiss and German medical societies advocated for preservation of as many lives as possible.²

- ▶ That in principle, fair global allocation of vaccines would involve distributing doses to those whose need is greatest (a targeted approach), but this approach would fail to account for the self-interested nature of states, making it unlikely that they would participate in COVAX, resulting in its collapse. Thus, an equal distribution approach averts more deaths than a targeted approach.³
- ▶ That when physicians engage in “citizen speech” (speech relating to broad matters in healthcare and public policy), they deserve the greatest level of protection of free speech. “Physician speech” (when a physician, acting on the authority of her position, offers specific medical guidance to the public) should be subject to a greater degree of regulation, however. “Clinical speech” or “professional speech” ought to be significantly regulated to align with professional standards of care.⁴
- ▶ That policy makers might consider public acceptability views related to COVID-19 resource allocation. A U.S. based survey found that a little over 50% of people supported place prioritisation in allocation of COVID-19 vaccines (prioritising zip codes that have been hit harder by COVID-19) and about 40% supported race-based prioritisation (prioritising Black, Indigenous, and Hispanic populations because they have been hit harder by COVID-19).⁵
- ▶ That since it is permissible for the government to coerce mothers into feeding their infants (when a transfer is not possible), there is a good reason to think that the state should coerce women into not having an abortion—that abortion should be illegal if the fetus is a person.⁶
- ▶ And finally, that the field ought to use and develop the conceptual category

of “assisted gestative technologies” (eg, uterine transplants, artificial wombs) since that these technologies raise distinct ethical, legal and social issues from those related to assisted conception.⁷

There is much to absorb and think about in this issue of *JME*—readers will appreciate the range of issues discussed. Perennial issues in medical ethics continue to warrant further discussion as well as future issues as science and medical technology develops. And ethicists continue to think critically about how to handle the COVID-19 pandemic as well as future ones. This issue illustrates the broad and encompassing way that bioethicists engage with the most critical ethical issues of today and tomorrow.

Funding The authors have not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

Competing interests None declared.

Patient consent for publication Not applicable.

Ethics approval Not applicable.

Provenance and peer review Not commissioned; internally peer reviewed.

© Author(s) (or their employer(s)) 2022. No commercial re-use. See rights and permissions. Published by BMJ.

REFERENCES

- 1 Singh S, Cadigan RJ, Moodley K. Challenges to biobanking in LMICs during COVID-19: time to reconceptualise research ethics guidance for pandemics and public health emergencies? *J Med Ethics* 2022;48:466–71.
- 2 Teles Sarmento J, Lirio Pedrosa C, Carvalho AS. What is common and what is different: recommendations from European scientific societies for triage in the first outbreak of COVID-19. *J Med Ethics* 2022;48:472–8.
- 3 Sharma S, Kawa N, Gomber A. WHO's allocation framework for COVAX: is it fair? *J Med Ethics* 2022;48:434–8.
- 4 Appel JM. If it ducks like a quack: balancing physician freedom of expression and the public interest. *J Med Ethics* 2022;48:430–3.
- 5 Schmidt H, Shaikh SJ, Sadecki E, et al. US adults' preferences for race-based and place-based prioritisation for COVID-19 vaccines. *J Med Ethics* 2022;48:497–500.
- 6 Hendricks P. My body, not my choice: against legalised abortion. *J Med Ethics* 2022;48:456–60.
- 7 Romanis EC. Assisted gestative technologies. *J Med Ethics* 2022;48:439–46.