

Ethical and Cognitive Challenges in the COVID-19 Emergency

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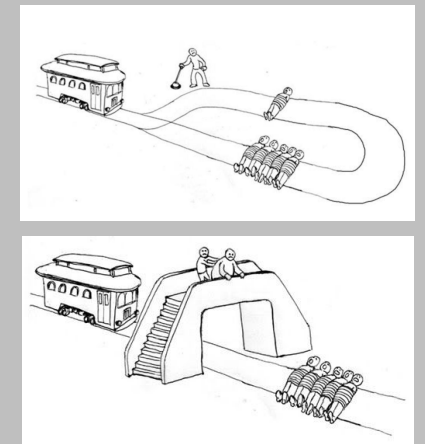
- The COVID-19 epidemics raises critical challenges for decision makers, individuals, and entire communities.
- Such challenges crucially concern ethical and cognitive aspects of relevant choices and decisions.
- Moral philosophy and cognitive science can illuminate important aspects of clinical and moral decision-making.
- We discuss the clinical ethical guidelines proposed by the Italian Society of Anesthesiology, Analgesia, Resuscitation and Intensive Care (SIAARTI) as an answer to the COVID-19 emergency.
- We highlight some crucial ethical and cognitive issues surrounding emergency decision-making in the current situation.

The SIAARTI recommendations (March 2020, excerpts)

- Art. 3. An age limit for the admission to the ICU may ultimately need to be set. The underlying principle would be to save limited resources which may become extremely scarce for those who have a much greater probability of survival and life expectancy, in order to maximize the benefits for the largest number of people. [...]
- Art. 4. Together with age, the comorbidities and functional status of any critically ill patient presenting in these exceptional circumstances should carefully be evaluated. A longer and, hence, more “resource-consuming” clinical course may be anticipated in frail elderly patients with severe comorbidities, as compared to a relatively shorter, and potentially more benign course in healthy young subjects. [...]
- Art. 7. Under exceptional circumstances, when the availability of resources is overwhelmed by their need, a decision to deny access to one or more life-sustaining therapies, solely based on the principle of distributive justice, may ultimately be justified.
- Art. 11. [...] When a patient is not responding to prolonged life-sustaining treatments, or severe clinical complications arise, a decision to withhold or withdraw further or ongoing therapies should not be postponed in a resource-limited setting during an epidemic.

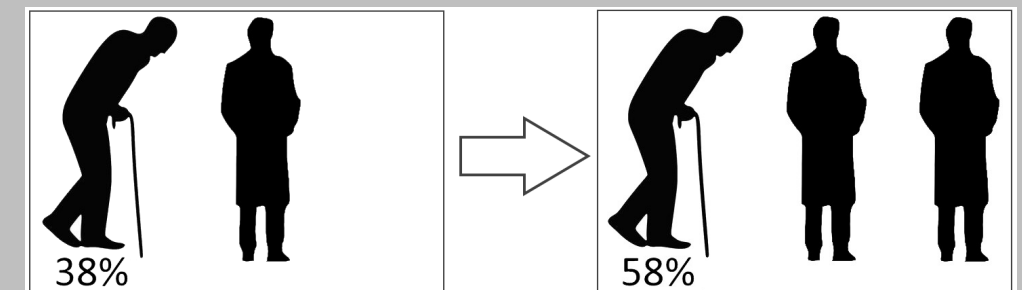
SIAARTI on moral decision making facing COVID-19

- “Disaster medicine” scenario and exceptional ethical guidelines
- Relevance of trolley-like scenarios
- Move toward “consequentialist” (vs. “deontological”) moral decision-making



Cognitive factors influencing moral decision making

- Role of emotions and “system 1 reactions” in moral evaluation
- Role of contextual factors (e.g., personal or relatives’ illness)
- Role of training and specialization; competing moralities (e.g., “deontological” doctors and nurses vs. “consequentialist” public health professionals)
- Role of “supposedly irrelevant factors”, e.g., irrelevant alternatives (decoy effect in clinical scenarios)



References

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