

Why doctors use or do not use ethics consultation

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Background: Ethics consultation is used regularly by some doctors, whereas others are reluctant to use these services.

Aim: To determine factors that may influence doctors to request or not request ethics consultation. **Methods:** A survey questionnaire was distributed to doctors on staff at the University Community Hospital in Tampa, Florida, USA. The responses to the questions on the survey were arranged in a Likert Scale, from strongly disagree, somewhat disagree, neither agree nor disagree, somewhat agree to strongly agree. Data were analysed with the Wilcoxon test for group comparisons, the χ^2 test to compare proportions and a logistic regression analysis.

Results: Of the 186 surveys distributed, 121 were returned, giving a 65% response rate. Demographic data were similar between the groups saying yes (I do/would use ethics consultation when indicated) and no (I do not/would not use ethics consultation when indicated). No statistically significant differences were observed between the user and non-user groups in terms of opinions about ethics consultants having extensive training in ethics or participating in ethics educational opportunities. On the issue "Ethics committee members or consultants cannot grasp the full picture from the outside", the non-users were neutral, whereas the users somewhat disagreed ($p = 0.012$). Even more significant was the difference between surgeons and non-surgeons, where, by logistic regression analysis, surgeons who believed that ethics consultants could not grasp the full picture from the outside were highly likely to not use ($p = 0.0004$). Non-users of ethics consultations thought that it was their responsibility to resolve issues with the patient or family (72.2% agree, $p,0.05$). Users of ethics consultation believed in shared decision making or the importance of alternate points of view (90.8% agree, $p,0.05$).

Implications: Ethics consultations are used by doctors who believe in shared decision making. Doctors who did not use ethics consultation tended to think that it was their responsibility to resolve issues with patients and families and that they were already proficient in ethics.