We are in crisis as a society. Upwards of 47 million Americans are now uninsured and do not have adequate access to health care. These individuals are at greater risk for illness, impairment, and death compared to those who do have some form of health insurance. The demographics also reveal that this disparity may also be discriminatory because it forms along economic and ethnic lines. While close to 80% come from working families two-thirds of the uninsured have no college education, half are from ethnic minorities, and 20% are children. The result is that needed health care for often treatable or preventable medical conditions is often delayed or avoided all together by those without insurance and when they finally do seek care the cost is often unnecessarily high. Nearly $100 billion is spent each year to provide uninsured patients with health services for conditions that are often preventable and for diseases that could be efficiently treated with early diagnoses and appropriate management. This catastrophic burden is shouldered by everyone and contributes to the $2 trillion spent each year on health care in this country, amounting to 16% of our nation’s Gross Domestic Product (GDP). Sadly, the chasm of health care disparity is widening in our country where the science, technology, and cost of health care is surpassed by none. Reform in our health care system is badly needed and it may be coming. A recent survey by Lake Research Partners for the American College of Physicians indicates that the public mandate is clear; 69% feel that complete or major health care reform is needed. The greatest concern of those interviewed is the rising cost of health care and the lack of universal health insurance coverage. Though patients trust their doctors, over one third remains dissatisfied with prevention of medical errors. There is solid support (77%) for payment reform that will reward doctors for quality care (“Pay for Performance”), but those interviewed also feel strongly that there should be incentives for prevention and for people to actively manage their health before they get sick (74%). Providing comparative effectiveness data that will supplement doctors’ clinical knowledge also has solid support but patients do not want scientific or cost effectiveness data to replace their doctor’s judgment. In addition, by an overwhelming margin (76%) voters support allowing health professionals other than doctors to provide more care in order to free up doctors and help control costs. The agenda is set for substantive reform but all the pieces are not in place yet.

Reform in our health care system is badly needed. President Obama’s first 100 days in office has placed this country on a fast track to substantive healthcare reform. What the new President has learned from former President Clinton’s failure is that health care reform must be transparent, inclusive of all stakeholders, involve Congress from the beginning, reassure voters about necessary trade-offs that will be required, and accept compromise as needed. But the barriers to success are onerous. Five major issues could derail health care reform, however; proposed mandates on employers and individuals; considering a “public plan” option; rationing and cost controls; how to pay for it all; and the growing budget deficit. Indeed there are risks and challenges, but change at some level is inevitable.

Health care access is the most important concern of the day and we will be joining in that dialogue. Our Fifth Annual Health Ethics Conference scheduled for October 8-10, 2009 will be at the Hilton Garden Inn here in Columbia. This year our theme is, “Health Care Access and Allocation of Resources” and we will again have numerous local, state, and national experts, including our own Ed Pellegrino, M.D., here to speak on various aspects of this critically important topic. Please join us and bring a friend. There has never been a more critical time to have this discussion.
Dr. Clay Anderson is a very busy man. He is the Director of Palliative Care at Ellis Fischel Cancer Center, member of the Ethics Consultant team within the Center for Health Ethics, as well as adjunct faculty for CHE, just to name a few of his endeavors. In addition to his numerous and greatly appreciated contributions to medicine, Dr. Anderson is also a family man. He and his wife Michelle, live in Columbia with their three children Benjamin 9, Levi 5, and Vivian 2.

Dr. Anderson is a Missouri native who grew up in Bridgeton and attended Pattonville High School where he participated in football and developed a love for the Missouri outdoors and spent significant hours hunting and fishing. Dr. Anderson was named valedictorian of his class at Pattonville and from there his scholarly excellence continued. He attended the University of Missouri as an undergraduate where his passion for oncology began and he met his wife Michelle. He then attended Stanford University for Medical School and during this period he and Michelle married.

His interests in palliative care and end of life issues led him back to Missouri where he wanted to make a difference in his home state. In 1997, Dr. Anderson and wife Michelle moved back to Columbia where they have remained since. Dr. Anderson has earned many awards and honors through his work in the field of Oncology and his tireless efforts in palliative care.

Outside of the field of medicine, Dr. Anderson spends time with his family hiking and camping, attending his son’s wrestling meets, and cooking and reading with his wife. On most Sundays, the Anderson family will be attending church at the Calvary Episcopal Church. He has mentioned that if not a doctor, he could see himself as an Episcopal priest, psychologist, or massage therapist; a healer in every sense of the word. Dr. Anderson is also an avid angler, spending a lot of time in the waters of Mid-Missouri and the Ozarks in pursuit of the largemouth and trout.

To add to the many accolades bestowed on Dr. Bondeson throughout his illustrious tenure at the University of Missouri, we can add the title of humanitarian. Dr. Bondeson has focused his entire professional career on giving back to others; as an instructor, mentor, and organizer for numerous causes.

Dr. Bondeson’s academic ambitions began at Augustana College in Rock Hill, Illinois where he earned his BA in Philosophy, Greek and German. His journey then took him to the University of Illinois where he earned an MA in Greek. In 1965, he earned his PhD from the University of Chicago in Philosophy.

Since 1964, Dr. Bondeson has been a professor at the University of Missouri in the Philosophy Department. Since 1999 he has been assistant to the Chancellor as well as being named Curators’ Distinguished Teaching Professor of Philosophy and Family and Community Medicine from 1992 to present. But, his endeavors do not rest entirely within MU.

In the community, Dr. Bondeson has donated much of his “spare” time to civic activities such as Chair of the Campus United Way and the City of Columbia Commission on the Arts. He also serves as the President of Friends of the Library, Missouri Citizens for the Arts, Columbia Art League and the Founding President of Museum Associates.

Needless to say, Dr. Bondeson’s generosity in his civic and professional life has been tremendous and beneficial to all that he has encountered.
Faculty and Staff News

Congratulations to Graduating GRA’s Adam Desaulniers and Seema Tekwani

This year’s MU Health Management and Informatics graduating class will no doubt send another group of very talented and bright young professionals into the working world including two of the Center for Health Ethics graduate research assistants: Adam Desaulniers and Seema Tekwani.

Over the past two years, both of these gifted students have contributed significantly in many projects within the Center as well as assisting faculty in writing, research, and everyday tasks. Adam has already secured employment after college at the Cerner Medical Group in Kansas City. Seema, has stated that she is optimistically searching within the state as well as throughout the country.

The work and assistance provided by Adam and Seema was rewarded with a small luncheon provided by Dr. Fleming where they were congratulated and faculty and staff joined them for a pizza luncheon with dessert to follow. On behalf of all in the Center for Health Ethics, We would like to wish them well.

Off and Running

Dr. Clay Anderson is the 2009 recipient of the Leonard Tow Humanism in Medicine award. The nationally renowned organization, Arnold P. Gold Foundation, presents the award each year to an outstanding faculty and medical student. The award is presented to the student and faculty member who best demonstrate the Foundations ideals of outstanding compassion in the delivery of care, respect for the patient, their families, and healthcare colleagues, as well as demonstrated clinical experience. The Gold Foundation began this award in 1991 at Columbia University and eventually became a nationwide award when Leonard Tow presented the Gold Foundation with a generous donation in 2003.

Dr. Anderson received the award on matching the criteria of demonstrating cultural sensitivity when working with patients and family members from culturally diverse backgrounds, he serves as a role model and illustrates professionalism by example, adheres to ethical and professional standards, and he is sensitive to the patients psychological well-being. Along with many other extraordinary attributes, Dr. Anderson meets and far exceeds any of these qualifications and deservedly earned this award.

Dr. Sarah Breier, Center Associate Director, is a multi-sport jugernaut. Traveling the country, Dr. Breier leaves her mark on multiple national Iron man events. Last November, in Clearwater Florida, she participated in the Ironman World Championships where she placed 11th in the 70.3 race with a time of 4 hours and 49 minutes. Later that month in Tempe Arizona, she raced in the Ironman 140.6 and finished with a time of 11 hours and 9 minutes. More recently in the Hawaii 70.3 race, she finished with a time of 5 hours and 33 minutes. In addition to these accomplishments, she was awarded the Gladys Stankowski Sportswoman of the year award as well as the Columbia Multi-sport Perseverance Award. We wish her well in her upcoming competition in Kansas this month.

Sarah Breier exiting the swimming leg of the Hawaiian Ironman 70.3 Competition.
HFA Annual Teleconference Focuses on Diversity in end-of-life care

Each year, in honor of Dr. Carlos Perez-Mesa and co-sponsored by the MU Center for Health Ethics and the Center for Arts and Humanities, the Perez-Mesa Conference is held to further advance the fields of humanities and medicine as a correlated means of therapy.

The 2009 Perez-Mesa Conference was held April 30th at the Reynolds Alumni Center on the MU campus. This year's guest speaker was Kathryn Montgomery, PhD., from the Feinberg School of Medicine at Northwestern University in Chicago.

The lecture titled “Learning from Patients: Physicians in Literature and Life” by Dr. Montgomery highlighted the need and the effectiveness of the arts and humanities in healthcare. Dr. Montgomery has also published: “Doctors’ Stories: The Narrative Structure of Medical Knowledge”, and “How Doctors Think: Clinical Judgment and the Practice of Medicine”.

In addition to the HFA’s panel, the Center for Health Ethics invited its own panel to facilitate debate over these pertinent issues and share their life experiences in diversity in end of life care. Dr. Clay Anderson, Don Reynolds JD, Ana-Maria Fernandez Msc., and Annette McDonald, RN fostered substantive and emotional dialogue about the need for diverse thinking and methodology in end of life care with Dr. David Fleming moderating.

MTN to Broadcast Center Lectures for CME Credits Approval

MTN (Missouri Tele-health Network) will offer something new and convenient in 2009. In many instances, CME (Continuing Medical Education) credits are normally available only by attending conferences, grand rounds, or teleconferences. Now, with new broadcasting technology, the Center for Health Ethics and the MTN will be able to reach a much broader group of professionals and provide CME credits at their workstation.

The Center for Health Ethics will be offering lectures from the likes of Dr. Fleming, Dr. Pellegrino, Dr. Samuel Wong, and various Grand Rounds presenters.

To access the database of viewings offered, please visit our website at www.ethics.missouri.edu or www.telehealth.muhealth.org for instructions on how to access these resources as well as the dates and times of the offerings.
Publications, Abstracts, Presentations, and Awards

Center for Health Ethics Faculty Recent Publications:

Brandt, Lea C. and Deborah Slater. Combating Moral Distress. OT Practice, 14, 2.


Center for Health Ethics Faculty Recent and Upcoming Presentations:

David Fleming will present “Altered Standards of Care,” Telehealth Training Presentation to the Missouri Telehealth Network June 23, 2009


Center for Health Ethics Faculty Awards:

David Fleming: Received the Certificate of Excellence awarded by the University of Missouri Health Care for exemplary service.

Clay Anderson: Received the national Leonard Tow Award (story on page 3).
Our Mission:

To improve the health of the public through the development of patient-centered programs related to ethics and professionalism in education, research, clinical service, and organizational performance.

Goals:

I. Promote patient-centered health care by providing leadership for clinical ethics.

II. Establish and promote initiatives in health ethics and professionalism.

III. Develop innovative programs to enhance relationships between patients and health care professionals.

IV. Promote ethical behavior of organizations by encouraging principles of organizational ethics.

V. Collaborate with faculty and other key individuals in developing research.

The modern challenges of healthcare require an increasing awareness of the ethical and moral issues that encompass not only the welfare of the patients but also the functioning of health care organizations, and the role of research in society. Health care ethics has also evolved as a crucial component in academic medicine given the related challenges of medical education, training and research. The MU Center for Health Ethics seeks to address these difficult issues through dialogue across multiple related disciplines, as well as in the broader academic and public community.

Our New Location on the Northwest corner of UMHC

Until Next Quarter: The Ethics of Surrogacy: Daniel Hauser

The story of the 13 year old Sleepy Eye, Minnesota cancer patient, Daniel Hauser, is that of an ethical emergency as well as a medical emergency. Diagnosed with Hodgkin’s lymphoma, a curable form of cancer which has a 95% success rate of cure over a five year period, his mother Colleen Hauser, refused treatment for her child after one chemotherapy treatment. Compounding to the complexity of the situation, Daniel himself agreed to refuse treatment as well.

But why did they refuse? All of the indicators of science and medicine show a highly optimistic outcome. As it related to Daniel, chemotherapy shrunk the tumor giving fact based evidence of the success of conventional treatment. Yet, the Hausers refused in the name of religious freedom and left the state. Consequently, the doctors that had been treating the young man were required to report the situation to Brown County Family Services which in turn has led to a court battle.

Mrs. Hauser, and Daniel, have claimed that they believe in a holistic form of medicine, specifically in Nemenhah, a form of Native American medicine. However, after returning to the state and facing a judge assigned to the case, Daniel was deemed to have little understanding of his form of cancer nor the form of treatment he had chosen nullifying the religious freedom argument.

The young man’s life is clearly in danger and the courts had to intervene legally. However, there is another struggle. Ethically speaking, who should make the decisions for Daniel? He, at 13, and incapable of understanding the complexities presented would not be deemed competent in the decision making process. But who is competent? His mother Colleen, although competent, made a rash decision that could have ended the young man’s life based on a religious belief. Who is left, the courts?