
Ethics in Extracorporeal Life Support



Extracorporeal life support has had a significant impact on modern medicine. However, the use of this technology has significant ethical challenges.

In this review, the authors identify three ethical discourses: trials and evidence accompanying the use of ECLS, the ECLS allocation, decision-making and limiting care and death on ECLS and ECLS in organ donation. They then provide a narrative synthesis of all major arguments extracted and group into these three discourses.

The use of ECLS has changed quite significantly since the 1970s. The technique has been miniaturised and is now more durable and biocompatible. It has also evolved from an experiment to a standard treatment option for critical respiratory or cardiac failure. However, the social costs of ECLS remain high, and its appropriateness is questioned quite frequently. There are also ethical concerns regarding its use.

The authors discuss the early works by Bartlett and Lantos et al., who describe how ECLS research is linked to ethical prerequisites and consequences. Carlisle et al. oppose the clear-cut understanding of futility. Abrams et al. advocate the ECLS-prioritisation model, while Supady et al. prefer the egalitarian approach of Norman Daniels, which is based on the right to participate in a fair and transparent allocation process. Ross and Halpern et al. depict the notion of death as pragmatic and alterable.

All these studies and reviews contribute to the conceptualisation of ECLS as a matter of dialogue and should be carefully considered by legal and healthcare professionals, administrators, patients, surrogates, politicians and the public. These arguments could be relevant in certain situations and should be considered, especially during a pandemic. Overall, arguments related to the ethical use of ECLS can be of value and can help improve the future research design in clinical illness.

Source: [Critical Care](#)

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