
ANNOUNCEMENT | OBVESTILO

UDC: 172

Polona Tratnik

ÉGALITÉ

V kontekstu pandemije COVID-19 so se nekatere države znašle v katastrofalni situaciji, ko se je bilo medicinsko osebje primorano soočiti z vprašanjem pravične oziroma ustrezne razporeditve zdravstvenih virov, ki so bili bolj omejeni kot v običajnih razmerah. Za orientacijo glede ravnanja medicinskega osebja v okoliščinah krizne zdravstvene oskrbe je marca 2020 Italijansko društvo za anestezijo, analgezijo, oživljanje in intenzivno nego (SIAARTI) izdalo seznam priporočil in etičnih razmislekov za boljšo

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Égalité je umetniško-raziskovalni projekt avtorice članka v procesu nastajanja. Najavljen je bil na razstavi *Živi objekt* v Mestni galeriji Ljubljana (2. 9. 2020–1. 11. 2020). Razstava rezultatov projekta je predvidena v marcu 2021 v Galeriji 001 (v sklopu Kulturnega centra Tobačna 001). Za strokovno svetovanje pri projektu se avtorica zahvaljuje prof. dr. Bojani Beović.

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informiranost kliničnih zdravnikov kritičnih pacientov COVID-19 (Vergano et al. 2020a, Vergano et al. 2020b), nato je več znanstvenih skupin po svetu objavljalo znanstvene članke, v katerih so podale konkretna priporočila za ravnanje v kriznih situacijah. Oblikovali so se triažni principi in kriteriji za krizno oskrbo, ki so bili sicer delno že formulirani pred desetletjem za scenarij pandemije gripe in njej podobnih bolezni (Bayer et al. 2011, White et al. 2009), v marcu leta 2020 pa so bili posodobljeni za okoliščine COVID-19. Kot marca 2020 povzema skupina raziskovalcev (Emanuel et al. 2020), je prvo vodilo v pandemiji COVID-19 pri odločanju glede tega, kdo dobi zdravstvene vire, maksimiranje koristi. Pri tem gre za dve vodili: ohraniti čim več življenj – ta kriterij ima absolutno prednost – in ohraniti največ življenjskih let. Zdravniki naj bi se pri odločanju za zdravljenje naslonili tudi na oceno pacientove bodoče kvalitete življenja. Stara vodila, ki so temeljila na enakosti, so bila postavljena v ozadje. Načelo, ki pravi: »Kdor prej pride, prej dobi,« ni bilo priporočeno, naključen izbor pa zgolj v primeru, kadar imajo pacienti enako prognozo. Pomembno vodilo pri izboru je promocija in nagrajevanje instrumentalne vrednosti pacienta, namreč v smislu, da ima prednost tista oseba, ki koristi drugim – predvsem so tu mišljeni zdravstveni delavci. V razpravah so raziskovalci izpostavljali prioritete kriterijev, spodbujali zdravstvene delavce v prvih vrstah k smotrnemu ravnanju in jih pomirjali z nagovorom, da je etično tudi odvzeti zdravstveno oskrbo pacientu, če jo zagotovijo drugemu z bolj obetavno prognozo.

Pandemija COVID-19 nas je kot družbo prisilila v ponoven razmislek o razsvetljenskih načelih in o možnostih njihovega družbenega uresničevanja. Ko Tzvetan Todorov povzema razsvetljenska načela, v skladu z njimi misel o svobodi in univerzalnosti opredeli takole: »vsi ljudje pripadajo isti vrsti in imajo kot takšni pravico do enakega dostojanstva« (Todorov 2006, 205). Osnovo je definiral Jean-Jacques Rousseau: »[D]ružbeni sporazum med državljani ustvari tako enakost, da se vsi obvežejo pod istimi pogoji in morajo uživati iste pravice.« (Rousseau 2001, 37)

Projekt *Égalité* tovrsten razmislek o naši družbi kot razsvetljenski in demokratični izziva v današnjih razmerah ter dileme, s katerimi se je doslej soočala medicinska stroka, ki jih je omejevala predvsem na medicinske parametre, pogloblja in naslavlja na širšo družbo.

Bibliografija | Bibliography

Bayer, Ronald, Ruth Gaare Bernheim, LaVera Marguerite Crawley, Norman Daniels, Kenneth Goodman, Nancy Kass, Bernard Lo, Sara Rosenbaum, Jennifer Prah Ruger, Pamela Sankar, Marion Cassady Wheeler in Leslie Wolf. 2011. *Ethical Considerations for Decision Making Regarding Allocation of Mechanical Ventilators During a Severe Influenza Pandemic or Other Public Health Emergency*. https://www.cdc.gov/os/integrity/phethics/docs/Vent_Document_Final_Version.pdf. Zadnji dostop: 1. 10. 2020.

Emanuel, Ezekiel J., Govind Persad, Ross Upshur, Beatriz Thome, Michael Parker, Aaron Glickman, Cathy Zhang, Connor Boyle, Maxwell Smith in James P. Phillips. 2020. »Fair Allocation of Scarce Medical Resources in the Time of Covid-19.« *The New England Journal of Medicine*. 23. 3. 2020. DOI: 10.1056/NEJMSb2005114. Zadnji dostop: 1. 10. 2020.

Rousseau, Jean Jacques. 2001. *Družbena pogodba*. Ljubljana: Krtina.

Todorov, Tzvetan. 2006. »Duh razsvetljenstva.« V D'Alembert, Jean le Rond, Denis Diderot in Tzvetan Todorov, *Uvod v Enciklopedijo. Duh razsvetljenstva*. Ljubljana: Studia humanitatis. 297

Vergano, Marco, Guido Bertolini, Alberto Giannini, Giuseppe R. Gristina, Sergio Livigni, Giovanni Mistraletti, Luigi Riccioni in Flavia Petrini. 2020a. »Clinical Ethics Recommendations for the Allocation of Intensive Care Treatments in Exceptional, Resource-Limited Circumstances.« *Society of Anesthesia, Analgesia, Resuscitation, and Intensive Care (SIAARTI)*. <https://bit.ly/2UyQ6I3>. Zadnji dostop: 1. 10. 2020.

Vergano, Marco, Guido Bertolini, Alberto Giannini, Giuseppe R. Gristina, Sergio Livigni, Giovanni Mistraletti, Luigi Riccioni, Flavia Petrini. 2020b. »Clinical Ethics Recommendations for the Allocation of Intensive Care Treatments in Exceptional, Resource-Limited Circumstances: the Italian Perspective During the COVID-19 Epidemic.« *Critical Care* 24. 22. 4. 2020. <https://ccforum.biomedcentral.com/articles/10.1186/s13054-020-02891-w>. Zadnji dostop: 1. 10. 2020.

White, Douglas B., Mitchell H. Katz, John M. Luce in Bernard Lo. 2009. »Who Should Receive Life Support During a Public Health Emergency? Using Ethical Principles to Improve Allocation Decisions.« *Annals of Internal Medicine* 150 (2): 132–138. DOI: 10.7326/0003-4819-150-2-200901200-00011. Zadnji dostop: 1. 10. 2020.

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