

Public health. Who should get influenza vaccine when not all can?

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Abstract:

Rather than thinking only about saving the most lives when considering vaccine rationing strategies, a better approach would be to maximize individuals' life span and opportunity to reach life goals.

Comments:

Strengths/uniqueness: A concise and provocative article that briefly reviews ethical principles that have been used to allocate scarce resources. The authors challenge the save-the-most-lives principle advocated by the National Vaccine Advisory Committee and the Advisory Committee on Immunization Policy. In its stead they propose adoption of the life-cycle principle with modifications based on investment and public order. This article provides a topical review of principles that could serve to guide formulation of policies on allocation of scarce palliative resources under alternative scenarios.

Weakness: Central to the review and adoption of ethical principles is perspective. Whose values should be used to govern policies regarding allocation of scarce resources? Patients, taxpayers, clinicians? This article represents the viewpoint of the authors but does not provide practical guidance regarding the process of identifying principles and ratifying policies.

Relevance to Palliative Care: Ethical principles/frameworks are required and should be acknowledged for the development and review of admission and discharge planning processes. Of particular relevance to the tertiary palliative care unit is the continued pressure to allocate beds for use during periods of city-wide shortages (code purple) and the potential for allocation of beds during emergencies (such as pandemic influenza).