Author(s): John Chamberlin

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We’ll be talking about rationing vaccines and other treatments in the face of a pandemic. This is another case of figuring out what justice/effectiveness/etc requires in a situation where you face some serious tradeoffs (or cases of some values trumping others). I’d like the presenters to address two topics (you can figure out for yourselves who does which):

1. Gostin (who, incidentally, will be giving a lecture on campus in late January) gives a long list of ethical criteria that might guide rationing choices. The tough job is to figure out how to prioritize them, weight them, or whatever you’d do to make the hard choice. Give us your answer, waffling as little as you can.

2. Emanuel and Wertheimer. (Emanuel is now the special adviser for health care at the Office of Management and Budget; he is also Rahm Emanuel’s brother; Wertheimer is a philosopher and author of the chapter on exploitation we’ll read in a few weeks). They argue: “The save-the-most-lives principle may be justified in some emergencies when decision urgency makes it infeasible to deliberate about priority rankings and impractical to categorize individuals into priority groups. We believe that a life-cycle allocation principle (see table on page 855) based on the idea that each person should have an opportunity to live through all the stages of life is more appropriate for a pandemic (8, 9). There is great value in being able to pass through each life stage—to be a child, a young adult, and to then develop a career and family, and to grow old—and to enjoy a wide range of the opportunities during each stage.” Evaluate their claim. Everyone: think about whether the life-cycle allocation principle is compelling in other health-care situations. What is its relationship to the QALY concept?