

The cancer client in times of the COVID-19 pandemic: a bioethical analysis

El cliente de cáncer en tiempos de la pandemia de COVID-19: un análisis bioético

O cliente oncológico em tempos de pandemia da COVID-19: uma análise bioética

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With the worldwide dissemination of the COVID-19 pandemic declared by the World Health Organization (WHO) in January 2020, there was a need to rethink the configuration of health care, becoming a Public Health Emergency at national and international level^{1,2}.

With a set of symptoms characterized by fever, headache, diarrhea, dry cough, anosmia, ageusia, muscle pain complaints caused by the coronavirus, there was still the advent of the importance of taking and considering comorbidities, including cancer. In this context, there was an analysis of new guidelines focused on cancer client care to resolve frequent situations of symptoms of nausea, vomiting, diarrhea, constipation, fatigue, dyspnea, and pain, which makes the diagnosis of COVID-19 difficult because the cancer client being treated with anticancer drugs may have similarities in some symptoms^{3,4}.

It is noteworthy that in the face of issues aimed at the cancer client, Bioethics as an epistemological field brings us relevant discussions in the social sphere linked to the human being's right with a view to their autonomy. In this sense, Bioethics brings us ethical tools that favor dialogue in the different realities of cancer clients, striving for the right to care for their needs and the availability of resources aimed at understanding the vulnerability of this clientele, providing the opportunity for inclusive actions with important demands in times of the COVID-19 pandemic.

In this epistemological framework, Bioethics and Oncology dialogue in the interdisciplinary field with a view to providing comprehensive care to people with cancer. In this sense, the challenges in the discussion between these two areas in the COVID-19 pandemic became relevant to list a visit to the individual's right to autonomy with a view to a necessary social support, vulnerability analysis and the decision-making character of palliative measures that must converge with the interests of the patient and his family⁵.

With this important reality in the COVID-19 pandemic, the challenges are also articulated in the daily care of the health team towards cancer patients due to a new scenario and adaptations to new care routines, the uncertainty regarding the treatment⁶.

In this sense, it is necessary to consider health professionals who analyze the specificities of each cancer patient for decision-making with respect to autonomy, assuming a care focused on the collective. Always in the case of the COVID-19 pandemic, social distancing, and recognition of warning signs, monitoring the clinical evolution are essential. Always avoiding in bioethical reading a reductionist view that induce deliberation from a single principle⁷.

However, the information on lethality in different population groups and in different regions of Brazil is not clear, particularly those people with cancer and infected by the coronavirus in regions lacking resources.

Methodology

It is a reflection article with a descriptive qualitative approach, from the perspective of the cancer client in times of the COVID-19 pandemic, with a Bioethics analysis focused on autonomy as a principle of human dignity. Its interaction guideline is focused on dialogue that guides relevant discussions about cancer clients during the COVID-19 pandemic, translated into its principles: beneficence, autonomy, and justice.

With the purpose of envisioning learning opportunities, relevant discussions and knowledge exchange, there was an opportunity to expand discussions about cancer patients in their Bioethical aspects for ethical conflict management, vulnerability analysis and professional qualification aimed at education and health, as well as in academic teaching.

This reflection article makes a general approach to Bioethics without, however, intending to exhaust the subject. It is important to give an overview of the discussions that have arisen nowadays and have been the target of questions and reflections in bioethics focused on Oncology Nursing. The appropriation of Bioethics and its concepts contained in its fundamental principles helps in the analysis of daily care practices for this population, especially in times of the COVID-19 pandemic.

It is based on a narrative with discussion of the following relevant aspects: The bioethical challenges with the cancer client in the COVID-19 pandemic and respect for autonomy and bioethics.

Results and Discussion

Bioethical challenges with the cancer client in the COVID-19 pandemic

There are several challenges facing the cancer client in the bioethical perspective with a view to improving the relationship between these areas, as well as to ensure the application and dissemination of bioethical principles (autonomy, beneficence, and justice) in their full sense, in view of the need of an investment in formal education in bioethics and in interpersonal and interpersonal relationship skills between doctor and patient⁵.

From this perspective, there is also the challenge to evolve and understand the COVID-19 pandemic, which led us to new discoveries and information, which can provide changes and adaptations in health care aimed at cancer patients and professionals involved in care⁷.

Furthermore, with the recent discovery of COVID-19 regarding the evolution of the disease and the possible consequences of sequelae, it has led us to understand that it is necessary to advance in a large quantity and quality of scientific production related to the theme, especially on the cancer client. The constant changes in the approach to the pandemic require great adaptive capacity in the face of the scenario that is being designed on a daily basis⁷.

Another relevant aspect that also poses a challenge is the limitation of data on types of cancers and staging, in addition to information on the type of treatment performed, rather than comparisons between cancer and non-cancer patients with COVID infection-19. These analyzes could

reveal additional information to further explore risk factors and serious events in cancer patients with COVID-19⁸.

However, with the bioethical discussion, it is highlighted that the greatest severity is related to the access of cancer patients to health services, regarding the slowdown in the diagnosis and regulation process for services of greater complexity, social vulnerabilities, or even lack of availability of assistance to this type of clientele⁸.

In this way, the discussion of the principles of bioethics is expanded in the confrontations that generate discomfort, supposedly in favor of combating COVID-19, leading to reflection on the possibility that the ethical principle of justice can bring ready answers, which probably would not apply at times complex and that demand agility for the solution, as in this pandemic⁹ and, even more when it relates to the cancer client.

The greatest concern is related to the problems of social vulnerability of the Brazilian population in accessing health services, which is even more concerning when we talk about the care of cancer patients who need an immediate solution, but in the situation prior to the COVID pandemic. 19 was already critical. With the onset of the pandemic, the situation has worsened and will lead us to a very worrying future analysis for those people who have not been able to get decent access to their treatment. In other words, there is a reality of disrespect for bioethical principles and that will require future studies with an emphasis on the context of bio law.

During this real situation, the pandemic came to throw open the Brazilian social inequality (which was already taking place). Bioethics brings us a look at the existing inequalities that must be tackled, and it is important to realize that this epistemological aspect is concerned with access to the population, health, and the preservation of the rights of the multidisciplinary team that are on the so-called front line of combating the pandemic⁹.

Our society conceives of an ethics that are alien to the ideals of justice, equal opportunities, and collective interests, disregarding the effects of these policies on the lives of the poorest population to adhere to the shallow meritocratic vision, which ignores the principle of equity and omits the consequences of inequalities social for health¹⁰.

Thus, cancer patients need direct and emergent interventions in the case of confirmation of coronavirus infection, and the treatment is discussed in the light of benefits and harms with scientific evidence based on bioethical principles. It is necessary that, in view of the COVID-19 pandemic, studies on oncology be carried out, to support the approach and interventions of the teams regarding the patient¹¹.

Respect for autonomy and bioethics

When we deal with the patient's right, the Bioethical approach is focused on the importance of knowledge of bioethical principles, or even their practice in the oncological context. Of all the principles in its broad conceptual and practical discussions, autonomy is the most problematized, because it relates to the cancer patient's decision-making power⁵.



Therefore, starting from this premise constituted by the principles of autonomy focused on patient-centered care, the issue of human dignity, the patient's responsibility, the right to autonomy in shared decision-making supported based on information and freedom, demonstrate the need for adequate public policies in the field of health, which are relevant at this time of fighting the pandemic⁹.

In the context of the pandemic, the application of the principles (beneficence, autonomy, and justice) depends on the capacity of discernment of the actors involved: patient, family, and health professional. This dependency "flexes" these precepts, which cannot be applied blindly and regardless of the context¹².

In this sense, it is necessary to think about comfort with an emphasis on bioethics, favoring a change in thinking and actions, leading to a holistic practice that is comforting and humanized to the patient. From this perspective, the development of bioethical principles that can guide health professionals to decide and act correctly, based on autonomy in its entirety, must be favored¹³.

Another relevant aspect is the encouragement in the family/social scope of the oncological patient's relational autonomy to exchange a continuous dialogue and encourage their choices in the current pluralist world. For this to happen, it is also necessary to provide those involved with a support network centered on economic realities, avoiding bioethical conflicts that generate possible cases of negligence or non-compliance with the right to autonomy.

In a broader scope, there is a historical delimitation, in which changes in mentality will be opportune, beyond boundaries that try to predetermine the organization and celebration of selfish behavior. With advances in questions about political matters, scientific advances and the organization of the current economic system will determine collective and individual behavior. Thus, it is common for changes in mentality to mark events of large proportions, such as the COVID-19 pandemic and, given its effects in the scientific field and its ability to touch human bases, demonstrate the vulnerability and finitude of life¹⁴.

Therefore, it is necessary to understand the importance of patient autonomy and its value in the development of communication and interpersonal relationships aimed at understanding vulnerability in various aspects, whether in the patient's perspective, in access to health services, in health professionals. health or even in the fight against the pandemic, by COVID-19⁹.

The strategies adopted to maintain quality of life and patient care in chemotherapy during the COVID-19 pandemic period should always be consistent with the importance of the participation of the entire multidisciplinary team in patient care¹⁵.

The prevention and mediation of bioethical conflicts emerge as a dynamic and opportune way in the case of cancer patients. These need a structure with strategies set up by the health team, with the knowledge and training to advance within the parameters provided for in Brazilian legislation, facing the limitations existing in our society.

These limitations are found in today's complex life context and many situations are beyond their care activities

in which there is precarious access to available public health services. There is a need for public policies that reduce existing inequalities (before the pandemic) but envision a perspective for the future, already foreseeing the social impact that COVID-19 will have on our society.

Thus, it is also important to highlight the construction of knowledge in studies that are consistent with respect for the human person, allowing us to understand the central role of bioethics in the discussion through its principles (beneficence, justice, autonomy). The centrality of ethical and bioethical principles applicable to research must be sought to guarantee important results during the pandemic, foreseeing the situation of vulnerability, ensuring the right to informative self-determination, physical integrity, with immediate and comprehensive assistance, and human dignity¹⁶.

Therefore, we have dilemmas faced by society that often do not reach the news with great emphasis, having a real notion of the invisibility of the issues raised. If the coronavirus can infect several people, despite its social and legal effect it is unequal in different groups, with a close look at bio law, with the help of bioethics, so that the consequences of COVID-19 are mitigated⁹.

Final Considerations

To analyze the cancer client in times of COVID-19 pandemic from the perspective of Bioethics, there is a commitment of health professionals to guarantee the right of the person undergoing cancer treatment, focused on intervention in the individual with rights, with autonomy.

There is a limitation in discussions and research focused on the assumptions of bioethics regarding issues of access in its various social interfaces, requiring a deeper understanding of autonomy and vulnerability, as well as the ethical dilemmas of a person with cancer.

The promotion of strategies that help alleviate the difficulties in accessing health services should come with an analysis of support for the family with initiative for social practices that enable access to public policies in their various instances.

It is a relevant fact the importance of elaborating and analyzing welcoming strategies, using public health policies available in the Brazilian panorama, aiming at autonomy and bio law. The look at this audience is focused on promoting the quality of life of cancer patients during the COVID-19 pandemic.

It is also important to verify that in these situations in which the multidisciplinary team experiences conflicts in verifying the context in which there is a difficulty in carrying out care due to lack of resources from health institutions. Furthermore, it is important to provide a support network for the family, whether this assistance in the field of care and medication, as well as financial and social security and the pertinent idea of providing the necessary help in the daily economic crisis.

We can consider that the public sectors of cancer care need to turn their attention to the health of patients undergoing cancer treatment, in relation to questions about the applicability of public health policies through the Unified



Health System. It is important to carry out investigations on this theme contributing to the preparation of health professionals who work, not only in emergency services, but throughout the network that practices cancer patient care.

The issues exposed in this article are relevant to the field of Bioethics and bring to light the concern with cancer patient care and the need to postulate the importance of

integrating the multidisciplinary team, considering the discussions in Bioethics on the principles of beneficence, of autonomy and justice. Discussions relating to the field of Bioethics have been increasing and are beginning to be an important tonic in epidemiological research on situational diagnosis on the growing concern with cancer in the context of health practices and during the COVID-19 pandemic.

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