

Case Study #10: The Costs and Effectiveness of Neonatal Intensive Care

Peter Budetti, M. D., J.D.
Peggy McManus, M.H.S.
Nancy Barrand, B.A.
Lu Ann Heinen, B.A.

Health Policy Program
University of California, San Francisco

PREFACE

It is frequently stated that neonatal intensive care gives rise to serious ethical problems. These problems have been discussed in an extensive literature (39,62,108, 120). In general, the ethical discussions have focused on the problem of deciding whether to initiate or to terminate life-preserving treatment in the case of a particular infant (39). These discussions do not make clear how, and to what extent, the ethical problems affect policy determinations about the efficiency of neonatal intensive care (56,70). Presumably, the endemic presence of such tragic decisions—"to live or let die"—leads commentators to suggest that ethics foreclose the possibility of cost-benefit analysis in neonatal intensive care. Is it ethical to allow cost considerations to dictate life or death? Is it ethical to subordinate the care of an individual to criteria for maximizing social benefit? Certain authors wholeheartedly repudiate any thought of a positive answer (104); others are quite ready to embrace an affirmative answer as the only ethical one (46). The majority of authors in the ethical literature raise the questions but refrain from extensive analysis.

At present, several problems impede further analysis of the ethical issues as they relate to public policy. The first problem is the lack of factual information or clear implications of information about neonatal intensive care. Without knowing whether infants are being helped or harmed, in what numbers, to what extent, and at what costs, debates over ethics are entirely speculative. Second, the lack of conceptual clarity about the nature of benefit and costs, about risks, about prognoses, etc., often makes ethical discussions unrealistic (63). Third, the ethical, legal, and political significance of "tragic choices" that expose some individuals to the risk of death in order to benefit others are only now beginning to be discussed (22).

Thus, although there are certainly ethical problems within neonatal intensive care, it is unclear how they influence policy decisions. For example, it is certainly not obvious that cost-benefit studies and policies based on conclusions of these studies are necessarily excluded by ethical considerations (15). Careful analysis of the ethical issues requires more complete factual information, clearer concepts, and a firmer grasp of the values which public policy does and should promote. Prolonged discussion of the clinical dilemmas of neonatal intensive care has led to more definitive statements of moral policy in the nursery (31). Intense and critical discussion of the ethical issues in public policy concerning neonatal intensive care might be similarly productive.

Albert R. Jonsen, Ph. D.