



CONSELHO NACIONAL DE ÉTICA PARA AS CIÊNCIAS DA VIDA
NATIONAL COUNCIL OF ETHICS FOR THE LIFE SCIENCES
Presidency of the Council of Ministers

46/CNECV/05

**OPINION Nº 46 OF THE NATIONAL COUNCIL OF ETHICS
FOR THE LIFE SCIENCES**

**OPINION ON THE OBJECTION TO THE
USE OF BLOOD AND BLOOD
PRODUCTS FOR THERAPEUTIC
PURPOSES ON RELIGIOUS BASIS**

(June, 2005)



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Considering that:

- a) the use of blood, as well as blood components or products, has precise therapeutic indications including clinical situations in which there is the imminent risk of death of the patient,
- b) the administration of blood and blood products thus occurs, and frequently, in medical emergency situations, as an integral part of the measures aimed at saving the patient's life,
- c) these therapeutic measures may be necessary in patients who are clinically unconscious or whose cognitive functions are severely limited, which conditions the exercising of autonomy and obtaining of consent,
- d) the Jehovah's Witness religious confession, based on its interpretation of the Bible, is opposed to the members of its faith receiving treatment in which whole blood or blood products are used. The assumption of this refusal can cause conflicts between doctors and patients or relatives of the patient,
- e) The conscious and voluntary acceptance of blood transfusion on the part of the members of the Jehovah's Witnesses is considered to be an act which violates the principles of that religious faith,
- f) Practising members of the Jehovah's Witnesses religious faith have decided to declare their decision of refusal in advance, in the form of a signed document entitled "Advance Medical Directive"/ "Release from Responsibility"



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The CNECV is of the opinion that,

1. The doctor has the recognised duty to act in the patient's best interests, using the means indicated to the patient, so therapeutic acts destined to save life, namely the administration of blood when clinically indicated, are justified.
2. Autonomy implies the patient's capacity to express preferences, namely those arising from the patient's religious convictions.
3. The refusal to accept transfusions of whole blood and blood products falls within the right of the patient to decide upon the health care he/she wishes to receive, on condition that the patient's capacity to make that decision is recognised and that the conditions necessary to exercise that choice exist.
4. The refusal of treatment with whole blood and blood products in a life-threatening situation may only be considered by the doctor when the person to be treated expresses refusal explicitly and freely.
5. For any treatment the right to prior clarification exists, which, in the event of refusal, should be repeated.
6. In the event of a valid refusal, it is the duty of the doctor and/or other health practitioners to respect it.
7. Although there is no requirement for a specific type of consent, it is strongly recommended, as a means of corroborating that consent, that it be given in a writing form.



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8. The advance medical declaration is merely an indication of will and informed consent must still be obtained providing effective clarification of the consequences of refusing treatment.
9. In life threatening emergency situations in which the appropriate consent cannot be obtained, the priority is given to the duty to act arising from medical ethics principle of beneficence.
10. Patients under judicial disability, mental disorder or minors who lack the necessary discernment, cannot be considered competent to assume decisions about health care, hence justifying intervention without obtaining consent, which is aimed at saving their lives or preventing sequels, namely the administration of whole blood or blood products.
11. In the above situations authorisation should be requested from the legal representatives, and, in the event of refusal, the duty to act based on the principal of beneficence should prevail, given that that authorisation does not correspond to the exercising of personal and non-delegatable autonomy, without prejudice to the recourse to legal channels when indicated.

Lisbon, 27th July, 2005

Paula Martinho da Silva

President

Conselho Nacional de Ética para as Ciências da Vida
(National Council of Ethics for the Life Sciences)

This opinion was approved in a plenary session on the 27th June, where, as well as the President, the following committee members were present: Daniel Serrão, Germano de Sousa, João Lobo Antunes, José Pedro Ramos Ascensão, Jorge Biscaia, Jorge Sequeiros, Jorge Soares, M^a Céu Patrão Neves, M^a Fernanda Henriques, Marta Mendonça, Michel Renaud, Miguel Oliveira da Silva, Rita Amaral Cabral.