

Review of: "Relevance of Medical Ethics in Public Health: Case Study of Polio Eradication"

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This is very important article written by domain experts that have been involved in this issue for decades. It contains extremely significant information and analytical insights and raises critical questions that have remained unanswered to this day even though suffering has been caused to so many as a result of a failure of public health diligence.

One main critique I have is with respect to readability for the relatively lay reader; the entire article is peppered with short staccato categorical and judgemental statements without reference that appear in the middle of sections that are otherwise dealing with facts and evidence that would lead the reader to make up their own minds about the ethical failures of the public health intervention being analysed. This not only disturbs the flow; it also creates unnecessarily a sense of bias on the part of the authors. Some examples; and there are many, are the following sentences "Harm through public health is stark", the sentence "In summary, the vaccine-choice did not conform to principles of medical ethics" - which comes in the section on "The beginnings and progress of Global Polio Eradication Initiative", "Compassion was conspicuously absent". The point is not to do away with the views of the authors, but to include these views in the conclusion after the case has been presented.

There are other issues with respect to article flow and segmentation with a high level of repetition, disjointedness and also overlap. To give an instance: the introduction starts with a definition of terms, breaks into arguments against the OPV briefly, and ends with a sentence hanging in the air about "Equity refers to the fair distribution of both benefits and risks if any" that has no links to anything related to any maldistribution before or after it, till another section is read close to the end of the article.

The suggestion would be to keep the introduction to explaining concepts, provide the factual detail, explain the historical context and conclude with the opinions and questions that are peppered throughout. By the time the conclusion is reached, the readers are well inclined to agree since the facts would have been placed on board.

In terms of a related but more substantive issue, one of the main premises of the article seems to be to say that public health has hitherto been kept independent of medical ethics and that should not be the case. This premise is displayed by statements like "As a humanitarian mission, polio eradication is 'public good' -- we tend to value it above medical ethics. Basis of such confidence is the perception that public health can do no harm to individuals". As a public health practitioner, the reviewer does not find this statement quite correct or fair. At a minimum it would require a reference for it not to seem highly biased. It is customary to do a cost-benefit analysis for public health interventions. Whether it is done well or not is a different issue. The domain of ethics in public health is a known entity. To suggest that ethics is given

better treatment in medicine than in public health is not borne out by practice and current theory.

Instead, the question that is asked elsewhere in the article - "Was polio eradication public health or clinical trial?" is exactly the challenge that public health deserves to face. This should get much more leverage in this article rather than the usage of a fairly misplaced distinction between medicine and public health, human rights and public good. However, the title too displays something of a contradiction since clinical trials are well within the domain of public health itself... The question might have been absolutely spot-on as whether this was a public health intervention or a stealthy national population-level field trial that escaped the ethical rigours supposedly placed upon clinical trials. Public health as a discipline is not conceptually at fault here - its practice is as amenable to politics, negligence, vested interests as any other, including the field of medicine, that in many other contexts, has even more hegemony than public health.

The article proves more than sufficiently that the case for using OPV for polio eradication is simply poor public health; by all existing public health standards. This choice has been unethical by dint of its lack of transparency and concern for the suffering of persons affected by VAPD/VDVP. The conclusions and recommendations for due public health processes; including the basic evaluation of existing evidence, as well as processes that examine ethics are perfectly valid.