

History of Bioethics in Panama

Historia de la Bioética en Panamá

História da Bioética no Panamá

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ABSTRACT: Since 1998, bioethics in Panama has accumulated legal texts, teaching and clinical experiences. After the presentation of antecedents of bioethics in Panama, we present bioethics in public services and in the private sector, education and the laws on bioethics. And we conclude with considerations about the future of bioethics in the country.

KEYWORDS: Bioethics-history. Bioethics-Panama. Bioethics-education.

RESUMEN: A partir 1998, la bioética en Panamá ha reunido textos legales así bien experiencias de ensino e investigación. Después la presentación de antecedentes de la bioética en Panamá, describimos la bioética en los servicios públicos e el sector privado, la educación en bioética e leyes que la asimilan. Nuestra conclusión discute aspectos del futuro de la bioética en el país.

PALABRAS LLAVE: Bioética-historia. Bioética-Panamá. Bioética-educación.

RESUMO: A partir de 1998, a bioética no Panamá tem provocado o surgimento de vários textos legais bem como de experiências de ensino e de pesquisa. Depois da apresentação de antecedentes da bioética no Panamá, descrevemos a bioética nos serviços públicos e no setor privado, a educação em bioética e as leis que a incorporam. Nossa conclusão discute aspectos do futuro da bioética no país.

PALAVRAS-CHAVE: Bioética-história. Bioética-Panamá. Bioética-educação.

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INTRODUCTION

Panama has subscribed to all the international protocols and they have a legal force in the country. *The Universal Declaration on Human Rights, The Declaration of the Rights of the Children, the Declaration of San Jose about Human Rights in Latin-America, the Convention for The Elimination of all Forms of Discrimination against Women constitute, along with the National Constitution of Panama*, the legal bases for any policy about health and dictate their ethical values.

However, until 1992, the academic research about medical practice and behaviors and about ecology and global bioethics was few and far in Panama. The prevalence of science as the obligatory road to development and modernity was widely accepted, and problems were treated as mere accidents without importance. From 1972 on, the state adopted a benevolent and paternalistic mode of health services that impacted on the relations between doctors and patients. The political crisis between 1987 and 1992 affected these relations, and different sectors of the population started to criticize the health sector.

In 1992, an investigation about malaria was conducted in an indigenous region of the country, and the investigators (Panamanians and US-citizens) took some samples of tissues for genetic tests in United States without individual and tribal consent. Informed about this abnormality, Panamanians doctors contacted the Indigenous Congress and its advocates to oppose the investigation. But they could not challenge the investigation in Panama, and it was a Californian Court that condemned the US-investigator and stopped the investigation (CEALP-Centro Internacional de Investigaciones para el Desarrollo/Internacional Development Research Centre, 1993). In Panama, it was the first reflection about ethics of investigation in indigenous populations and informed consent, between doctors, advocates and representatives of the society. But the discussion remains confined to human rights' advocates. No one had a formation in bioethics in the country and the topic was perceived as a problem of developed countries. After 1992, people started to discuss about health problems and mainly about bad treatments from doctors in health setting, but it was done mainly in the media.

In 1998, Dr. Aida Libya Moreno de Rivera, Minister of Health, accepted the proposition of the Pan-

American Health Organization (PAHO) to send Doctor Picard Ami (specialist in psychiatry, Chief of the Cathedra of Deontology and History of Medicine of the University of Panama) to a course about bioethics in La Havana, Cuba. When he returned to Panama, Dr. Picard Ami invited doctors and philosophers to discuss about bioethics, to organize bioethics committees in the public hospitals and to promote the formation of the National Association of Bioethics Studies.

The word bioethics has greek roots: *bios* - human life, and *ethicae* - human thinking, character and customs. In 1970, Van Rensselaer Potter considered bioethics as the "*science of supervivence*" and "*a bridge to future*" to respond to the ecological problems of modern technology. Hellegers in the Kennedy Institute of Ethics advocated connecting thehumanistic thinking and the medical practice against medical technology. The ecological movement was poorly developed in Panama. As bioethics started from medical field, it has been influenced by the definition of Hellegers and the principles of Beauchamp and Childress⁽¹⁾.

BIOETHICS IN PUBLIC SERVICES

1. The national level

In 1998, the Ministry of Health issued a decree, the *Ministerial Resolution* Number 0573 (October 21), which "created the Bioethics Committee in every public hospital under the administration of the Ministry of Health," later published in the Official Gazette 23,663 (October 30, 1998). The Resolution used the recommendations of the Pan-American Health Organization (PAHO) to define the composition of the committee, its resources, its functions (education, consultation and normalization^(2,3)). Only one hospital, the National Institute of Oncology, applied the Resolution in 1999. The committee went through three reorganizations until 2007.

Another Ministerial Resolution on Bioethics was signed on January, 19, 1999, with the number 00496, but it was not published in the Official Gazette(a). This second resolution established that:

- Panama approved the creation of the Regional Program of Bioethics during the 37th meeting of the Directory Council of PAHO/WHO, September 29, 1993, and considered it a necessity to create a ministerial group of coordination to promote the development

For a legal effectiveness, laws, decrees and resolutions have to be Publisher in the Official Gazette. We revised all the Gazettes from 1998 to 2006 and did not find it. We present a copy of the original from Dr. Picard Ami, ABIOPAN.

of a national and international discussion about health and bioethics⁽⁴⁾.

- The creation of a *National Bioethics Commission* (CONABIO) dependent of the Minister of Health, nominating its members: the chairman of Ethics of the Faculty of Medicine of the Panama University, five national directors of the Ministry of Health, the director of *Gorgas Institute of Health Studies*, a representative of public hospitals.

- The functions of CONABIO were: education and promotion of bioethics and of the bioethics committees, consultation for the definition of public health policies.

- The members of CONABIO were designated in February 1999, but the commission never worked, because of the election of a new government.

The Ministry of Agriculture and Development published the Executive Decree n.137 of May 29, 2001 with the signature of the President, in the Official Gazette n.24,317 (June 6, 2001), which created the *National Commission on Biosecurity and Bioethics*. This Commission's goal was to promote the "Project of Law which establishes the national regulations for the development of the activities of genetic engineering and the applications of the corresponding measures of biosecurity" and the "Project of Law which establishes the national Code of Biosecurity and Bioethics". The members of the Commission were from the Ministries of Health, Agriculture, and Commerce, the institutes of research, the universities, non-governmental ecological organizations, and representatives of medical associations. As both projects were very confusing and put limits on the development of science, researchers and scientists of health and agricultural sectors objected. The law was not presented and the Commission is now working on biosecurity in agriculture and farm.

In November 2003, the Ministry of Health, through the Resolution 390, promoted the *Operational Guidelines for Ethics of Investigation*, which adopted the guidelines of the *International Commission of Ethics of the World Health Organization* (ICWHO) on this topic. In December 2003, the Law 78 created the *National Bioethics Committee of Investigation located in the Gorgas Institute of Health Studies* (CNBI-ICGES in Spanish) to guarantee the rights and the quality of life of human subject of investigation in Panama. To comply with these functions, the CNBI-ICGES has to evaluate: the scientific design of the study, the competency of investigators of the study, the

informed consent, the selection of the human subjects, the risks and benefices, and the provision of compensation for damages from the study. The Committee included doctors, pharmacists and nurses, nominated by the Minister of Health. In 2004, the Committee published its regulation, which permitted its auto-financing through the payment of a fee by the sponsors for the management of the documents. The Ministry of Health solicited from "Family Health International," a course for the members of the bioethics committees in 2004. In 2005, a commission of representative of WHO, Family Health International, and the Latin-American Forum of Bioethics Committees of Investigation (FLACEIS in Spanish) evaluated the national bioethics committee and its conclusions were presented to the committee. In 2007 the Committee nominated new members.

During this same year, the Ministry of Health started to integrate a "*social auditory of health services*", as part of the evaluation of the private services of non-governmental organizations paid by the Ministry. This *social auditory* represents 5% of the annual contract and its report is necessary for the private service to be paid. Since 2007, the *social auditory* will progressively be extended to all health services.

In 2004, the Ministry of Health created the *Office of Ethics and Security for Health Attention*, which depended on the Department of Vigilance and Regulation in Health in the General Direction of Health (www.minsa.gob)⁽⁵⁾. This Office has three objectives:

- promotion and vigilance of norms for the application of bioethics principles in investigation and in attention of health services.

- promotion and vigilance of norms for the application of ethics principles in administration and work of health professionals.

- vigilance and regulation of norms of biosecurity in health installations.

The Department has only one employee and a scarce budget. The first objective duplicated the functions of the National Committee of Bioethics in Investigation of the Gorgas Institute defined in the Law 78; the second objective duplicated the functions of the Technical and Health Council defined in the Code of Health (1946); and the third objective duplicated the functions of the Departments of Biosecurity and Health of Ambient.

The signature of a Convention of Cooperation with Japan for the development of committees for the quality of

services, redirected the functions of this department to the implementation of a specific program of work with its own budget.

Since 2004, the *National Secretary for Science and Technology* (SENACYT in Spanish)⁽⁶⁾, has been developing a financial program of national investigations evaluated by external national and international academics, using the criteria of CIOMS. The evaluators were nominated by SENACYT on academic criteria for every investigation (www.senacyt.gob.pa). SENACYT nominated six national commissions to design a strategic plan of investigations for the next five years; one of them was the *National Bioethics Commission* with Dr. Picard Ami and Dr. Sousa Lennox as representatives of bioethics organizations. The commissions had to present their proposals in 2007, but the bioethics commission was the only commission which did not present the results of its work.

Since 2006, under the promotion of the Ministry of Health and Japan, the public hospitals nominated a *Quality Commission* for the evaluation of their services. This commission is composed of: doctors, nurses, pharmacists, representatives of the clinical laboratory and of the administration, a legal assessor. The Hospital del Niño incorporated a representative of the Institutional Bioethics Commission, as an application of the 68 Law on Patient Rights and following the mission of the Quality Commission centered on the patient according to the Joint Commission on Accreditation of Healthcare Organizations. These missions are: patient rights, ethics of the organization, evaluation of patients, and assistance to patients, education and continuity of assistance. The patient rights and the ethics of the organization have to take into account the values and preferences of the patients and/or their family (including the decision to stop a treatment), to recognize the legal responsibilities of the hospital, to inform the patients about their responsibilities in the care process, and to watch for an ethical relationship between patients and the hospital. The incorporation of a member of the Bioethics Commission remained a local initiative, independent of the Joint Commission on Accreditation of Healthcare Organizations (which has no representative in Panama) and of the national Quality Commission. Until 2007, it has been unique in the public sector. For the Ministry of Health and for the other public installations, the Quality Commissions have to evaluate the functional and financial efficiency.

2. The local level

In the Hospital del Niño (the national children hospital), Dr. Jose Renan Esquivel, director, prohibited any investigation of medicament on children in 1979, as he thought that "*it was unfair to experiment with Panamanians children for money*". After he left in 1989, the new director accepted founded investigations and a committee was created to exam the protocols. From 1992 to 2003, the members of the committee were exclusively doctors: five persons, three of them professors of medicine and one specialist in epidemiology. In 1998, the commission of investigation changed its name for the *Committee of Ethics on Investigation*. In September 2002, the hospital had an administrative change, and in March 2003, the committee was restructured keeping three members of the old committee, and incorporating of the chief of pharmacies, a social worker, a nurse, a representative of the Commission of Bioethics and another from the community (www.hden.sld.pa)⁽⁷⁾. Its new name was the *Committee of Bioethics of Investigation in Health of the Hospital del Niño* (2004). The patronage approved its Regulation in 2005 and it was published in the Official Gazette in 2007. The Committee has to exam all protocols of investigation in the hospital.

In 2000, members of the institution, preoccupied with bioethics and the vulnerability of children, created a committee denominated *Bioethics Commission of the Hospital del Niño*, and solicited its recognition to the direction of the institution. Dr. Claude Vergès was nominated Coordinator of the Commission, and the Direction of the institution recognized its autonomy, but refused to give it any budget. The composition and the functions of the Commission were defined on the bases of the recommendations of PAHO/WHO for institutional committee⁽⁸⁾. During the first three years, the members dedicated themselves to self-education, and then they started to promote bioethics between doctors and nurses of the hospital through conferences and seminars. In 2004, the Commission started to discuss clinical cases. The other members of the Commission participated in local courses and education by internet.

The Commission has acquired a strong moral reputation. The Directives of the hospital approved its Regulation, and published it in the Official Gazette in 2007.

In 2004, the Institute of Mental Health created a

Bioethics Committee with both clinical and investigative functions. This committee is autonomous, under the authority of the Director of the Institute, and is working until now with the same members.

Another important public provincial hospital (Mother and Child Hospital in Chiriquí), created two committees: the *Bioethics Committee of Investigation*, which adopted the regulation of the *National Bioethics Committee of Investigation*, and the *Committee on Ethics and Evaluation* (deontological). Both committees are under the authority of the Director of the hospital; although some members changed through the years the committees are still working in 2007. The investigation committee of the hospital of the National Security Cash desk adopted the guidelines of CIOMS and the Good Clinical Practice, and it changed its name for the *Bioethics Committee of Investigation in Health*. The Committee is under the administrative order of the Sub-direction of Education and Investigation.

In 2005, the committee of investigation of the national adult *Santo Thomas Hospital* adopted the CIOMS's guidelines. In spite of the numerous administrative changes of the members of this committee, it is still working and evaluating the local protocols of investigation.

In 2006, after the conclusions of the diploma on bioethics for doctors of the National Security Cash desk, the authorities of the General Sub-Direction of Education and Investigation elaborated a proposal for the creation of the national committee of bioethics of investigation of this entity, through a convention with the *National Committee of Bioethics of Investigation of the Gorgas Institute*, and it nominated a consultant to work on a proposition of structure. The future of this committee will depend of the governmental decision for a unique health system in Panama.

3. Bioethics and bioethics committees

The history of bioethics in Panama is intimately bound to the history of bioethics committees.

The Bioethics Committees of Investigation (CBI in Spanish) in Panama as in other countries are commissioned by the national and international institutions, to maintain the ethical standards of investigation:

- the respect of the autonomy of the subjects through the information about the investigation and the signature of a consent form;

- the protection against damages during the investigation and as a consequence of it;

- the promotion of the comfort of the subjects, and the equity during the selection and the treatment of the subjects.

The references of the bioethics committees of investigation are: the *Declaration of Helsinki* (1964 and its modifications until 2002), the *Guidelines of the International Committee of the WHO* (1991, 2005), the *Good Clinical Practices* established by the Federal Food Administration of the United States for the pharmaceutical companies, and the national laws about investigation (Resolution 390 and Law 78). The local committees have to be evaluated by the national one though they were not evaluated until 2007.

The committees have the capacity to decide the approval, the postponement or the rejection of the protocols of investigation, and nobody has heard of any pressure to change their decision.

To resume, the formation of the bioethics committees of investigation in Panama in the public health installations depended on the necessity to develop clinical sponsored investigations, but the directives of each institution recognized their importance and have been respecting the autonomy of their decisions. But the budget of all the committees is depending of the fees paid by the sponsors of these investigations. There are no bioethics committees of investigation in the private sector of health, and for the National Committee, the presentation of protocols of investigation for the private sector, depends on their sponsor and investigators.

The institutional bioethics committees (BC) exist only in the public hospitals in Panama. Actually they are recognized in the classical model as the *Hospital del Niño* (HDN), or in a mixed one (BC and CBI) in the National Institute of Oncology (ION), and the National Institute of Mental Health (INSAM). They are consultative organisms, and their principal objectives are to protect the human rights of the patients and to secure the respect of the bioethics principles in the doctor and patient relationships. Their functions are:

- the education in bioethics for the members of the committees and for the members of the institution and the public. All the committees developed this topic in their institutions through regular conferences or seminars, and their representatives are participating in public discussions about a particular theme;

- the recommendations for any case of ethical dile-

mma on the consensus of doctors, nurses, the patient and his family. The inclusion of the family in the decisions is a particularity of Latin America because of the poor development of adapted local structures⁽⁹⁾. In a similar way and when necessary, representative of the different indigenous groups have been invited. The ethical dilemmas depend on the specialty of the hospital;

- The institutional bioethics committee of the ION is working with the commission of palliative care, and the national recognition of the commission is more important than for the bioethics committee.

- In the HDN, the institutional bioethics committee is discussing about pediatric topics. It is also working with the commission of palliative care.

- In the INSAM, the institutional bioethics committee has to exam the ambulatory management of psychiatric patients, and the administration of specific treatments.

- The elaboration of guidelines o general recomendations on the more frequent bioethical dilemmas, and an ethical institutional code.

Since 2004, all the public and private hospitals must present a consent form to their patients for hospitalization and procedures. The models are from the hospitals of the United States, and for surgical procedures there is one form for each different procedure. In the Hospital del Niño, the Committee published posters about the Law 68 on Patients Rights in all services opened to the public (2004); the consent form for hospitalization and procedures and the form for refusing treatment are the product of the two years of discussion and the consensus between the Committee, doctors, nurses, directors, and representatives of the families of the patients (2005).

There is also consent of confidentiality on the personal information of the patients for students and visitors of the hospital (2005). In September 2006, the Institutional Bioethics Committee of the Hospital del Niño presented the Regulation of the Functions of the Committee to the directives of the institution, which approved it, and it was published in the Official Gazette in June 2007.

The participation of the members of the bioethics committees (institutional or for investigation) is honorific, and they have the necessary authorization to assist to the courses on bioethics. In all the institutions, the members of the bioethics committees of investigation (CBI) have a free time for their meetings and a budget

for their formation. When the committees are separated and the members different in each committee, these benefits are not applied to the members of the institutional committees (CBH).

The bioethics committees have multidisciplinary members and they try to maintain the equity of gender and age. For its first establishment the members of the national committee were nominated by the Minister of Health (2003) and the members of the local committees by the director of the institution. The experience of investigation was a criterion for the members of the CBI. The members of the CBH of the Hospital del Niño were selected on the base of their experience in Human Rights, and those of the National Institute of Oncology on the base of the medical ethical values. Through the years, the new members were approached by the active members of the committees and approved by the committee after the revision of their curriculum. During the first year, they have to take a formation on bioethics or ethics of investigation. They have to be tolerant, opened to dialog and consensus, and they must not have any administrative or ethical warning. The incorporation of a member of the community and of a lawyer is the grea-test difficulty of the committees. The *National Bioethics Committee of Investigation* incorporated a lawyer and a representative of the university as member of the community.

The bioethics committees of the Social Security Cash desk, of the public hospital of the Ministry of Health, accepted a representative of the organization of volunteers who are working with the patients as member of the community; some of them incorporated a lawyer (ION, INSAM, and Chiriqui). Since 2005, the *Bioethics Committee of Investigation of Hospital del Niño* incorporated a representative of the Department for Protection of Children of the Ministry of Social Development; the first was a lawyer and in 2007 she was a psychologist. Until 2007, the member of the community in the *Institutional Bioethics Committee of the Hospital del Niño* worked in the Volunteer Association of the institution, and all the intentions to attract some other person were useless. In 2007 the committee incorporated a representative of the children department of the People Defender Bureau.

This committee, with contrast to the committees of the ION and the INSAM, has no permanent representative of the Catholic Church, to take in account the

diversity of religions in Panama and it chooses to invite a representative of the church of the patient; it invites an external lawyer for punctual consultations too.

Interviews of some of the members of institutional bioethics committees have shown that the different models of moral justification defined by Beauchamp and Childress⁽¹⁾ are coexisting between the committees and inside a particular one, dependent of the individual moral position and the experience and practice:

- the deductive model from a preexisting theory and under the influence of deontological codes and normative moral principles. This model is used by the religious fundamentalists for the discussion of clinical ethical problems, and particularly for the sexual and reproductive health of women.

- the model of induction which proceeds by analogy and decides on the base of a specific problem. This pragmatic model responds to the Anglo-Saxon utilitarianism, and it is more adapted to the "transit culture" around the Canal of Panama⁽¹⁰⁾; as it corresponds to the medical methodology for diagnosis, it is used by some committees. Luna considers that "*its linear character evidences simplifications and concretes judgments and rules are derivate from more general principles*" (1996). The permanent education and the interchange with other groups allow for a critical use of this model, and the generalization of the ethical conclusions for their reproduction. The discussions through this process lead to the adoption of the concept of responsibility and caution in bioethics decisions such as genetic and transplantation.

- The model of coherence is an integrative model about the "*balanced reflection*" and the "*theory of coherence*" of John Rawls. It is necessary to practice a "*balanced or weighted judgments*" with moral principles, which offer the less bias as possible⁽¹¹⁾. The Institutional Bioethics Committee of the Hospital del Niño considers that the Chart of Human Rights and the Convention of the Rights of the Child are offering this foundation.

BIOETHICS IN THE PRIVATE SECTOR

In 2003, the *Medical National Association* (actually the *College of Medicine of Panama*) published its Deontological Code, which fixes the rules for all the doctors in the country.⁽¹²⁾ The Code insisted particularly on some points:

- beneficence, no malevolence, respect to autonomy and confidentiality of patients;

- respect of doctors in the health services;
- solidarity between doctors.

In 2005, the creation of a hospital with the norms of the John Hopkins Hospital needed an accreditation from this hospital. The creation of a bioethics committee is among the obligations. It could have an effect of domino on the other private hospitals, yet in 2007, nothing has been done.

Dr. Picard Ami with the aid of the Ministry of Health created the *National Association of Bioethics Studies* in 2000. This Association won an award in Panama and the presidency by Dr. Sousa Lennox of the III Congress of the Latin-American and Caribbean Federation of Bioethics Institutions (FELAIBE in Spanish, created in 2001)(b)⁽¹³⁾ in 2003.

After the III Congress of FELAIBE, the Association was divided in two different groups: the *National Association of Panamanian Bioethics* (ANBIOPA) with Dr. Sousa Lennox, and the Association of Bioethics in Panama (ABIOPAN) with Dr. Picard Ami. Dr. Sousa Lennox, remained president of FELAIBE since the V Congress of FELAIBE in Panama in 2006. In this congress, ABIOPAN reinitiate its contacts with FELAIBE, and in 2007, Dr. Picard Ami formally participated in the Congress of FELAIBE in Argentina.

In 2005, ANBIOPA presented a project for the organization of the national bioethics committee to the Ministry of Health(c)⁽³⁾. The members of the committee were the same as described for the CONABIO in 1999, but its functions duplicated those of the *National Committee of Bioethics Investigations in Health*.

Thus it created a heavy financial burden on the Ministry of Health.

The Ministry asked for another proposal to ABIOPAN and this association used the model of the French National Committee on Ethics with a broad representation of the government, the academy, religious representatives and organized civil society, directly nominated by the President of Panama(d).

They were honorific positions. Both projects were shelved by the Ministry and the country has no national committee until now.

In October 2005, the Pediatric Panamanian Society (SPP) published its considerations on the basis of the revision of the literature and the discussion by a group of pediatricians⁽¹⁴⁾.

b Regulation of the Latin-American and Caribbean Federation of Bioethics Institutions, FELAIBE, Caracas, February 8, 2001.

c Salud instalará Comisión de Bioética Juan Manuel Díaz C. PANAMA AMERICA. aug 23,2005

EDUCATION ON BIOETHICS

1. The Ministry of Health

In 1998, the Minister of Health accepted the proposition of PAHO to send Doctor Picard Ami (specialist in psychiatry, Chief of the Cathedra of Deontology and History of Medicine of the University of Panama) to a course about bioethics in La Havana, Cuba (1998).

In June of 2004, Dr. Roberto Manzini, consultant of the Bioethics Unit of PAHO/WHO⁽¹⁵⁾, and local teachers organized a course "*Orientation for the teaching of Bioethics*". Nearly thirty academics and members of bioethics committees participated in the course, reviewing the curriculum of pregrades, and options of post grades⁽⁴⁾.

2. The University of Panama

Since its creation, the Faculty of Medicine of the University of Panama has included *Deontology and Medical Ethics* in its program of medical career, with thirty two hours, divided between two semesters. But its contents have no connections with anthropology, sociology, or philosophy. After its travel to Cuba, Dr. Picard Ami introduced some topics about bioethical problems of medicine and incorporated new professors. In 2006, Dr. Picard Ami retired from the University and Dr. Claude Vergès took in charge the cathedra. She completely changed the cathedra, dividing it in two parts: a semester about values of the history of medicine and deontology, and the other semester about bioethics. The first semester, at its time is divided in three components:

- the analyze the continuity and the differences of the values in medical practice, investigation and politics of health;
- the more important moments of the history of medicine;
- deontology and the deontological code in Panama.

The second semester is dedicated to bioethics: history and fundamental theories, clinical relationships, bioethical dilemmas in medicine, bioethics of investigation, and ecology and health (www.telmeds.org).

In 2001, Dr. Picard Ami created the *Center of Bioethics Studies in the Faculty of Medicine of the Panama University*, with the authorization of the Faculty. Dr. Claude Vergès, Dr. Raquel de Mock and Dr. Jacinta de Almarío were included in the staff of the Center; and other professors of the University and scientists joined it.

In November 2005, the Center offered the first Diploma of Bioethics, composed of one hundred and forty hours (two academic credits). The Diploma was under the academic responsibility of Dr. Picard Ami and Dr. Vergès and the topics were about basic bioethics and bioethics of investigation for the members of the bioethics committees of the three academic hospitals of Panama. Eighteen persons participated and seventeen received their diploma. During this year, the Center participated in conferences about bioethics committees in public hospitals.

In April 2006, the Social Security solicited a Diploma for the members of its bioethics committees to the Faculty of Medicine; Dr. Vergès was designed for the academic elaboration of the program and the academic coordination of the diploma. Nineteen persons participated and approved the Diploma of two academic credits.

Following these courses, the participants developed investigations about different topics such as: sexual and reproductive education for teenagers, palliative services, pain treatment in emergency room, and organization of bioethics committees in the Social security services.

The program of formation of Technical Personal of Emergency included a course on bioethics in 2006 but it was removed in the 2007 promotion.

Dr. Picard Ami has been invited to speak in national and international congresses of psychiatry and bioethics.

Dr. Vergès participated to two congresses of the International Association of Bioethics (2004, 2006) and has been invited to speak about bioethics in different national and international congresses of medical students (2005), pharmaceuticals (2006) and technicians in clinical laboratory (2007).

3. The University of Santa Maria La Antigua

The catholic university of Santa Maria La Antigua initiated a Master of Family Ethics and created the Institute of Studies on Ethics in 1995. This Institute established some contacts with the Gorgas Institute of Health Studies for education about ethics of investigation. The university is offering a postgraduate course with Specialty on Human Rights, and is including ethical values in the masters and postgraduate courses on Family, Public Policy for Children and Adolescents. These ethical values are reflecting the vision of the university: "*The promotion of an integral culture for the formation of people with a great scientific and humanistic knowledge, with a testimony of faith and a true practice of Christian Values*".

d ABIOPA "Propuesta de Comisión Nacional Consultora en Bioética", Panamá, septiembre 2005, copia en Archivos de ABIOPA.

and their compromise for the creation of a more fair and human society" (www.usma.ac.pa)⁽¹⁶⁾.

4. Other universities

Two private universities, which develop health careers, have introduced bioethics in their programs.

5. The teaching hospitals

The formation of medical residents in the national teaching hospitals had incorporated an investigation for the termination of the career since the first years of the program (around 1965). They were supervised by a committee of investigation. The members of these committees were designated by the director of the institution and generally were the chiefs of the clinical services and professors of the specialty. The criteria for probation or reformulation were essentially technical, based on the methodology of investigation, and they did not include the information and the decision of the subjects. Initially, the investigations were essentially clinical and epidemiological, but they were sometimes founded by pharmaceutical companies. In 2007, all the teaching hospitals incorporated a course of methodology of investigation for their medical residents⁽¹⁷⁾.

6. Associations of bioethics

The Bioethics Association of Panama (ABIO-PAN)⁽¹⁸⁾ has been organizing a symposium every four months about different topics and Bioethics such as "Gender, Urbanism, Medical Education, and Euthanasia". During the monthly meeting of the association, a member presents a theme for discussion or an investigation. In 2007, ABIOPAN created a web site to promote bioethics in Panama. Some of its members are writing in the media about problems of health.

The National Association of Panamanian Bioethics (ANBIOPA) is working with the Faculty of Nursing of the Panama University: they have organized a weekly meeting and a two weeks course in bioethics with professors of the Complutense University of Madrid in 2006.

In 2005, a group of Catholic Doctors founded an association to discuss about ethical topics and bioethics in medicine and to organize the opposition to some themes such as education about sexual and reproductive health among young people, contraception and abortion, research with stem cells, and euthanasia as an alternative to palliative care.

They organize meetings between themselves and with obstetricians and specialties who work on these topics.

Glaxo-Wellcome and Pfizer have organized some course of good clinical practice for investigators and members of bioethics committees, as they are founding many clinical investigations in Panama since 1985.

THE LAWS OF BIOETHICS AND RELATIVE THEMES

The laws, Ministerial Resolutions and Decrees are presented from 1995 to 2007, corresponding of the development of bioethics and rights of the patients (www.asamblea.gob.pa). They are organized in four governmental periods. It is important to observe that if the law, resolution or decree is not published in the Official Gazette, it has no legal recognition.

CONCLUSION

With a history of nine years of promotion, achievements and errors, Bioethics in Panama is encountering opportunities and threats.

The best opportunity is the recognition of the bioethics reflection on the quality of the health services responding to the needs of the patients. The dilemmas between the advances of knowledge and technology and the permanence of diseases due to poverty need bioethics and human rights to suggest alternatives. Bioethics associations are growing and extending their influence on society establishing alliances on ecological themes. Some individuals are participating in the Latin-American and international debates and congresses. But the traditional political, religious and associative interests obstruct or delay the democratic dialog on bioethics issues. Particularly, religious fundamentalism is trying to monopolize the debate on bioethics and to fight against health rights embodied in this debate.

The power of attraction of historical figures of bioethics in Panama has been of considerable value for its development. The recognition of the local institutional bioethics committees and of the bioethics committees of investigation encourages the creation of new committees.

The cultural characteristics of the Panamanians, their search for modernity, their capacity to be open to changes, their acceptance of cultural diversity and their preference for dialog and negotiation, are fertile grounds for the bioethics' debate and practices.

YEAR	LAWS, RESOLUTIONS AND DECREE	PUBLICATION	OBSERVATIONS
1995	The Deputy Assembly adopted the Law 52 which "Regulates the achievement, preservation, storage, transportation, destiny and final disposition of organs or anatomic compounds and the procedures for transplantation in human beings" presented by the Ministry of Health (December 12, 1995).	Official Gazette n. 22929 (December, 13)	The law is very detailed and adopted the recommendations of WHO on this theme.
1998	Resolution n.0573 "Which created the Bioethics Committees in every public hospital under the administration of the Ministry of Health" (October 21, 1998).	Official Gazette n. 23,663 (October, 30)	The bioethics committees must function in both health systems of public health.
1999	Ministerial Resolution on Bioethics n.00496 (January 19, 1999): creation of the National Bioethics Commission (CONABIO) dependent of the Minister of Health.	Not published in the Official Gazette	The CONABIO has never worked.
	Law 40 "Special dispositions of penal responsibility for adolescents" (August, 26).	Official Gazette n. 23874 (August, 28)	The rules for adolescents are less rigid.
2000	The Deputy Assembly adopted the Law 3 "Generalities on Sexual Transmitted Infections, HIV and AIDS" (January 5).	Official Gazette n. 23964 (January, 7)	The law provides free treatment for pregnant women, children and adults; and the epidemiological report is obligatory.
	The Deputy Assembly adopted the Law 17 "Which approves the Convention on the minimal age of admission to work (Convention 138 adopted on October 26, 1999) (June 15).	Official Gazette n. 24077 (June, 19)	Not directly bind to bioethics; it has an impact on the child health.
2001	The Deputy Assembly adopted the Law 17 "About the facultative Protocol of the Convention for The Elimination of all Forms of Discrimination against Women" (March 26).	Official Gazette n. 24,272 (March, 30)	The law emphasizes gender equity in all sectors of the society.
	The Ministry of Agriculture and Development published the Executive Decree n.137 (May 29, 2001) with the signature of the President, "Which created the National Commission on Biosecurity and Bioethics".	Official Gazette n. 24,317 (June, 6)	Actually the Commission on Biosecurity is working independently.
	The Deputy Assembly adopted the Law 38 "About domestic violence and damages to children and adolescents" (July 10).	Official Gazette n. 24,350 (July, 23)	The law reforms the previous Law (1995), and aggregates sexual violence to the Penal Code.

2002	The Deputy Assembly adopted the Law 29 "Which guaranties health and education of the pregnant adolescent" (June 13).	Official Gazette n.24,575 (June, 17)	The law allows pregnant adolescent confidentiality in health services and their incorporation in official schools.
2003	The Deputy Assembly adopted the Law 39 "Which modifies and completes the Family Code" (April 30).	Official Gazette n.24,794 (June, 5)	Men have to pay an AND-test if they deny their paternity.
	The Deputy Assembly adopted the Law 68 "Which regulates the Rights and the Obligations of the Patients , in the matter of Information and Free Informed Decision" (November 11).	Official Gazette n.24,935 (November, 25)	Based on the Spanish Law on Patient Rights, it recognizes the right to refuse treatment and prohibits euthanasia.
	The Ministry of Health published the Resolution 390 "Operational Bioethics Guidelines for Investigation" (November 6).	Official Gazette n.24938 (November, 28)	Detailed guidelines based on the recommendations of the ICWHO.
	The Deputy Assembly adopted the Law 78, "Which organizes the Commemorative Gorgas Institute of Health Studies" and created the National Committee on Bioethics in Investigation in this institution (December 17).	Official Gazette n.24952 (December, 19)	The institute is dedicated to research on health and the national comity depends of the director.
2004	The Ministry of Health adopted the Executive Decree n.428 "Which orders the gratuity of health services and assistance for pregnancy, in all health services of the Ministry of Health" (December, 15).	Official Gazette n.25199 (December, 20)	Created to challenge poverty and to improve control of pregnancy; it has a poor impact. The department had on charge: bioethics,
	The Ministry of Health created the Department of Ethics and Security for Health Attention which depends of the Direction of Vigilance and Regulation in Health.	Not published	Biosecurity and quality of services; it is dedicated to the last point.
2005	The Ministry of Health adopted the Executive Decree n.546 "Which orders the gratuity of attention for children under five years old in all the services of the Ministry of Health" (November 21).	Official Gazette n.25432 (November, 24)	Created to challenge poverty and to reach the goals of the Millennium.
2007	The Deputy Assembly adopted the Law 4 "Which creates the national program of neonatal screening and dictates other dispositions" proposed by the Ministry of Health (January 8).	Official Gazette n.25708 (January, 11)	The law establishes the screening of six congenital diseases.
	The Patronage of the Hospital del Niño adopted the Resolution n.563 "Which approves the Regulation of the Bioethics Committee of the Hospital del Niño and the entire text of the Regulation" (March 28).	Official Gazette n.25828 (July, 5)	This resolution recognizes the functions of the bioethics committee in the Hospital.
	The Patronage of the Hospital del Niño adopted the Resolution n.563 "Which approves the Regulation of the Bioethics Committee of Investigation on Health of the Hospital del Niño and the entire text of the Regulation".	Official Gazette n.25791 (May, 15)	This resolution recognizes the functions of the bioethics committee of Investigation in the Hospital.

2007	The Deputy Assembly adopted the Law 14 "Which approves the Penal Code" (May 18).	Official Gazette n.25,796 (May, 22)	The new Penal Code augments the charges for doctors and nurses for abortion.
	The Deputy Assembly adopted the Law 25 "Which approves the Convention on the Rights of the Persons with Incapacity and the Facultative Protocol about the Rights of the Persons with Incapacity, adopted in New York by the General Assembly of United Nations" (July 10).	Official Gazette n.25832 (July, 11)	The law defines the obligations of the society for the incorporation of persons with incapacity.
	The Deputy Assembly adopted the Law 26 "Which proclaims the Month of Sacred Writings and establishes the Day of their celebration" (July 10).	Official Gazette n.25832 (July, 11)	The law abrogates the separation of church and state.

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