HUMAN IN A MEDICAL EXPERIMENT

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Abstract: *The work highlights modern problems of bioethical justification and legal regulation of experiments in biomedicine, about "voluntary informed consent" in order the potential participant in the experiment had sufficient knowledge, to understand the essence of the experiment and made a conscious decision about whether or not to agree to become a participant in the experiment.*

Key words: *Bioethics, experiments, biomedicine, procedure, manipulation, protection, technology, paternalism, convention*

Biomedical experiments deal with the most precious thing a person has - human life and health. Natural scientific experiment as the main method of cognition was considered ethically neutral in modern times. But as knowledge about human corporeality develops, as biomedicine develops, more and more people become participants in biomedical experiments.

Most biomedical experiments deal not with saving lives, but with obtaining or improving knowledge that can be used not only to treat this particular patient, but also for the benefit of humanity in general, the benefit associated with the progress of biomedicine as a tool for the development of society. As it turned out, one of the "favorite" contingents for ethically unthinkable research in modern times were, not surprisingly, prisoners. In 1915 , renowned epidemiologist Joseph Goldberger

Goldberger put Mississippi prisoners on a depleted diet to prove that the severe disease pellagra was caused by a lack of vitamin B3 in their diet. The prisoners were subsequently given an apology without any financial compensation, and Goldberger was nominated for a Nobel Prize five times for his work on pellagra. With the development of the pharmaceutical industry in the 1950s and 60s, government and corporate research on prisoners was essentially put on hold, despite a number of recent trials of Nazi experimenters. By the 1960s, at least half of American states allowed such research. At least two drug trials in the last 15 years have been found to be unethical. One involved passive surveillance of pregnant HIV-infected Ugandans to assess the risk of transmission of the virus to the child. However, the researchers were well aware that prescribing the common antiviral drug azidothymidine reduced this risk.

Voluntary consent means that the person involved in the experiment has the legal right to give such consent and has freedom of choice without any element of violence, deception, fraud, trickery or other hidden forms of coercion. In modern bioethics, the concept of "voluntary informed consent" is used, that is, it is required that the potential participant in the experiment had sufficient knowledge, to understand the essence of the experiment and made a conscious decision about whether or not to agree to become a participant in the experiment. To provide consent, the subject was informed of its nature, duration and purpose; the method and means by which it will be carried out; about all possible inconveniences and risks; about the consequences for his health and moral well-being, which may arise as a result of participation in experiments.

Currently, four types of experiments in biomedicine are being assessed from the point of view of bioethical justification and legal regulation.

The first type is when doctors experiment on themselves. From an ethical point of view, doctors who have full knowledge about the essence of the experiment and the consequences, when conducting experiments on themselves, have the opportunity to give voluntary informed consent.

The second type of experiments are experiments on healthy people. In such experiments, which are a mandatory stage of pharmacological research, the maximum dose and side effects are checked.

The third type is experiments on patients, during which benefits are expected for the subject himself. This type is called therapeutic experiments.

The fourth type is experiments on sick people, during which no therapeutic effect is expected. The purpose of such an experiment is to gain knowledge. This is a non-therapeutic experiment. Just as an experiment on healthy people can be called non-therapeutic .

Paternalism is a model of doctor-patient relationship in which the patient delegates to the doctor the right to fully make decisions regarding medical interventions. Within the framework of paternalism, just as a child does not expect evil from his father and obeys his will, the patient follows the doctor's orders. And many patients, not separating therapy and experiments, do not delve into the essence of the experimental procedures and manipulations proposed by the doctor. The bioethical issue is related to how complete the patient must be informed in order for his consent to be interpreted as ethically correct.

To what extent can such consent be obtained from certain categories of citizens whose lives, for example, are controlled? These are residents of government institutions, such as psychiatric clinics, orphanages, and nursing homes. The lives of those in such institutions depend , often absolutely, on the actions of the staff. The question arises: do these people have any opportunity to give informed consent? International law, developed following the revelation of ethically questionable experiments, prohibits the use of institutionalized persons except for the purposes of therapeutic research (where certain assistance is being provided). For certain categories of patients, for example children, participation in an experiment requires special regulations that strictly distinguish between therapeutic and non-therapeutic experiments. As a rule, the involvement of children under 14 years of age in non-therapeutic experiments is prohibited. International legal acts indicate that parents can

consent to participate in an experiment on behalf of a child if the treatment is carried out for the benefit and benefit of the latter, that is, for therapeutic purposes. Only those decisions can be made that do not lead to a violation of the child's physical or mental condition. However, neither morally nor legally, parents can make decisions for a child when medical intervention results in serious risk. One of the difficulties is that ideas about good and benefit can be interpreted extremely broadly.

The scope of experiments in biomedicine will increase. The further science develops, the more people will become participants in experiments, the more challenges bioethics will face. Bioethics draws attention to the need to develop government mechanisms for informing people about the rules of medical experiments.

Currently, the main European document that regulates experiments in biomedicine is the Convention on Human Rights and Biomedicine. Its official name is the Convention for the Protection of Human Rights and Dignity in relation to the Applications of Biology and Medicine. This convention was signed by most European countries in order to prevent the possibility of negative consequences of the use of new medical technologies, to protect the rights and dignity of a person who finds himself in the role of a patient or test subject.

Thus, modern science promises not only to extend life expectancy and save us from many terrible, including congenital, diseases - it offers means that can improve a person's intelligence, change moral and emotional characteristics. However, when conducting experiments on healthy people, patients must have the legal right to give such consent and have freedom of choice without any element of violence, deception, fraud, cunning or other hidden forms of coercion. Biomedical experiments deal not only with saving lives, but with obtaining or improving knowledge that can be used not only for the treatment of this particular patient, but also for the benefit of humanity in general, the benefit associated with the progress of biomedicine as a tool for the development of society.

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