



Presidential Commission
for the Study of Bioethical Issues

TRANSCRIPT
Closing Remarks

Amy Gutmann, Ph.D.
Commission Chair

James Wagner, Ph.D.
Commission Vice Chair

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DR. GUTMANN:

I just want to join all of the commission members and our vice chair, Jim Wagner in saying that this has been very helpful to us. And also thank you all for coming so far to give us your advice. We will be back in touch with you to get various writings and other suggestions from you. But in the meantime, now that my red light is on, I want to ask everybody, and I also want to thank the public members of our audience for really getting us off to a great start on this very important topic. So thank you all very, very much.

DR. WAGNER:

I'd like to add my thanks as well. I particularly found interesting this day the ebb and flow between the need to close gaps on one hand, and the need to keep gaps and discussions open. I think to answer the President's question with a definitive "no."

There is no possibility that these things will happen again. It is not only impossible, but probably undesirable. It's the dark side, it seems to me, and I've been noodling on your tightrope concept. There's a seduction to the dark side of the tightrope that we have been able to close from both directions all the risks, and all that's left is a very narrow tightrope.

I shared this with Amy as I was reading our materials, but I was reminded of a lecture two decades ago, three decades ago now, by an anesthesiologist. It was on anesthesia, and it was not because the information made me drowsy, it was because he was talking about the need to provide sufficient anesthesia to protect the wellness and the well being of the patient. But too much anesthesia actually kills the patient. And he was making the point of how valuable it was to have a space in between those two limits, not just a thin tightrope, but a space in which to exercise judgment.

Otherwise if there was going to be, if one were going to be forced to make this a computer driven process where you would only allow that very narrow path, there would be few patients that could qualify for lifesaving surgeries.

So this question of how much is too much, and how much is too little, and how do we allow for the space in between to exercise the judgment and conversation that is really going to advance what we can do around human subjects' research with respect for all these fundamental principles I think is an important piece for us to address in our report. And you guys helped advise that very, very well. Thank you very much.

DR. GUTMANN:
Thank you all.