Interactive Ethics

The Ethics Program and STARS invites comments on the ethics dilemma that follows. Students should send their comments by e-mail to ethics@utsouthwestern.edu. We will post your comments with your initials, school name, and class subject (or anonymously if you prefer). At the end of the comment period, we also will post a perspective from the ethics program.

CASE FOR OCTOBER-DECEMBER 2008
(closed for comments-commentary posted)

Background Information:
Anorexia nervosa is a serious medical problem that can be fatal. A person with anorexia has an intense fear of gaining weight. Someone with anorexia thinks about food and limits the food he or she eats, even though she or he is too thin. They develop a distorted perception of the size or shape of his or her body. Anorexia is more than just being too thin. It is a way of using food or starving oneself to feel more in control of life, and to ease tension, anger, and anxiety. Persons with anorexia may use extreme measures to lose weight, including making oneself throw up, using diet pills, using laxatives, and excessive exercise. As anorexia progresses, it affects the brain, heart, muscles, joints, and bones, kidneys, intestines, hormones, hair, and skin. Anorexia can hurt a baby when the mother is pregnant. Women who have anorexia while they are pregnant are more likely to lose the baby. If a woman with anorexia does not lose the baby, she is more likely to have the baby early, deliver by C-section, and have depression after the baby is born. For more information, see http://www.4woman.gov/

Ethics Case:
Sheryl is a 24-year-old, pregnant, single, white female, who was referred by her obstetrician for evaluation. Prior to her pregnancy she met criteria for binge eating disorder, but since pregnancy she is restricting and purging her meals, as well as abusing over-the-counter diet pills and laxatives. Even though she has lost weight during her pregnancy, she is upset that she is getting “fat” with it, and thus avoiding intake of food. She weighs 169 pounds and stands 5’4”. At the onset of her pregnancy she weighed 199 pounds, and has lost 30 pounds in the first 28 weeks of her pregnancy. The patient’s boyfriend is excited about the pregnancy. However, he voices disdain for psychiatric care, and refuses to be involved with her treatment in any way. Her parents are excited about the pregnancy, but they are concerned about the health of the baby. They want her to come back and live with them so they can monitor her self-care and make sure she is following her doctor’s orders. She is refusing a higher level of care and she is not even fully compliant with treatment at this level of care. For example, she follows only 80 percent of her meal plan, and takes diet pills and laxatives on the weekends.

This case raises a number of questions about a woman’s freedom of choice, complicated by carrying a baby who is at risk because of the woman’s anorexia nervosa and subsequent refusal
Dear Students:
Thank you for your thoughts and interesting comments. We received responses from 129 students representing seven schools. Here’s the professional response from a UT Southwestern faculty member. We hope you have enjoyed participating in this process.

**Professional Response**

Urszula Kelley, MD  
Associate Professor of Psychiatry  
Children’s Medical Center at Legacy

As a consultant to the obstetrician you would like to clarify what question your psychiatric consultation is to answer.

You would like to know if the obstetrician feels that the patient is endangering her fetus and by what evidence. If the answer is positive it could be reasonable to apply for an order of Protective Custody and initiate involuntary psychiatric hospitalization on grounds of dangerousness to self or others. If there is no evidence of harm you might consider offering the patient psychotherapy to help her explore the meaning of pregnancy, motherhood, effects of her actions, body image and so on. The patient will need to continue careful follow up with her obstetrician at the same time.

Involving family in treatment of a patient with an eating disorder is of essence and can provide patient with needed support to make healthier choices for herself, and her unborn child. It is unknown if any preexisting family of origin issues are present. Often identifying unresolved problems from the past and addressing those helps patient with an eating disorder to heal. Patient’s partner refusal to participate in her treatment is of concern and raises questions as to his ability to be supportive of her.

As with most eating disorders patients care is complex and challenging every step along the way. Consultation with other healthcare providers and clear communication between providers is of great value.

**Student Responses**

1.11.09

As her psychologist, I would encourage her in some way to get the point that she is very, very skinny across. Using key words like life threatening and death might help stress the subject. As her physician, I would be responsible for her and the baby. I give her 3 possible options: 1. She starts eating for just 3 or 4 more months then she can give her baby up for adoption or to her
family and return back to not eating as she would not be fit for mothering. 2. She chooses not to eat, so I hook her up to a machine and shoot the food into her. Painful, scary, possibly. But will it help the baby be birthed? Yes. She then would also need not worry about eating anymore as she could feed the child with food from the store afterwards and/or give it up for adoption or to relatives as she still may be unfit for mothering not having the energy to stay up with the baby in the night. 3. Continue not to eat and let her see what she has done. This would be the most painful option. It would ultimately prove a life lesson and crush her as an individual at what she has done. I would emphasize how painful it would be to see a baby die in front of your face, maybe never get a breath out of the mother, who knows how bad it could be added she takes many over the counter pills and drugs.

If the message that she needed to eat didn't get into her head, there is nothing else that you could do. By law it is her and her husband’s baby solely unless otherwise stated. The father wishes to stay out of it, and she wishes to not eat, so if she won't eat, there may be no hope for this unborn baby.

As I, as a doctor or psychiatrists, could suggest many different things as far as what to do and when to do it, it is ultimately her choice. It is her life, and her child. Not ours. We can only suggest and hope for the best. She is over the age of 21; she is no longer an adolescent. She as an adult needs to make her choice. Although she may not be capable, it is her job, just like it was her choice on getting pregnant; she made the choice, so she has to follow through.

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J.D.- Richland High School

12.18.08

If I was this women’s physician, first I would highly consider this woman’s feelings she obviously has some problems already in this situation and would not want to scare her and make her do worse to hurt her or her unborn baby. Then I would offer her counseling through the hospital and I would not get personal with her but know that she knows and care for her baby’s health. I would also put her under court order for the safety of her and her unborn child who is suffering because her decisions and mental problems and disorders. I would schedule a meeting with her boyfriend and parents and then offer counseling for them also. After all this occurs for a couple weeks then I would check on my patient and see how her anorexia is.

E.L.B.- Richland High School

12.14.08

If I were her physician I would suggest that she stay in the hospital and be treated for her anorexia through counseling or medication. I’m sure she knows that this is harming her and her child, but from looking at the case, I would expect some complaints from the patient and maybe some refusal. If this were to happen I would have to take responsibility not only as the physician of her but the child also. I would have no choice but to get a court order to treat her in the way I know is best for her physical and psychological health and the health of her unborn child.
Were I this woman's physician, I would not take steps to hospitalize her until it became completely necessary. The woman can still turn around, and cornering her might just make her aggressive and indignant. She could end up starving herself out of spite or to maintain the sense of control most anorexics crave. At her current stage, the baby can still be saved and nothing has been said of his endangerment being critical. She is also an adult, and as such can no longer be viewed as an easily manipulated child. She has rights and particularly the right to choose. Until the baby's life is in clear danger, she should be left alone.

E.M. - Med High

Ethics and legality are two different matters. In this country, abortion is legal amidst the violent outcry many have protesting how unethical they believe it is. The individual right is what many have lost their lives for. Cases like this set the precedent for cases in the future, and I believe that while Sheryl may not want to comply fully with her treatment, she at least shows an understanding that she needs to with her effort to comply at least 80%. Sheryl's doctor must consult with her family to monitor her so they can see exactly how severe her case is. I am no doctor, but I can say that being forced somewhere beyond your control is not what I had in mind when describing ethics for a sick person. I know that her baby's life is at stake as well, and in no way am I saying that a court order to hospitalize should never be used, but she at least shows an effort to comply. I think the doctor should carefully analyze what stage of anorexia she is in now, suggest an outpatient treatment, and do a reevaluation in a few weeks.

E. S.- North Crowley High School

Under no circumstances would I let the life of a new born baby be shortened due to the choices of the mother. As of now, if I were in the physicians’ position I would not hesitate in ensuring the health and safety of this baby. Now in order to take immediate action, I first do as many steps as it takes in order for her to get hospitalized under a court order in order to ensure the baby's survival. Since the mother will now be under the watchful eye of the hospital, I would then give her outpatient treatment in order to find a way to show and convince Sheryl to understand the brutal consequences that would soon be inflicted on the baby if her chosen path would continue. Also to ensure that there will not be an early delivery of the baby which would be done by a C-section which then cause Sheryl even more depression.

E.V. South Texas High School for Health Professions
Being Sheryl's physician I will highly recommend her to stay at the hospital so she can follow her treatment properly. If she doesn't agree to that I will aware her I am taking legal acts on her. All this will be for the benefit of the baby. I will not allow anything bad happen to the baby because of the mom not following instructions. Legal acts have to be taken.

A.A. - South Texas High School for Health Professions
12.8.08

If I were Sheryl's physician, I would get her counseling. I probably would keep her in a hospital as well just so we could keep an eye on her. Teach her some eating habits while she is in the hospital until she is able to be on her own. And even when I would take her out of the hospital I still would make sure that she has someone like her parents or boyfriend watch her 24/7. I would also sit and talk to her boyfriend if he lives with her so he could help. He is excited about his baby but still he is as if her health doesn't affect the baby, but it does. So he needs to take some action in this too. He can help by serving her meals and taking the diet pills away. He should even follow Sheryl to the bathroom to make sure she is not throwing up. He should also keep telling her she is beautiful and that she is perfect the way she is so she won't feel as if she has to lose weight to look good anymore.

D.M. - Richland High School
12.7.08

If I were her physician, I would inform her of all the risks she is taking and what she is doing to the baby. I would make sure that she understood everything she was doing and show her that her way of eating was slowly but surely killing not only her, but also her baby. I would give her my support and I would inform her family of her case. I would tell her that she needed counseling. I would do all that I could to make her see what she was doing. I would show her someone who had the same problem as her to show her that she was not alone. And if she still didn't understand then I would get a court order to hospitalize her. I would have her under close supervision. But I would do it for the sake of both my patients.

E.D.- Sam Houston High School
12.5.08

I think that Sheryl should be told exactly what can happen to her child if she keeps abusing her weight as she is. It will give her a firm grasp on reality because she seems to not possess a conscience for herself or child in her current state of mind. If I were her physician I would explain as much as I can about her problem and then I would refer her to an outpatient program possibly one with other mother-to-be in her case so that she can get a psychological hold on herself. It is against ethics to force her to go to the said rehab but it may be possible to get her parents to abide into taking her maybe by the POA, because of her current state of mind. If a
court order is possible than I would also take steps in that direction but other than that it is really just up to her because she is a legal adult if she keeps going in the direction that she is. I think the court order is the best way to go though, it will ensure that she is not endangering not only herself but the child that she is growing inside her so that both are in a safe environment.

O.R. - South Texas High School for Health Professions

12.5.08

She cannot be held against her will but she can be informed that not eating and trying to lose weight is not healthy for her baby. But she should not be discharged because it will get worse if she is not watched which can hurt her and her baby.

J.E. - Alvin High School

12.5.08

As for the woman alone, she may choose to do as she pleases with her body. That being said, counseling and advice from a Physician may be best for her, but no one can force her to act on what anyone else believes. But her baby is a completely different story. The Texas Penal Code states that even though she has the right to do what she wants with the baby because it is "hers" doesn't mean she can knowingly kill her unborn child by using excessive diet pills or binging. If I were her Physician, I would have a sit down conversation with her about the extreme risks of losing her baby if she continues her way of "losing weight". After her child's birth, if she feels like it is necessary, she has the right to continue to do as she sees fit to continue her weight loss method, despite everyone’s efforts to help her. Nevertheless, it doesn’t really matter what we think or how much professional advice someone receives because state and/or federal laws prevent anyone outside of the mother (or inside the mother) to make choices for the baby itself.

J.D.

12.5.08

In Sheryl's case she needs the classes of awareness education and counseling and also someone to prove to her of her ignorance and negligence to the unborn child. If I were Sheryl's boyfriend or parents, I would take steps to prevent her from hurting their health, her and the baby. Continuing her bulimic acts and excessive diet pill and laxative intakes can cause a stillbirth and the woman, obviously somewhat mentally unstable, might as well have had an abortion! Although, she is causing harm to an unborn child and is her free will to do as she pleases, I believe it is still ethically wrong. I suggest she remain under hospital care for the remainder of her pregnancy or an early delivery if there are complications concerning the baby's health. If things still look good in the delivery of the baby then it could be best for her to move back with her parents for them to monitor her intake habits.
A.C. - Alvin High School

12.5.08

Sheryl as a 24 year old and only 5'4' before her pregnancy she was overweight weighing 200 pounds. With her being pregnant and now depriving her appetite quickly it is not healthy for the baby. If I were her physician I would send her to nutritional classes and maybe help her balance out her diet to help herself and the baby’s health as well.

M.S.D. - Alvin High School

12.5.08

Well this is a very delicate case because we are not only talking about a person but a baby too. If I was her physician I would get her and sit her down and tell her just very plane a simple what she is doing and what could be the effects, even if it’s harsh, on her and the baby. Give her all her options to get help and even what can be done if her parents decide to give her hospitalize her by court order even though I wouldn't suggest to do it. Because I think that the more people are restricted or obligated to do something the more they do it or the more they don’t do it. So I would just come up with a plan with her to help the baby be healthy and still give her some thing that she wants like maybe eating in small portions or something like that. It would be more like a negotiation, so that she would be willing to do it. If she agrees to do something about it, she would be monitored very closely by her parents or the doctor as an outpatient including counseling for her and the family just to get them more involved.

R.V. - Alvin High School

12.5.08

If I were Sheryl’s physician I would send her to get hospitalized under court orders. The baby is considered to be a human being and therefore has the right to live. After having the baby I would send her to involuntary treatment in a psychiatric hospital for her anorexia disorder. In the hospital, she would be then forced to eat and be under the control of professional help, helping the baby. Her mother’s decision on anorexia isn’t fair for the baby to suffer on. The consequences of anorexia while pregnant could lead to a premature baby and after the baby’s birth, depression affects the mother.

A.H. - High School For Health Professions

12.5.08

I don't think she should be discharged because as long as she is there they do know that the baby is getting some nutrition. Also the baby is seven months gestation so the baby can survive if they feel she is not accurately providing nutrition for the baby. So if nothing else they could
deliver the baby if the situation got worst. That might not be what they want to do but it does leave alternative options.

A.C. - Alvin High School

12.5.08

The Physician cannot legally hold the patient against his or her will, even though she is slowly losing weight, the patient must choose to follow her own diet plan, if she chooses to take the laxatives and not follow her doctor’s orders then that must be her choice due to personal beliefs not doctor or outside influence it can even be unethical for a family member to, due to the facts in the given scenario Sheryl is not endangering the baby from a medical stand point before the pregnancy, she was 199 pounds and 5’ 4”, if she began to start Rapidly losing weight beyond what she is now, then this would subject to a problem, but at the stand point where she is now she is not endangering the baby, so the doctor she not be all that concerned with her current condition because she is medically fine. Thank you.

J.E.- Alvin High School

12.5.08

As Sheryl's physician, I would be most concerned with the health of the baby, obviously. Being a young female at an average height of 5'4 and the weight of 169 she is perfectly healthy on chart terms; when vomiting her previous meals it takes away the nutrients and proteins the baby needs. I would get a court ordered form forcing Sheryl to be committed into the hospital and forced to maintain the recommended diet for the health of the baby.

T.K.I.-Alvin High School

12.5.08

In this case, it would be in the best interest of her unborn child if Sheryl was to be kept in the hospital during her pregnancy. This is the best decision to ensure the health of the baby. In the hospital they can monitor her eating and give her the nourishment she and the baby need through an IV. If she is not kept under supervision her anorexia will keep her from eating. If she does not eat then her child will not get the nourishment that it needs. Sheryl can obviously refuse to stay in the hospital, but then she would be held responsible for what happens to the child. if the child were to die, due to Sheryl's not eating, she would be charged with neglect. Therefore, it would be wise for her to stay in the hospital or at least follow the treatment that she has now until the pregnancy is over. Once the baby is born Sheryl should attend counseling for her problem. It would not be right for her physicians to discharge her for not wanting to eat, because her disorder is out of her control. If it were a case where she did not agree with the doctors, then it would be understandable for them to refuse further treatment; since she cannot control her sickness, the doctors should do the best they can to help by sending her to counseling and enforcing treatments. The only reason involuntary treatment would be
necessary in this case is because the child’s health is at risk. If the woman wasn't pregnant and didn’t want to receive treatment for her anorexia then there would be no question to her refusing treatment.

S.C. - Med-High

12.5.08

If I was her physician I would most definitely suggest that she take an education class for anorexia nervosa and look more into the disease to be better aware of what she is doing. I would also recommend counseling sessions to help her cope with problems that might be causing her actions to flare up. I don’t believe that I would put her in the hospital due to the fact that she would not progress there. I would strongly suggest her talking to her parents and considering their offer. After all she would be most comfortable around them for she trust them. If she does decide to go with her parents, I would also talk to the parents to explain the situation and give them directions for her treatment, like her diet, daily activities, and so on. Sheryl needs to understand they are there to always support, care, love, and help her get through this journey. But then again I cannot force her to take action to get better, I can only hope she would consider my suggestions and do the right thing.

A.S. - Health Science Technology

12.4.08

If I were Sheryl's physician I would inform her family or her boyfriend that she has anorexia nervosa and it’s not safe for the baby’s health. I would have them make sure that she always has someone monitoring what she eats and her behavior with diet pills. If she continues to drastically control her weight and suspicious things were being observed by her family or whoever is monitoring her, she would need counseling and more education about the hazards of what she is doing. And if counseling does not help her, she definitely needs to be hospitalized and forced to eat because it is really dangerous for her baby to be in that situation. She may defy being hospitalized, but she will have to have daily meal plans and, in a hospital she can always be watched, for the sake of the baby.

This may bring concerns about Sheryl's freedom of choice because she can choose to control her weight but she probably is not choosing to hurt her baby. This is where the counseling and education would be helpful because she is not thinking about the baby's health. When the counseling may not help, hospitalization would help her most and she would only be there until the baby is out, so it is not that hard for her to do that.

C.C. - South Texas High School for Health Professions

12.4.08

If I was Sheryl’s physician I would take immediate action. The fact that she weighs 169 pounds at 28 weeks of gestational period is very odd, but more so is the fact that she lost 30 pounds in
28 weeks implying a quite rapid and dangerous lose of weight for the health of both the baby and Sheryl. To begin with I would advise Sheryl to attend outpatient treatment such as counseling and psychiatric care. I would also make future plans to hospitalize her under a court order since she is putting not only her life but the life of another human at risk. Thus she would be committing suicide and murder is she decides not to take action or allow treatment for her anorexia nervosa, enabling this to go under a court of law. Though there is really no concrete saying on what is going to happen since there is really no say in a person’s personal decision. The case of a pregnant is a very tedious case in which one’s choice of “survival” plays an essential role. I strongly reinforce the idea of taken immediate measures since the baby’s life is at stake. I believe that at this I would be wasting my time and the chance of survival if I were to explain the risks, for her case of anorexia nervosa also affects her physiologically and might not be able to understand; knowing that she obliviously took for granted this information 7 months ago. If I were Sheryl’s physician I would call upon a committee to help decide or at least consult other fellow doctors for their opinions over the case. Overall it would be alarming for anyone both professional and non-professional to hear about a person that is pregnant and has a low weight for her gestational period and is still not satisfied with her weight, implying that she will probably continue her use of laxatives and diet pills as well as the limit of food.

B.V. - South Texas High School for Health Professions

12.4.08

In my point of view if women have anorexia, and are pregnant I think its best that she eats no matter if she gains weight. It's only normal that you gain weight, because you're caring a baby and the baby also has weight which adds up with yours. Though I do understand that it's very hard having anorexia, and being pregnant at the same time. You have to think about the baby even though you're going through a hard time; it's not always about you. You have to be strong and not try to lose weight, or stop eating just because she's sick. You have to think about it if you do stop eating, and try to lose weight it's most likely that you're baby won't survive. While if you eat well, and gain weight you're baby has a higher chance of survival, because he's healthier but maybe not healthy enough. So it's up to the mother, she decides what she wants to do. It just depends how bad you want the baby, because if you really wanted the baby you would help it survive.

R.G.- Med High

12.4.08

If I was Sheryl’s physician I would definitely offer counseling to her. I would tell her that she needs help overcoming her disease, not just for her, but for her baby. I would explain how anorexia could really harm her and her child and offer her all the information I know on the subject. I would tell her that even if she did have a healthy baby, that baby would need a healthy mother to develop. I would also suggest she live with her parents, so that they can monitor her eating. I would not make her do anything, but if she continues to lose weight and harm herself I would try to hospitalize her under a court order. It is obvious she had some mental issues, and if
it is going to harm her unborn child, I would most definitely do everything in my power to get the baby to be delivered healthily and to make sure Sheryl is a fit mother.

B.Z. - Med High

12.4.08

A woman who is pregnant should gain a sufficient amount of weight because she has to provide nutrients for two people during the pregnancy instead of one, but Sheryl, now 7 months pregnant, has lost 30 pounds. She is not only hurting herself, but also she is hurting the life of another person, that of the child within her. Her distorted images and unwillingness to comply with her basic care needs are hurting the life of a child that is yet to be born. Knowing that most likely Sheryl will refuse to be hospitalized on her own because of her mental instability, if I were her physician, for the sake of her unborn baby, I’d obtain a court order to have her hospitalized immediately. Now 7 months pregnant, it would do the baby no good if she was taken to educational classes or counseling because it would most likely be unsuccessful in helping the baby survive. If she were not immediately hospitalized, the chances of the baby surviving are slim to none. Although it would be hospitalization against her own will and that is wrong, it would be even more morally incorrect to risk the chances of the baby surviving. After her child was born, I’d have her sent to counseling sessions, also for the sake of her baby. She’d have to go to counseling sessions for her eating disorder because in order for her to be able to take care of this new baby she’d have to be mentally sound and also know what a good diet and a good healthy status is so that she could properly provide nutrients to the baby.

D.G.- South Texas High School for Health Professions

12.4.08

If I were Sheryl's physician, I would try to get a court order to make her receive education and counseling. She would need to realize that what she is doing is now not only harming her, but her baby as well. If I couldn't get that court order, I would have to talk to her boyfriend and family members. They would all need to counsel her themselves and help her recognize how much harm she is doing to her baby. As to her freedom of choice, this comes back to the abortion issue. Sheryl is now taking care of someone else's life. At 28 weeks, the baby is old enough to be considered a person. Sheryl should not have the right to legally harm her baby.

A.A.- South Texas High School for Health Professions

12.3.08

If I were Sheryl’s physician, I would try to take extra steps to make sure she knows that what she is doing is harming not only herself but also the life she is carrying with her. She has a fatal eating disorder that can kill the baby inside of her. I would make sure to advise her to do what is right, even though she might not take that advice. This is a very serious case, but in my opinion, a physician can’t do that much to help the baby since its Sheryl’s responsibility. I think that if a
team of doctors and physicians were to have a meeting with both the unhelpful boyfriend and the responsible parents, that maybe Sheryl would realize that what she is doing is bad and that she is jeopardizing the lives of the baby and herself. She would hopefully get treatment and deliver a healthy baby.

If that didn’t work, however, there’s not much a physician can do because even if the doctor may think its wrong, it is all in the hands of Sheryl. It would take a lot of time, effort, and good convincing to help Sheryl out. If that didn’t work, then it would be no use to take the case to court because there is no way a person, much less a physician can change what Sheryl wants overall. She is responsible on how she wants to take care of herself during her pregnancy. The live of her child is in her hands, not the physicians.

Y.R. - Med High

12.4.08

If I were Sheryl's physician, I would try to pursue her to eat a normal diet, and try to convince her that all the weight that she will be gaining during her pregnancy, she will be able to lose it. Probably another reason why Sheryl is doing this could be because she doesn’t want to have the child. What I would do is send her to psychologist to get her to think differently. If the psychiatrist doesn’t help her case, I would immediately send it to court because she is putting in danger the life of her unborn child, and not only the child's but her life too. I’m sure my decision is bias because this could be taken from different points of views. I'm sure she wouldn't really be convinced about the help because she is decided to lose weight, and because of she is an adult she can decide for herself.

C.D.R- South Texas High School for Health Professions

12.3.08

If I was a physician, I would get a court order to place Sheryl in a psychiatric hospital. Because it not only her life that is in danger, but the unburned child that she carries. Anorexia Nervosa is a life-threatening disease that has to be handled properly; therefore, if it cannot be controlled the patient should immediately be placed in an area where her recuperation is possible. If Sheryl wasn’t able to recover from this disease, the baby would probably be taken away from her. Because of the dangerous consequences of anorexia nervosa, Sheryl could see the baby as fat and don’t feed him/her. The baby is likely to be placed in a foster home since a very young age.

D.C. - Med High

12.3.08

If I were this woman's physician, I would take absolutely no chances. Seeing that she was my patient, I would do anything to help her in any way that I could. Giving her every opportunity for making the appropriate decision for the life of the baby and herself would be the first priority in any situation no matter what. After I have tried all that I can do to give her loving and caring
persuasion to fix the problem and she doesn't want to put in the effort herself, I would then try to incorporate legal persuasion. I would expect that her decisions about the baby, after it is born, would be a little insecure given the state she is in as of now. If she is already messing up and not caring about how this baby’s life is danger in the way she is treating herself, then you can conclude she isn't going to be the best role model and she will pass the same problems on to her child as he or she gets older. This the fact can be found in most health treating situations, smoking, drug addictions, alcohol, human, and animal abuse, even sex addictions. To determine whether this is ethical or not is only a personal opinion. It usually correlates with the feelings of abortion and if it is appropriate or not. I see that Sheryl's actions are irresponsible and reckless because if you are pregnant, you are going to get fat whether you like it or not. If you don't like being fat... then don't get pregnant. There are other options if you want children. If you have an eating disorder and you get pregnant, you probably don't have the stamina and endurance like normal people do, so it would be difficult for you and the baby anyway. Of course, it is Sheryl's personal decision whether or not she wants to take care of this baby. She gets to make the final decisions and what comes with them...the good and the bad consequences. Anorexia and other eating disorders, with or without pregnancies, are very sensitive subjects, and of course, you want to be mindful of all the details and facts. Every situation is different and should be handled in different ways. This involves both the family and the working staff at the hospital or doctor's office.

E.P. - Richland High School

12.3.08

If I were Sheryl's physician, I would make sure she did everything possible to maintain a healthy body, as well as keep the baby healthy. I would make her go to a class, and possibly go to counseling to make sure she realizes how dangerous of a situation she is in. If she refuses to be treated in the hospital after I have forced her to go to a class, then it would be necessary to attain a court order. I wouldn't attain a court order unless absolutely necessary but I would do whatever it takes too possibly save the baby's life, and start a healthier lifestyle for the mother.

J.S.

12.1.08

In my opinion, Sheryl needs psychiatric care for the well being of her baby. I personally think that the baby is the number one priority. It is extremely unethical to discharge her from the hospital for not following her treatment. I would try and get a court order to get her a higher level of care. Being anorexic alters your state of mind to where you are not thinking straight, it's like a drug that you cannot stop taking, therefore I think that she is not in the right position to be making any decisions about her health. She is sick therefore her mind isn't in the right place. Telling her that her baby could die may possibly alter her state of thinking but, for the baby’s sake, you cannot take that chance.

H.W- Aledo High School