

# Can Patients *Truly* Give Informed Consent To Transformative Medical Procedures?



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## What Are Transformative Experiences?

Transformative experiences, as conceived by philosopher L.A. Paul (2014), are experiences with 2 characteristics:

- (1) Epistemically Transformative: prior to experiencing them, one cannot know what they are like.
- (2) Personally Transformative: going through these experiences changes our outlook, usually through a change in perspective or values.

Becoming a parent is typically a paradigm transformative experience: most cannot truly understand being a parent until they are one, and doing so changes most people's values/preferences.

## Why Does This Matter?

This may seem like a theoretical problem for philosophers to cogitate over - after all, procedures like surrogacy are carried out, and psychedelic-assisted psychotherapy (PAP) is in a variety of clinical trials from Stages 1-3.

But if we have reason to believe that such procedures are carried out without proper consent, there is a serious medical ethics issue, with tangible consequences and implications for the administration of these procedures.

For example, PAP is associated with increased spiritual connection (Schutt et al., 2024). It is also effective against particularly stubborn forms of depression (Villiger, 2024).

If a staunch atheist consents to PAP, then it seems as if the consent was not informed, as it trespassed a core value of theirs. Given this, should such a patient be refused treatment that they seemingly consent to and desire?

## An Argument from Parity

From the previous diagram, we can conceive of a situation where Patient T and Patient S are *both* facing epistemically transformative procedures. For example, the experience of chemotherapy is something that we cannot know prior to undergoing it.

As such, we can make the following argument:

Premise 1: We can give informed consent to standard medical procedures

Premise 2: There is parity between the epistemic positions of Patient T and Patient S

Conclusion: Either both patients can give consent, or neither can; i.e. consent is possible from an epistemic perspective

## What is Informed Consent?

In medicine, informed consent is a consent standard that seeks to protect patient autonomy in the patient-doctor relationship.

It is difficult to define! Yet there is broad agreement that informed consent includes the following at minimum:

- (1) Disclosure
- (2) Understanding
- (3) Voluntariness
- (4) Competence
- (5) [Giving] Consent

These elements are necessary preconditions for a patient to give **autonomous authorization** to a procedure, thereby securing their informed consent.

Some philosophers have posited a test to see whether this benchmark has been reached: **alignment with patient values**. For if a patient gives consent in contrast to their values, it seems they were not truly informed (Jacobs, 2023).

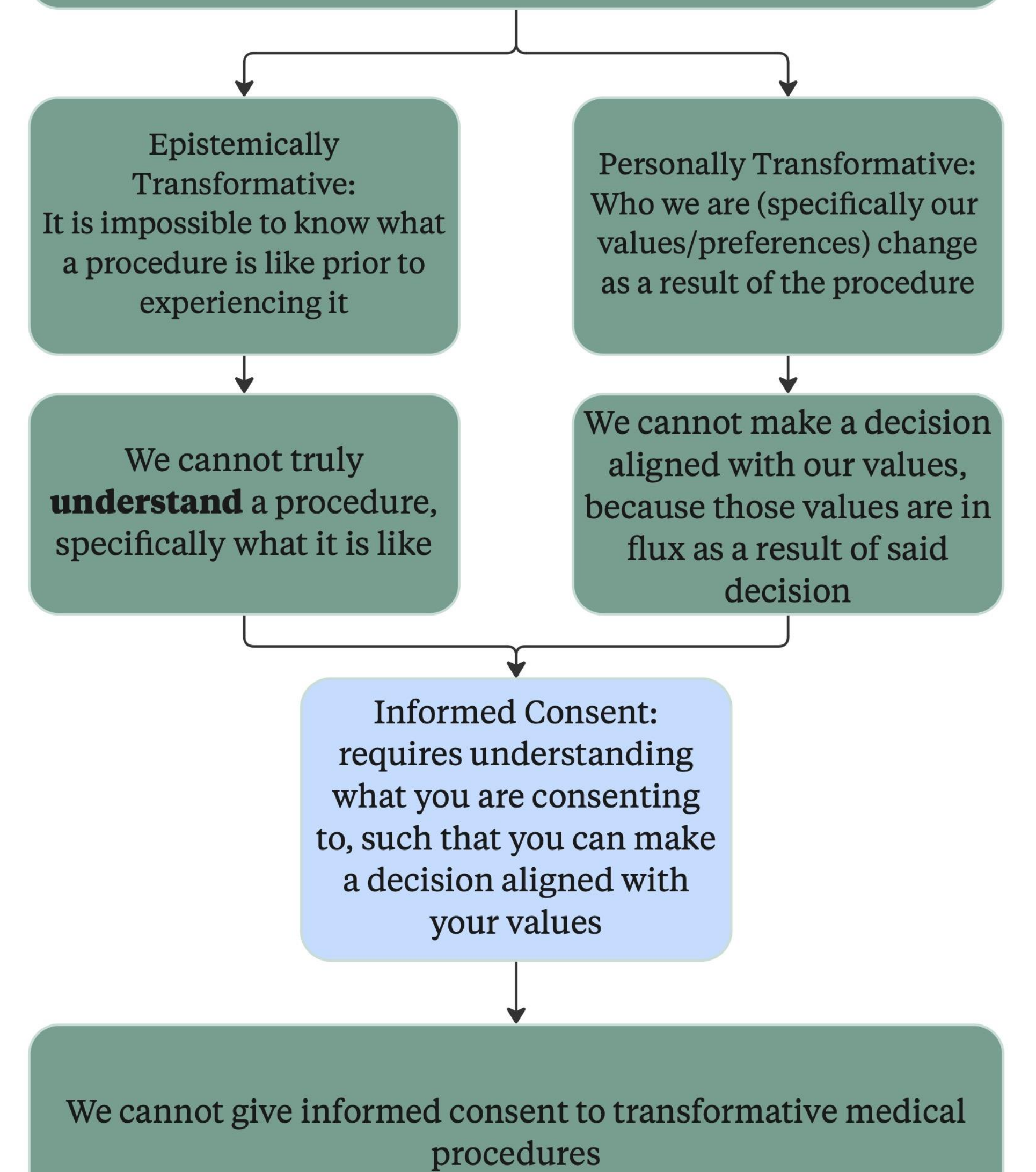
“Supporting decision-making...in accordance with their [patient] values is driven by wanting their choices to reflect who they are and what they care about, or, in everyday terms, if a treatment is right for them.”

- Edward Jacobs, Oxford Centre for Ethics and Humanities

## What Issue is Posed for Informed Consent?

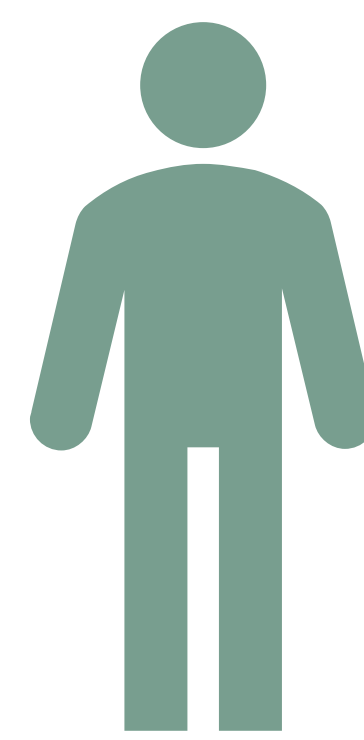
A transformative medical procedure is epistemically and personally transformative

For example: psychedelic-assisted psychotherapy, gender-affirming care, surrogate pregnancy



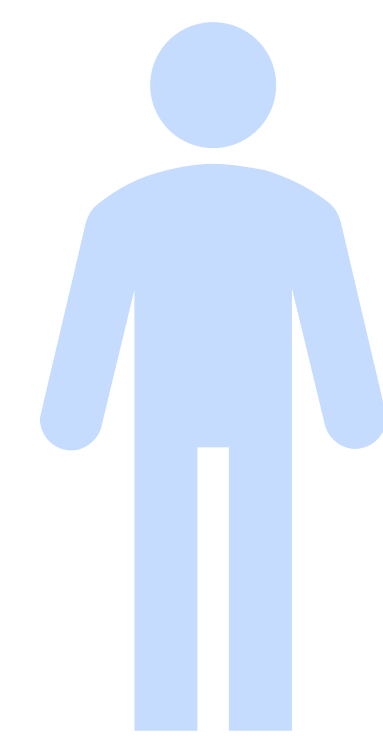
## What Do and Don't Patients Know?

Let's look at 2 possible patient scenarios; Patient T, facing a transformative procedure, and Patient S, facing a standard procedure, but for the *first time* (ex. first time undergoing chemotherapy).



Patient T

- Does not know what the procedure will feel like (epistemic transformation)
- Their values are likely to change as a result of the procedure; they are unable to assess whether the procedure is something subjectively valuable to them



Patient S

- Does not know what the procedure will feel like (epistemic transformation)
- Not likely to have any change in their values or sense of self (not personally transformative)

## What About Personal Transformation?

The issue of aligning a patient's decision with their values remains.

Two points are important here:

- (1) Smith and Sisti (2020) advocate for an "enhanced consent" standard for transformative procedures, where patients are informed of the possibility of personal transformation, and therefore able to consider whether they want their values to stay consistent; this addresses **disclosure**
- (2) Barring a patient from pursuing a treatment they desire out of concern for their values unduly strips a patient of their decision-making capacity (**competence**) and disrespects what Akhlaghi (2023) calls our "right to revelatory autonomy"

## Acknowledgements and Works Cited

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QR Code to Works Cited

