

Ethical analysis of objectives and means for the establishment, implementation and use of information systems for the oncology in Bouches-du-Rhone

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New information and communication technologies (NICT) are transforming the practice of medicine. Information systems (IS) appear complexes to most of users. What are the data hosted? Who can I transfer them? It is clear that patients as well as health professionals are struggling to locate in these new devices sprawling computerized exchanges. Physicians have to communicate through electronic media with patients? How do they communicate with each other? The health information circulating on the networks are secure? Certainly, development of communication tools is a chance to improve the quality of monitoring and management of patients. However, we still lack a step back and readability. However, this relative electronic opacity presents, at the end, risks to the practice of medicine need to know ahead, starting with the suspicion cast on medical confidentiality is the cornerstone of the special dialogue. On a methodological level, this research defines its object of study, being confined to the "patient circuit" of the cancer sector. Survey work on the needs of health professionals was conducted in health facilities in the Bouches-du-Rhone. He served in the implementation of an ethical model of IS based on the basis of four principles of biomedical ethics: autonomy, beneficence, non-maleficence, justice. The interest of this model is generating scores and ethical charter on initial expectations, the final realization and the means involved in the development of an IS in oncology. This thesis attempts to show that it is possible to reconcile ethics and technology by converting the technical language in the terminology of ethics. We want it to be a tool for continuous improvement in the service of an information system to "human face".

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