

Opinion Article

Ethical Issues in COVID-19 Vaccination for Health Care

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DESCRIPTION

The frontline Health Care Profession (HCP) was one of the first to receive the COVID-19 vaccine. Doctors, nurses and healthcare professionals who have direct contact with patients or handle biological substances are at high risk of exposure and illness and are responsible for the care and protection of patients, employees, and communities. However even in 2021 some HCPs are reluctant to vaccinate impairing the required immunization coverage, disease prevention and public health. Nearly 60 major medical and health organizations for hospital and geriatric home vaccination requirements in response to inadequate coverage due to continued delays in vaccination and the rapid spread of highly contagious delta variants. Many healthcare facilities across the country issue obligations in response to recent state requirements as a condition of participation in Medicare having defined the ethical values that make this on compulsory vaccination that prioritizes the obligation to protect and promote the public interests of patients, staff and communities as well as dissenting views on autonomy and individual rights. Increasingly informed outlets prioritize from medical intervention. This analysis also informs future policies regarding recommended booster immunization and whether regular series of vaccinations will be required as deltas or other novel variants similar to the epidemic of seasonal influenza is needed.

Both healthcare providers and organizations have a responsibility to safeguard patients and other people from the known and risks of infection. Fundamental ethical principles such as caring patients supporting their wellbeing and preventing damage to others form the basis of the duty to protect. In times of crisis members of society in this case the community of healthcare institutions should give their fair share to the common good unless there are valid medical exemptions. Despite the fact that HCP are dedicated to caring patients' needs first. According to the utility principle the ideal strategy is the one that successfully increases vaccine coverage and generates more net benefits than harms overall, taking into account the interests of all parties involved and the results of reasonable competing methods.

Health care organizations have a responsibility to safeguard everyone inside their facilities as well as the communities they serve to promote health and well-being and to prevent injury to as many people as possible. Patients and their families have a right to expect that HCP will do everything within its power to keep them from contracting diseases that could be avoided. The same expectations are held by other employees who could be at danger. The immunizations have a low risk of short-term negative effects while providing a significant benefit and level of protection. Unfortunately the current system's reliance on voluntary vaccination has not been able to reach the coverage levels required to shield patients, employees, and communities from threats that keep becoming worse. Majority of HCP who are anti-vaccine want the chance to make more educated choices. With more information, experience, and now complete Food and Drug Administration approval, more people will probably be convinced. High vaccination coverage is however persistently by HCP who opposed to vaccination and this poses a risk to patients HCP, and the general public. The increase in COVID-19 cases and hospitalizations rapid spread of the more dangerous highly transmissible Delta variant and persistently insufficient immunization coverage despite ample evidence of vaccine safety and efficacy of forced vaccination policy.

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