

This response was submitted to the consultation held by the Nuffield Council on Bioethics on *Medical profiling and online medicine: the ethics of 'personalised' medicine in a consumer age* between April 2009 and July 2009. The views expressed are solely those of the respondent(s) and not those of the Council.

QUESTIONS ANSWERED:

Question 01 - Health care as a consumer good

ANSWER:

In a health service free at the point of contact, no. There are some instances where direct access is a sensible approach but the threat to the gullible Or merely ill- informed is substantial.

Question 02 - Validity of information

ANSWER:

Yes- those providing access to technologies of unproven value should bear the cost of pre- and post-test counselling and undertake adequate research to determine whether the introduction of their service is beneficial to subjects.

Question 03 - Prevention

ANSWER:

No - we need to know whether the technologies are helpful in some circumstances and then - if they are made available in the NHS.

Question 04 - Who pays?

ANSWER:

No- the private providers should pay.

Question 05 - Your experiences

ANSWER:

No- at present it remains likely that any health provider I would consult would have access to my GP records or Emergency care Summary. If I had a serious illness on complex therapy I would consider a universally accessible resource

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Question 06 - Your experiences

ANSWER:

No- If I had an otherwise inexplicable illness

Question 07 - Your experiences

ANSWER:

No- collapse of the NHS

Question 08 - Advertising health care products

ANSWER:

My main concern is unnecessary or unnecessarily expensive treatment/investigation. GP or pharmacist access better in most circumstances.

Question 09 - Your experiences

ANSWER:

**No- quality of advice available when supplemented by telemedicine resource
environ mental degradation caused by unnecessary travel**

Question 10 - Who pays?

ANSWER:

Yes - it should be one option - and indeed already is in parts of Scotland

Question 11 - Your experiences

ANSWER:

No- I can't imagine doing so at present unless ill and being failed by the NHS

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Question 12 - Regulation

ANSWER:

No- more regulation on private providers to ensure they only provide potentially beneficial services and pay for resultant harms - as the NHS has to do

Question 13 - Responsibility for harm

ANSWER:

Yes- if the primum non nocere principle is broken then those responsible should pay pregnancy tests are an established technology with known false positive and false negative rates

Question 14 - Quality of information

ANSWER:

Yes, probably a mix of public and private funding as it is still a developmental area