

**29th EUROPEAN CONFERENCE
ON PHILOSOPHY OF MEDICINE AND HEALTH CARE
19 – 22 August 2015**

MEDICALISATION

PROGRAMME

Wednesday, 19 August	VENUE: THAGASTE ACADEMIESTRAAT 1, 9000 GHENT
16.00-18.00	REGISTRATION TAGASTE
18.00-18.20	OPENING CEREMONY SPEAKERS: PROF. IGNAAS DEVISCH, BIOETHICS INSTITUTE, GHENT UNIVERSITY PROF. GUIDO PENNINGS, CHAIRMAN BIOETHICS INSTITUTE, GHENT UNIVERSITY PROF. ANNE DE PAEPE, RECTOR, GHENT UNIVERSITY DR. ROBERTO ANDORNO, PRESIDENT OF THE ESPMH, INSTITUTE OF LAW, UNIVERSITY OF ZURICH, SWITZERLAND ROOM: AUGUSTINUS
18.20-19.45	Key note 1 SPEAKERS: PROF. TRUDY DEHUE “WHY WE SHOULD NOT SPEAK OF MEDICALIZATION” PROF. FREDRIK SVENAEUS “WHAT KIND OF CREATURE IS ADHD? PERSONALITIES AND PATHOLOGIES IN THE NEUROPSYCHIATRIC ERA” <i>Chair: Prof. Ignaas Devisch</i> ROOM: AUGUSTINUS
20.00	WELCOME RECEPTION THAGASTE

Thursday, 20 August (morning)		VENUE: THAGASTE ACADEMIESTRAAT 1, 9000 GHENT					
9.15-10.00	Key note 2 PROF. ELI FEIRING: “ PRIORITY SETTING: SHOULD LIFESTYLE CHOICES MATTER?” <i>Chair: Prof. Veerle Provoost</i> ROOM: AUGUSTINUS						
10.00-10.30	BREAK						
	Session 1.1 Special seminar (see below) Room: LIBRARY	Session 1.2 Enhancement I ROOM: NICOLAAS <i>Chair: Arnason, Gardar</i>	Session 1.3 Consent ROOM: AMICITIA <i>Chair: Sandman, Lars</i>	Session 1.4 Assisted suicide, euthanasia and sedation ROOM: MONICA <i>Chair: Welie, Jos</i>	Session 1.5 Aging ROOM: HIPPO <i>Chair: Gastmans, Chris</i>	Session 1.6 Pain ROOM: MADAURO <i>Chair: Mills, Catherine</i>	Session 1.7 Special seminar (see below) ROOM: CARTHAGO
10.30-10.55		Self- and other-enhancement. Humanism with new means? Gelhaus, Petra	Uncovering medicalization bias in developing a measure of preventive misconception Sugarman, Jeremy et al.	Is physician-assisted dying on its way to becoming normal medical treatment? Snijdewind, Marianne et al.	Is biomedicalisation bad for you? The example of ageing Ehni, Hans-Joerg	Elderly and palliative care Pegoraro, Renzo	
11.00-11.25		Medicalisation and manipulating morality Gunson, Darryl	Pediatric clinical trials: the ethics of burden without consent Van Hoof, Wannes	Physician assisted suicide and the role of psychiatrists. Vollmann, Jochen; Gather, Jakob	Discourse biogerontology. Starting a public discourse by teaching bioethics Rheinsberg, Zoé; Ehni, Hans-Joerg	Ethical boundaries of palliative sedation Vandersloten, Goedele; Beyers, Fleur	
11.30-11.55		Curing, assisting, enhancing, altering Jotterand, Fabrice et al.	Can advance directives be used to consent to research participation in the event of dementia? Andorno, Roberto et al.	Evil Euthanasia – Why the ethical analyses of Nazi Euthanasia are still not good enough Dahl, Ellen Støkken; Nortvedt, Per	Aging, dis-function and access to care Lanoix, Monique	Mind the (Cartesian) gap Abbey, Hilary	
12.00-12.25		Biomedical enhancement: A remedy without a diagnosis Ahola-Launonen, Johanna	Parents ought not to have the power to consent to elective genitoplasty Uí Chonnachtaigh, Sorcha	Palliative sedation and euthanasia Raus, Kasper	Prevention of what? Ethical aspects of the medicalisation of aging Eichinger, Tobias		
12.30-12.55		The perfectionist fallacy in transhumanist thought Bessemans, Chris	Irrational choices – the challenge to the normative ideal of informed consent Chanska, Weronika		Ethics plays a role in the medicalisation of death Benton, Kathleen		
13.00-13.55		LUNCH VENUE: THAGASTE					

Thursday,
20 August
(morning)

VENUE:
THAGASTE
ACADEMIESTRAAT 1, 9000 GHENT

Session 1.1
ROOM: LIBRARY

Special seminar (part 1)
“The Biomedical Model and the Medicalization of Healthcare”

Chairs: Stephen Tyreman & Gerrit Kimsma

Topic

What is loosely referred to as the biomedical model (BMM) has dominated Western healthcare for over a Century. While the scientific biomedical approach has clearly expanded understanding of the human body and benefitted healthcare, criticisms have focused on its failure to model many contemporary health challenges effectively including chronic illness, complex multiple morbidities, medically unexplained symptoms and most if not all mental illness. Notwithstanding this widespread concern, a viable model to complement or replace the biomedical model has been slow to develop. Despite its promotion across most undergraduate healthcare training, George Engels’ bio-psycho-social model is “more honor’d in the breach than the observance”.

In this Special Session we will explore why it is proving so difficult to find alternative strong models while maintaining the strengths of the BMM. To what extent has the BMM contributed to the medicalization of human living and in a perverse way added to health problems? There is now good evidence, for example, that using an inappropriate mechanical model to explain acute non-specific back pain increases the likelihood of a patient becoming a chronic back pain sufferer.

Central to the issue are fundamental ontological and epistemological questions; particularly the question of how causation is to be understood. ‘Finding the cause of ...’ has been a medical mantra since the 19th Century when medical treatment evolved from prescribing medications for ameliorating symptoms to an aetiological focus on finding and eliminating causes. The strength and weakness of the BMM has been its implicit claim that causes for illness can be found deterministically and linearly. Abnormality X causes disease Y manifesting as illness Z. Although important modifications have been added, as Kathryn Montgomery noted in ‘How Doctors Think’, “the clinical ideal remains simplicity, a straight line from cause to effect.” Underlying this is a Humean ontological model of causation as separate and discrete entities regularly associating with each other to bring about experiences in the world, including illness,. But as Canguilhem and others famously noted 70 years ago, life forms are organisms that enjoy and are modified by a particular kind of relationship with their milieu, not mechanisms that respond automatically and mechanically to changing situations. Would a systems-based approach (as Engel originally advocated), or something similar that is more multifactorial and holistic better model the current healthcare situation? Medicine doesn’t operate in isolation, so what might be the implications for understanding key concepts such as diagnosis, the interface between medicine and society through the patient ‘sick role’, and relationships with the law, for example, and what place do values (rather than scientific ‘facts’) have in identifying health ‘problems’ as medical?

This *special session* will focus on how these questions should be addressed and, particularly, how they can be formulated to develop a deeper understanding of human health and more effective healthcare, while avoiding the tyranny of medicalization?

Contributions:

- Dr. Rani Lill Anjum (Norwegian University of Life Sciences, Oslo), Prof. Stephen Mumford (University of Nottingham, UK):
“Causation in scientific methods and the medically unexplained”
- Dr. Stephan Sahm (Ketteler Hospital, Offenbach, Germany):
“On making a diagnosis”
- Dr. David Badcott (University of Cardiff, UK):
“The bio-medical model and therapeutic drug discovery”

10.30-12.55

Thursday,
20 August
(morning)

VENUE:
THAGASTE
ACADEMIESTRAAT 1, 9000 GHENT

Session 1.7
ROOM: CARTHAGO

Special seminar
“Medicalizing the subject”

Chair: Ignaas Devisch

Topic:

Medicalization is at a turning point it seems and therefore, it is interesting and necessary to step back and retrace its philosophical origins. What is medicalized and who is to be medicalized? From La Mettrie on, the idea of repressing the subject’s enjoyments is at play. Next to that, we want to focus on the potential of this concept for today’s discussions on medical overconsumption, clinical diagnosis and digitalization. All of these topics are related to the question how subjects behave or are supposed to behave in today’s society. Consequently, debates on medicalization cannot be considered properly without questioning the idea of normalization and its effect upon the way the subject is thought in modern society in general and today’s society in specific. Finally, we want to think about the future analytical potential of the concept of medicalization. If social critique will still be of importance in tomorrow’s medicine, much will depend upon the way we deal with this crucial question.

10.30-12.55

This *special session* consists of four 20 minutes input talks and an open roundtable where the audience can participate.

Contributions:

- Prof. Ignaas Devisch (Ghent University, Belgium):
“Why do we love what we used to hate? Medicalization at a turning point”
- Prof. Marc de Kesel (Saint Paul University, Ottawa, Canada):
“Medicalizing (&) enjoyment. On La Mettrie’s the art of enjoyment and related matters”
- Dr. Jan de Vos (Ghent University, Belgium):
“Is digitalization the end of medicalisation as the subject knows it?”
- Prof. Stijn Vanheule (Ghent University, Belgium):
“Which kind of diagnosis in psychiatry?”

Thursday,
20 August
(afternoon)

VENUE:
THAGASTE
ACADEMIESTRAAT 1, 9000 GHENT

		Session 2.2 Enhancement II ROOM: NICOLAAS <i>Chair: Takala, Tuija</i>	Session 2.3 Harms and benefits ROOM: MONICA <i>Chair: Sugarman, Jeremy</i>	Session 2.4 Uterus transplantation ROOM: AMICITIA <i>Chair: Holm, Søren</i>	Session 2.5 Dementia ROOM: CARTHAGO <i>Chair: Pegoraro, Renzo</i>	Session 2.6 Medicalisation and autism ROOM: MADAURO <i>Chair: Häyry, Matti</i>	Session 2.7 Genetics Room: HIPPO <i>Chair: Pascal, Borry</i>
14.00-14.25	Session 2.1 (14.00-17.30) Continuation Special seminar (see below) ROOM: LIBRARY	Medicalisation and enhancement in public health McKeown, Alex	Balancing burdens and benefits in animal research Arnason, Gardar	Uterus transplantation: the only option thus the good one? Mertes, Heidi	Do ambient assisted living technologies medicalise care for people with dementia? Novitzky, Peter	The concept of medicalisation: a critique Podmore, Will	Resisting medicalization and geneticization? Young people's views Levitt, Mairi
14.30-14.55		Erectile dysfunction medications — Therapy, enhancement or solution in search of a problem? Robeson, Richard	Risk and benefits of pediatric phase I trial in oncology. A systematic review Waligora Marcin et al.	Is uterus-transplantation an example of an unwarranted medicalization? Sandman, Lars	Assistive care robots for elderly with dementia: human dependency and the technologisation of elderly care Felzmann, Heike	Should autistic traits be medicalized or demedicalized? Jaarsma, Pier	Commercialisation and genomic medicine Kerasidou, Angeliki et al.
15.00-15.25		Unfit for the <i>present</i>: Defending the medicalisation of personality Campbell, Michael	Early detection of primary thyroid cancer in children Grossi, Armando; Rosati, Paola	Uterine transplantation: Should living or deceased donors be morally preferred? Williams, Nicola J	Using Deep-Brain stimulation for Alzheimer's disease. Ethical and social implications Ienca, Marcello et al.	Neurodiversity and the medicalisation of autism Hughes, Jonathan	Ethical signposts for clinical geneticists in secondary variant and incidental finding disclosure discussions Dierickx, Kris et al.
15.30-15.55		Revisiting A. Buchanan's criticism of the extreme connectedness argument Sýkora, Peter	Is the biomedicalisation of personal genomics an advance or is it retrogressive? Shandera, Wayne Xavier	A gift for life? Guntram, Lisa	Medicalization of the mind and human love... Intimacy and sexuality in the context of dementia Mahieu, Lieslot	Autism spectrum disorder: Genetics and ethics Hens, Kristien	Biobanks and returning individual research results Neiders, Ivars
16.00-16.25		Bio-implants, self-management and the uncanny Zwart, Hub	Enrolling the global poor in clinical research. What is the essential ethical concern? Malmqvist, Erik	Whole body gestational donation Smajdor, Anna	Euthanasia in persons with severe dementia Gastmans, Chris		From medicalization to biosociality: Lessons from genetics Arribas-Ayllon, Michael
18.00		SOCIAL EVENT: BELGIAN BEER TASTING VENUE: THAGASTE					

**Thursday,
20 August
(afternoon)**

**VENUE:
THAGASTE
ACADEMIESTRAAT 1, 9000 GHENT**

**Session 2.1
ROOM: LIBRARY**

Special seminar

“The Biomedical Model and the Medicalization of Healthcare” - Part 2

Chairs: Stephen Tyreman & Gerrit Kimsma

Contributions:

14.00-17.30

- Prof. Rolf Ahlzén (University of Karlstad, Sweden):
“We still need Virchow”
- Dr. Andrew Edgar (University of Cardiff, UK):
“Medicalisation & the sick role”
- Prof. William E Stempsey (College of the Holy Cross, Worcester, MA, USA):
“Nosological values: the case of autism”
- Prof. Flavio Paranhos (Pontifical Catholic University of Goias, Brazil):
“Medicalization of obesity is a good thing”
- Prof. Stuart Rennie (University of North Carolina at Chapel Hill, NC, USA):
“Medicalization of HIV cure: philosophical and ethical issues”
- Prof. Lisa Campo-Engelstein (Albany Medical College, NY, USA):
“The Medicalization of Men’s Reproduction”

**Friday,
21 August
(morning)**

**VENUE:
THAGASTE
ACADEMIESTRAAT 1, 9000 GHENT**

08.30-10.00	<p align="center">Key note 3 SPEAKERS: PROF. GUIDO DE WERT: "THE MEDICALIZATION OF HUMAN REPRODUCTION: THE CASE OF PRENATAL SCREENING" PROF. LARS JOHAN MATERSTVEDT: "THE ETHICS OF TERMINAL SEDATION" <i>Chair: Prof. Guido Pennings</i> ROOM: AUGUSTINUS</p>						
10.00-10.30	<p align="center">BREAK</p>						
	<p>Session 3.1 Nudging, public health ROOM: HIPPO <i>Chair: Wiesing, Urban</i></p>	<p>Session 3.2 Enhancement III ROOM: MADAURO <i>Chair: Gelhaus, Petra</i></p>	<p>Session 3.3 Reproductive freedom, procreative choices ROOM: AMICITIA <i>Chair: King, Nancy</i></p>	<p>Session 3.4 Children ROOM: CARTHAGO <i>Chair: Nortvedt, Per</i></p>	<p>Session 3.5 Information, privacy and truth ROOM: MONICA <i>Chair: Malmqvist, Erik</i></p>	<p>Session 3.6 Country reports ROOM: NICOLAAS <i>Chair: Rehmann-Sutter, Christoph</i></p>	<p align="center">Session 3.7 Special seminar (see below) ROOM: LIBRARY</p>
10.30-10.55	<p>Is second order nudging ethically acceptable? Holm, Søren</p>	<p>Customising the Asian face Aquino, Yves Saint James</p>	<p>PGD and the duty to provide an open future Myskja, Bjorn</p>	<p>The imperative of the unknown: Caring for extreme preterm infants Hendriks, Manya J; Streuli, Jürg C</p>	<p>"Who can access my medical information?" – A new privacy paradigm for health data Tamin, Jacques</p>	<p>What type of discourse is present concerning ethical issues in Croatia? Borovecki, Ana</p>	
11.00-11.25	<p>Why the legitimacy of nudging needs to be empirically informed Vugts, Anastasia; van den Hoven, Mariëtte</p>	<p>Brain rhythms as potential targets for intervention in cognitive dysfunctions – An ethical approach from a humanistic perspective (human dignity) Barilan, Michael</p>	<p>Extended fertility preservation - just a medical reality or women's right? Caenazzo, Luciana; Tozzo, Pamela</p>	<p>Informing adolescents about their genetic information Katzenelson, Edna</p>	<p>A critique of the biomedical conception of truth Gerber, Berna</p>	<p>Ethical aspects of non-therapeutic male circumcision Earp B; Ulman YI; Cosgun E; User I; Ozveri H</p>	
11.30-11.55	<p>Prevention and lifestyle: nudging and freedom Van den Hoven, Mariëtte; Vugts, Anastasia</p>	<p>Self-medicalisation: a trend for the future? Brukamp, Kirsten</p>	<p>Women's agency in the use of reproductive technologies - An updated feminist critique of medicalisation Huebel, Sylvia</p>	<p>How do we relate to each other? Van Parys, Hanna et al.</p>	<p>Never mind that I am a complete orphan. The main thing is that I know the truth! Konecna, Hana</p>	<p>Whose the baby, and whose the birth? Leissner, Naomi</p>	
12.00-12.25	<p>Breast cancer screening in Norway through the lens of biomedicalization Solbjør, Marit</p>		<p>Defining infertility and the medicalisation of the wish to become a parent Cutas, Daniela</p>	<p>Including children in their health care Wangmo, Tenzin et al.</p>	<p>Do right and fear no one? Family physician and cancer screening, an ethical perspective Piessens, Veerle et al.</p>	<p>Ethical consideration on medical business in Japan: Genetic test and stem cell therapy Shimoda, Motomu</p>	
12.30-12.55	<p>The effects of an omnipresence of health checks Stol, Yrrah</p>		<p>Procreative choices and alternative concepts of harm Rozynska, Joanna</p>		<p>Ethics training for healthcare professionals Kessler, Carla; Rump, Babette</p>	<p>Adverse outcomes of in-vitro conceived very low birth weight twins Dollberg, Shaul et al.</p>	
13.00-13.55	<p align="center">LUNCH VENUE: THAGASTE</p>						

**Friday,
21 August
(morning)**

**VENUE:
THAGASTE**
ACADEMIESTRAAT 1, 9000 GHENT

Session 3.7
ROOM: LIBRARY

Special seminar
“Medicalization and its boundaries: conceptual and positional changes”

Chair: John-Arne Skolbekken

Topic:

Medicalization has for decades been conceptualised as the transformation of non-medical problems into medical problems. More recently it has been pointed out that this conceptualisation implies a clear boundary between what human problems belong to the realm of the medical profession and those that do not, whereas a more constructionist position would claim that no such clear boundary exists. The literature on medicalization demonstrates that there is a lot of boundary work going on, wherein such conceptualisations as over- and undermedicalization are among the concepts being discussed within the “traditional” medicalization framework. As new theoretical concepts, such as biomedicalization and pharmaceuticalization have also been introduced, the boundaries between them and medicalization are also subject for discussion. An important issue within this boundary work relates to whether medicalization should be studied from a normative approach, in line with the traditional medicalization critique, or whether a more neutral position is called for. One normative position that has arisen lately is that of medical doctors through the concept of overdiagnosis, reflecting a resistance against recent developments in medicine stemming from within the medical profession itself. Simultaneously we have witnessed a silence of the feminist critique against medicalization, perhaps substituted by a more consumerist demand for more and better medicine for women. These changes may indicate that we are witnessing positional shifts between women and medical doctors, and also between medical doctors, sociologists and bioethicists.

10.30-12.55

Contributions:

- Prof. John-Arne Skolbekken (Norwegian University of Science and Technology, Trondheim, Norway):
“Medicalization as a boundary object”
- Prof. Bjørn Hofmann (University of Oslo, Norway):
“Medicalization and overdiagnosis – same and different”
- Prof. Jorid Anderssen (University of Tromsø, Norway):
“Medicalization and positional shifts – women and medical doctors”
- Prof. Trude Gjernes (University of Nordland, Bodø, Norway):
“Medicalization and positional shifts - sociologists, medical doctors and bioethicists”

Friday, 21 August (afternoon)							VENUE: THAGASTE ACADEMIESTRAAT 1, 9000 GHENT
	Session 4.1 Lifestyle and prevention ROOM: CARTHAGO <i>Chair: Devisch, Ignaas</i>	Session 4.2 Abortion ROOM: MADAURO <i>Chair: Simonstein, Frida</i>	Session 4.3 Eggs and sperm ROOM: HIPPO <i>Chair: Cutas, Daniela</i>	Session 4.4 Medicalisation I ROOM: AMICITIA <i>Chair: Andorno, Roberto</i>	Session 4.5 Health and disease ROOM: NICOLAAS <i>Chair: Gefenas, Eugenijus</i>	Session 4.6 Emerging debates ROOM: MONICA <i>Chair: Borovecki, Ana</i>	
14.00-14.25	The risks of medicalizing risk De Grandis, Giovanni; Halgunset, Vidar	Obstetric ultrasound and the social structures of sympathy Mills, Catherine	Social egg freezing – A new medical technology and the challenges of modernity Wiesing, Urban	Contemporary social change and medicalization Barnet, Robert	Just food: changing the culture of possibilities to promote health Rawlinson, Mary C	The “innocence” of phenomenological ethics Nortvedt, Per	Session 4.7 Special seminar (see below) ROOM: LIBRARY
14.30-14.55	Personalised medicine and the moral obligation to change Kerasidou, Angeliki	Medicalising family “imbalance”: an ethical critique of sex-selection Shahvisi, Arianne	Social freezing, older mothers and the welfare of the child Pennings, Guido	Complexity of a bioethical analysis of medicalization Murano, Maria Cristina	Health, empowerment and capabilities Tengland, Per-Anders	Nano-medicine, expanding the biomedical gaze Vegeter, Mira W	
15.00-15.25	Medicalization and pathologization: Can the tension between prevention, prediction and health be avoided? Aurenque, Diana	Medico-legal challenges regarding termination of pregnancy for severe congenital anomalies Chima, Sylvester C	Gamete provision and legal parenthood Brandt, Reuven	Governing the process of medicalization: The role of institutions and public society Feys, Roel	Consumer autonomy, or patient autonomy: Marketization of health services Kekewich, Michael et al.	The recently adopted council of Europe convention against trafficking in human organs Van Assche, Kristof	
15.30-15.55	The medicalization of lifestyle: Demonizing persons and maligning virtues Tschaepe, Mark	What does it mean to terminate a pregnancy for “medical” reasons? Gaille, Marie	Using the same sperm donor for siblings: What it means to parents Somers, Sara et al.	What makes medicalisation effective: Two case studies Kim, Claire Junga	A four-fold conception of disease: infertility as a case-study Singh, Neil	Orphan drugs: Victims of personalized medicine? De Clercq, Eva; Elger, Bernice S	
16.00-16.25				Diderot and human Biology McLennan, Matthew R	Holistic medicalization: The concepts of health and disease in systems (P4) medicine Vogt, Henrik; Getz, Linn		
16.25-16.45	BREAK						
16.45-17.45	ESPMH GENERAL ASSEMBLY ROOM: AUGUSTINUS						
20.00	CONFERENCE DINNER VENUE						

Friday,
21 August
(afternoon)

VENUE:
THAGASTE
ACADEMIESTRAAT 1, 9000 GHENT

Session 4.7
ROOM: LIBRARY

Special seminar
"Quaternary Prevention (P4) or First do not harm "

Chair: Marc Jamouille

Topic:

Quaternary prevention (P4), an answer of family doctors facing overmedicalization aims to protect the patient or population against the dangers of medicine. Harmful effects can appear with preventive activities (example: prostate cancer screening by PSA) such as by therapeutic interventions (example: disruptive medicine). P4 promoted by the Wonca (World Organization of Family Doctors) is practiced in different ways around the world. The seminar should present examples of teaching and application of P4 in different countries. 6 short talks (total 45 min) will be followed by an open roundtable about the philosophical aspects of P4, where the audience can participate. Asking the question: « is acting always justified in medicine? », P4 opens our thinking to a philosophy of action. Questioning the best way to reduce uncertainty, P4 is rooted in a philosophy of knowledge. How to decide action or abstention? How to appreciate the danger of both? How to accompany a patient without harmful effects (*primum non nocere*)?

More about P4 on www.ph3c.org/p4.

14.00-15.55

Contributions:

- Dr. Marc Jamouille (Liège University, Belgium):
“Quaternary Prevention (P4)”
- Prof. Hamilton Wagner (Curitiba, Brazil):
“Beyond EMB – A quaternary prevention view of the literature”
- Dr. Patrick Ouvrard (Société de Formation Thérapeutique du Généraliste, France):
“The anthropological approach of care optimize Quaternary Prevention (P4)”
- Dr. Daniel Widmer (University, Lausanne, Switzerland):
“Philosophical tools for Quaternary Prevention (P4)”

**Saturday,
22 August
(morning)**

**VENUE:
THAGASTE
ACADEMIESTRAAT 1, 9000 GHENT**

09.15-10.00	<p align="center">Key note 4 SPEAKER: PROF. MAARTJE SCHERMER: “ENHANCEMENT FOR THE COMMON GOOD? IS HUMAN ENHANCEMENT GOOD FOR US? AND IF SO, IN WHAT WAY?” <i>Chair: Prof. Sigrid Sterckx</i> ROOM: AUGUSTINUS</p>						
10.00-10.30	<p align="center">BREAK</p>						
	<p>Session 5.1 Risk and uncertainty ROOM: MADAURO <i>Chair: Provoost, Veerle</i></p>	<p>Session 5.2 Pharmaceuticalisation ROOM: AMICITIA <i>Chair: Badcott, David</i></p>	<p>Session 5.3 Medicalisation of death and salvation ROOM: MONICA <i>Chair: Stempsey, William</i></p>	<p>Session 5.4 DSM and mental health ROOM: CARTHAGO <i>Chair: Louhiala, Pekka</i></p>	<p>Session 5.5 Medicalisation II ROOM: HIPPO <i>Chair: Benaroyo, Lazare</i></p>	<p>Session 5.6 Elderly ROOM: NICOLAAS <i>Chair: Ahlzen, Rolf</i></p>	<p align="center">Session 5.7 Special seminar (see below) ROOM: LIBRARY</p>
10.30-10.55	<p>Should we revise Medicalization Theory? Di Marco, Silvia</p>	<p>Pharmaceuticals as solution for health problems Van den Bogaert, Sarah et al.</p>	<p>Negotiating death Curran, Dorothyann; Foreman, Tom et al.</p>	<p>Attempts to medicalise personality differences and their wrongness: The case of introversion Häyry, Matti</p>	<p>The medicalisation of everything King, Nancy M P</p>	<p>Self-determination of the elderly in Icelandic nursing homes Árnason, Vilhjálmur; Stefánsdóttir Ástríður</p>	
11.00-11.25	<p>The biomedicalization of public health risk Polzer, Jessica</p>	<p>Pharmaceuticalization of public health and ethics: the case of Ebola Thompson, Alison</p>	<p>The medicalised good Death Streeck, Nina</p>	<p>Medicalization in Psychiatry: Recovering lost knowledge Sedler, Mark J</p>	<p>Synthetic biology, medicalisation and the beast machine Takala, Tuija</p>	<p>The need for an existential phenomenological approach to the wish to die in elderly people Van Wijngaarden, Els et al.</p>	
11.30-11.55	<p>Medicalisation as dealing with uncertainty? Melse, Johan</p>	<p>The normative logic of pharmaceutical insurance Komparic, Ana</p>	<p>Between medicalization and de-medicalization of wishing to die Rehmann-Sutter, Christoph et al.</p>	<p>Medicalization and demedicalization of sexuality: the strange case of hypersexuality and ephophobia from DSM-IV-TR to DSM-5 Codato, Francesco</p>	<p>Medicalisation as hermeneutical injustice: the case of medically unexplained symptoms Wardrope, Alistair</p>	<p>An ethical approach to the taking care of the elderly at the end of their lives Boitte, Pierre</p>	
12.00-12.25	<p>Understanding overdiagnosis as a form of medicalisation Rogers, Wendy</p>	<p>New clinical trials regulation: another sign of pharmaceuticalisation? Gefenas, Eugenijus</p>	<p>The medicalization of salvation Welie, Jos V M</p>	<p>The contradiction of the DSM-V diagnostics criteria Corazza, Vera</p>	<p>Medicalization versus own responsibility Stroobant Joyce et al.</p>	<p>On the unfortunate misconception about facts and values in health technology assessment Van der Wilt, Gert Jan</p>	
12.30-12.55	<p>Risky play, children’s welfare, and minimal risk standard Dranseika, Vilius</p>	<p>Too little sex? Grunt-Mejer, Katarzyna; Chańska, Weronika</p>		<p>Responding to vulnerabilities of so-called “difficult” patients Rentmeester, Christy</p>	<p>Medicalisation: Is health care possible without it? Papagounos, Georgios</p>	<p>Ageing at the 21 century Simonstein, Frida; Lowenstein, A</p>	
13.00-13.15	<p align="center">CLOSING SESSION SPEAKERS: ESPMH BOARD MEMBERS ROOM: AUGUSTINUS</p>						

**Saturday,
22 August
(morning)**

**VENUE:
THAGASTE**
ACADEMIESTRAAT 1, 9000 GHENT

Session 5.7
ROOM: LIBRARY

Special seminar
“Health approaches to criminal behavior: a critical analysis”

Chair: Maartje Schermer & Sigrid Sterckx

Topic:

The aims of criminal justice and health care are quite distinct and the strong focus on safety that is typical of correctional facilities may clash with the strong focus on care and personal wellbeing that is typical of clinical health settings. Bringing both elements together has proven to be difficult. At this moment, many incarcerated individuals are deprived of adequate mental health treatment and care. Even in cases where offenders are deemed legally insane, many countries do not provide adequate mental health treatment. Criminal justice approaches typically emphasize retribution, deterrence, and protection of society. In this panel, we want to focus on alternatives to retributive punishment and massive incarceration policies by critically discussing potential alternatives. We will provide an overview of the benefits and risks that a health approach may offer, and present a hypothetical criminal justice scenario based on a non-punitive mental health and care framework. Specific topics such as early screening and addiction as a risk factor for violent crime will be presented and discussed in interaction with the audience.

10.30-11.55

Contributions:

- Dr. Farah Focquaert (University of Ghent, Belgium):
“A disease model of criminal behavior”
- Dr. Jona Specker (Erasmus MC Rotterdam, The Netherlands):
“Public health approaches to violent crime”

Commentaries:

- Prof. Maartje Schermer (Erasmus MC Rotterdam, The Netherlands)
- Prof. Sigrid Sterckx (University of Ghent, Belgium)