develop consensual regulations specific for me-too drugs and provides a regulatory framework proposal. This proposal relies on the enforcement of Phase IV Clinical Trials for me-too products and in the consistent incorporation of the obtained information into the prescription evidence-based system, as a tool for risk minimization. This approach is expected to increase the prescriber's reliance on long-term drug quality data over marketing strategies and to reduce, in the long-run, the risk for prescription bias.

It is concluded that the step up in regulations specific for me-too products, reached through a consensus between the parties, will maximize the benefits of me-too drugs approval and address the current ethical concerns associated to their use.

CONTENTS OF BIOETHICS IN THE AREA OF NATIONAL DEFENSE: AN EXPERIENCE WITH UNDERGRADUATE CIVILIAN STUDENTS

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The world agenda has discussed problems regarding the use of weapons of mass destruction, which might have biological and chemicals agents, considering the existence of international covenants on fundamentals rights and human security. In addition, the research of effective and efficient drugs, immunobiological and dietetic products has mobilized professionals from different areas and also financial and logistics markets worldwide.

In this text, it was presented epistemological elements which were extracted from my experience in the creation and implementation of two (2) theoretical academic modules - 'Bioethics and Defense' and 'Technologies, Ethics and States of Violence'. These modules are part of the curriculum of the undergraduate courses 'Defense and International Strategic Management' and 'International Relations' of a Brazilian public university. Among the specific contents of Bioethics, it was highlighted those related to Techno-scientific innovations that pointed to deep links with the National Defense and Security themes, both during times of Peace and in times of exception. These questions indicated potential ethics conflicts related to those technologies that might result in development of a modified human being, by intervention of enhancement, changing or improvement, because they concerned the research of dual or sensitive technologies carried out by the defense industry or the academic world. These inquiries demanded theoretical support from Ethical Theories, Justice Theories, discussions about Foucauldian ideals as well as the understanding of the National Research Ethics Committee system (Comissão Nacional de Ética em Pesquisa - CEP-CONEP).

ORGAN DONATION: A HIDDEN FACTOR IN SUPPORT FOR EUTHANASIA

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The role of organ transplantation in expanding euthanasia legislation has often been underappreciated. While popular and ethical discussion regarding legalization often focus on the issues of autonomy, right to die and dignity, an interest for euthanasia among medical professionals and decision-makers may be driven by more pecuniary and practical considerations.

This is especially true for the transplant community which prioritizes quick harvesting of organs from euthanasia patients while barely engaging with the ethical issues and their own incentives regarding euthanasia. Thus, following a recent legalization of euthanasia in Quebec the most pressing concern expressed among professionals engaged in transplantation appears to have been the ways to swiftly proceed with organ harvesting without hurting family. (Achille M. Using Canadian code of ethics for psychologists to determine

acceptability of organ donation following medical assistance to die. In: Massey et al, eds. Ethical, legal and psychosocial aspects of transplantation. Global challenges. Pabst Science Publishers, Lengerics 2017; 113-122) Similarly, a discussion at a recent ELPAT congress in Rome 2016 was focused mainly on logistics of harvesting organs from euthanasia patients without acknowledgment of the role that incentive to obtain organs might play in their own attitudes toward euthanasia.

As discussed elsewhere transplant community has been myopically focused on increasing the supply of organs, recently suggesting abandonment of such long standing postulates as dead donor rule (Nair-Collins M, JME 2014), and embracing ever widening indications for euthanasia (e.g. mental disorders, Alzheimer disease), all while often ignoring numerous promising alternatives to transplantation such as regenerative medicine, artificial and bioartificial organs. Recently, organ donation euthanasia procedure was suggested, consisting in euthanasing the candidate, remove all organs from the person while he is still alive, with heart removal concluding the procedure (Wilkinson, Savulescu, Bioethics 26: 1: 32-48).

None of this is necessary. Slovenian ethics committee in 2012 has declared against the use or organs from donors killed by euthanasia. Slovenian model of organ transplantation is a living proof that an adequate transplantation program can be sustained without resorting to ethically controversial practices.

THE PROGRAM MORE DOCTORS FOR BRAZIL/PMMB FROM A BIOETHICS PERSPECTIVE

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The More Doctors Program for Brazil (Programa Mais Médicos-PMMB), while public policy has its historical process of three prominent elements: as social units that share politics, such as those that confer materiality and state policy. Data from the Ministry of Health indicate about 14,100 doctors allocated in 3,785 municipalities, which 77% were allocated to municipalities with priority/vulnerability criteria. The political moment it was conducive for the construction of the Health Agenda that emerged at the heart of the political debate, demanding actions and decisions from political authority and institutions. The thesis that the PMMB provides justice and guarantee access to primary health care is based on Norman Daniels' Theory of Justice, which proposes a reflection on three aspects regarding health needs: 1st) health has a special moral importance; 2nd) when inequality of health can be considered unfair and 3rd) how we can meet our health needs if we cannot supply all our needs. The ideology of the PMMB addresses the first aspect of the Theory of Justice insofar as health is a social right inscribed in the Federal Constitution. Is this inequality considered unfair if it does not consider primary care as the guiding and structuring axis of Brazil's Sistema Único de Saúde (SUS - Single Health System), whose guidelines are universality, completeness and equity. And ultimately, the inclusion of health on the agenda of other public policies is more than considering a problem of scarcity or allocation of financial resources.

MINDREADING REPORT: COULD THE INTERPRETATION OF NEUROIMAGING BY fMRI CAUSE THREAT TO COGNITIVE PRIVACY?

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The recent development of the fMRI has increased our understanding of cognitive processes. The range of this application has spread to various fields and even new, various societally relevant applications have been discussed (e.g. application in forensic psychiatry, crime

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