



ADVANCEMENTS IN GENOMIC MEDICINE HARNESSING CUTTING-EDGE TECHNOLOGIES FOR HEALTH AND DISEASE INSIGHTS - PRIVACY AND ETHICAL CONCERNS

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ABSTRACT

Genetic testing has revolutionised disease diagnosis, treatment, and prevention in the medical field. This study explores the rapidly developing field of genomic medicine, highlighting developments while negotiating the complex issues of genetic testing privacy and ethics. The study carefully considers the difficulties of protecting patient genetic data and suggests strategies based on awareness-raising, education, and flexible consent-processing. The all-encompassing framework aims to provide a strong ethical basis by enforcing stringent access rules, anonymising data, and guaranteeing regulatory compliance. This study promotes public awareness-building and education of healthcare providers to create a climate in which people actively engage in decisions about their genetic information. Besides, it adds to the conversation about responsible and ethical practices in genomic medicine, protecting patient privacy and advancing the field towards a future of compassionate and knowledgeable healthcare by highlighting the dynamic nature of consent and the constant need for careful monitoring.

Keywords: Artificial Intelligence, Machine Learning, Genetics, Genomic, Healthcare

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I. INTRODUCTION

Genomic medicine is a game changer in healthcare as it utilises the information stored in a person's makeup to guide personalised choices. Essentially, genomic medicine employs technologies to analyse genes, explaining how genetics impact our health and diseases. Thanks to the decoding of the genome and the development of high-throughput sequencing techniques, this field has made progress [1]. It holds the potential for customised treatments and a better understanding of mechanisms. One cannot overstate the importance of genetic data in advancing healthcare. It is a fundamental component in deciphering the complexities of medical diseases. Genomic information gives Clinicians a degree of accuracy and predictability, which predicts susceptibility to diseases and directs specific therapy techniques [4].

As we enter the era of precision medicine, genetic insights play an increasingly important role in developing personalised treatment plans [2]. This research aims to shed light on the cutting-edge field of medicine, highlighting its successes and obstacles. While acknowledging the progress made in decoding the genome and its impact on healthcare and disease, the paper also delves into the considerations of privacy and ethics in testing [3].

Every new genetic test raises important questions about how best to utilise it, how to administer it, and what to do with the data obtained. These questions affect social policy, public health, and medicine. Should new born screening be required, or should individuals be free to accept or reject the test? Should individuals be able to restrict who has access to their test results [3]? What safeguards must be in place to guarantee that individuals are not subjected to discriminatory treatment based only on their genotype if test results are disclosed to other parties like insurers or employers? Generally, the ethical and privacy concerns revolve around genetic data collection, storage and utilisation.

II. PRIVACY CONCERNS IN GENOMIC MEDICINE

A. Overview of Patient Genetic Data

The world of genomic medicine depends a lot on collecting and looking at all kinds of genetic information. This huge data set covers a range from basic genetic stuff, like DNA sequence, to more complicated details, like how genes get expressed. Understanding the whole genetic landscape is important for determining the complex genetic causes of different diseases and conditions [5]. Researchers use all this information to ID genetic markers linked to specific diseases, which opens doors for targeted therapies and individualised treatment plans [5]. For personalised medicine, the patient's genetic profile is key for customising interventions based on an individual's unique genetic makeup so healthcare strategies can be more effective and precise.

B. Risks of Unauthorised Access

The challenge in genomic medicine comes from the vulnerability of patient genetic data and the capacity for unauthorised access [6, 7]. The major concern is misuse of this sensitive information, running from identity theft to employment or insurance discrimination based on an individual's genetic predisposition. This is also an aspect where genetic data could be exploited for sinister motives through unauthorised access. This move would threaten individual privacy and the integrity of genetic research [8]. Quite several privacy breaches are happening globally.

These real-life examples give exceptional insights into the real risks individuals face when their genetic information comes into the wrong hands. It brings out the importance of robust safeguards and, importantly, ethical considerations in handling genetic data.

C. Regulation of Genetic Data - Legal Frameworks

The magnitude of risks associated with genetic data has led to the establishment of legal frameworks for maintaining individual protection and controlling its usage. In this regulatory domain, two major players are recognised. The Health Insurance Portability and Accountability Act (HIPAA), operating within United States borders and across Europe, is the General Data Protection Regulation (GDPR) [9]. HIPAA lays down requirements aimed at safeguarding sensitive patient information, including but not limited to genetic data, ensuring safety valves are put up against unauthorised disclosure or misuse.

These standards facilitate private healthcare providers and organisations in observing both privacy-protective measures and secure maintenance practices [9]. GDPR's role at a broader international level is to oversee that personal data processing alongside movement activities – including having jurisdiction over handling individuals' genetic details - operate properly under its regulations. It provides better control levels on users' data while demanding a transparent yet accountable approach from those who manage to get their hands on such health information [9].

III. ETHICAL CONCERNS IN GENETIC TESTING

A. Autonomy - Informed Consent

In genetic testing ethics, obtaining informed consent is foundational and symbolises respect for personal autonomy and individual rights to decide on their genetic details [5]. Self-governance, self-determination, and self-rule are major components of autonomy. Reasoning, decision-making, and volition are prerequisites for autonomous agents or activities. It is required by moral, social, and legal norms to respect independent agents and their decisions. Respect for personal autonomy suggests that individuals have the ability or right to rule and direct themselves independently of outside interference. Respect for autonomy in the context of genetic testing and screening refers to a person's right to make an educated, autonomous decision on whether or not they want to be tested and whether or not they want to know the specifics of the test's results.

In addition, autonomy pertains to the individual's right to avoid outside influence when making critical life decisions, regardless of whether those decisions are influenced by genetics or additional factors [10]. Respecting an individual's autonomy additionally implies allowing them to decide how their genetic material, which has been submitted for analysis, will be used in the future for a particular purpose (including storing the genetic material and whatever data obtained from it in a registry file or genome bank to be used for later analysis) [5]. The worthiness of acquired approval in this setting must be considered as it upholds basic guarding principles from unsanctioned use or revelation of a person's genetic data. Getting an agreement extends more than just getting someone's signature on some paperwork; it calls for a thorough comprehension of implications, hazards associated, and potential gains related to gene testing [5].

The intricate universe that consists of our genetic information brings additional layers when trying to get meaningful consent. Troubles come into existence due to highly technical concepts involved, which often render individuals unable to understand all possible outcomes completely at once.

Alongside, continuously adapting nature within genetic research presents doubt, thus making hurdles in presenting complete consequential images post-genetic tests are done [12]. As these become common practices, talking proactively around such issues needs new ways like - enhanced informative content, genetics tutoring and keeping communication open-ended to enable individuals to be well aware. Plus, they are best empowered while deciding suitable solutions lining their values and preferences regarding their genetic data.

B. Privacy

Privacy is a crucial ethical concern surrounding genetic testing. Normally, individuals have privacy when others do not have or lack access to them. They are entitled to privacy whenever they are left alone and are not subjected to unauthorised interference by others. When people have genetic tests, they have the legal capacity to make an informed, autonomous decision about whether or not others (such as spouses and related family members, employers, insurers, educational institutions, social organisations, and researchers) should know facts about their genome results [5, 12].

C. Confidentiality

Information about people across a broad and expanding spectrum of genetic variants linked to disease susceptibility can now be produced due to the quick development and widespread use of genetic testing [5]. Concerns regarding confidentiality and misuse of genetic information have been brought up by the possibility that third parties interested in a person's health may access and utilise such data. Genetic testing patients have a right to the confidentiality of their information, and some laws, like those from GDPR, forbid bias based on genetic details obtained regarding an individual by insurers, employers, and other third parties [13]. Medical professionals who conduct and interpret genetic testing or keep patient files containing test results are obligated by professional ethics to preserve the confidentiality of patients' medical records, notably their genetic information. Besides, these medical professionals should only share a patient's genetic data with outside parties following the patient's informed consent.

These professionals should also only participate in genetic testing if the patient requests it and gives their informed consent or if genetic testing is requested by other parties (for instance, to determine health care or related advantages or coverage for the subject) [13].

D. Genetic Discrimination

Genetic discrimination is when individuals are subjected to differential treatment by their insurance provider or employer due to a genetic mutation that either causes or raises the likelihood of an inherited disorder [11]. Those who are thinking about getting genetic testing often fear being discriminated against based on their genetic makeup. Justice and fairness are in jeopardy because of this possibility of prejudice. The genetic data of individuals may be of interest to numerous institutions. A person's future health status interests various stakeholders, including medical service providers, mortgage companies, financial institutions, educational loan officers, employers, and insurers. People have already had loans, jobs, and insurance rejected because of their genetic makeup [5, 14]. Such prejudice has happened in situations where the information was gained through genetic testing, especially when the individual is not aware. Disclosing a person's medical information without their consent is illegal and should not happen, especially in fragile data like those from genetic testing.

E. Psychosocial Impacts

Apart from autonomy, privacy, confidentiality, and genetic discrimination, another rising ethical consideration in genetic testing is the tests' psychosocial impacts. Genetic testing has significant psychosocial ramifications for those who receive genetic information, even beyond the domains of consent and legality [15]. Finding out one's genetic predispositions can cause a person to feel a variety of emotions, such as relief, empowerment, or even anxiety and panic. These psychological impacts highlight the necessity of all-encompassing support networks. Understanding the possible psychological effects and developing effective techniques for offering strong psychological support is essential. Genetic counselling is a useful tool that allows people to talk about and consider the emotional implications of genetic testing [15]. Genetic counsellors can support patients in managing their emotions, navigating the complexities of their findings, and making well-informed decisions regarding their medical trajectory [15]. Since mental health and genetics are closely related, involving mental health practitioners in the genetic testing process improves the support network even more.

IV. SAFEGUARDING PATIENT GENETIC DATA

Protecting patient genetic data is a significant concern that comes with unparalleled insights from advances in genomic medicine. The importance and volume of genetic data will only increase, making it more and more important to handle it securely and morally. Implementing strict access controls is one of the best ways to safeguard patient genetic data [16]. Medical and research institutions should have role-based access to genetic data. Role-based access guarantees that only authorised people with certain duties or responsibilities can access certain genetic information sets [17]. This granular approach limits access to sensitive material to those who need it to fulfil their assigned obligations, protecting against unauthorised viewing while still adhering to the concept of least privilege (see Figure 1.). It ensures strict access control, bolstering patient genetic data security.

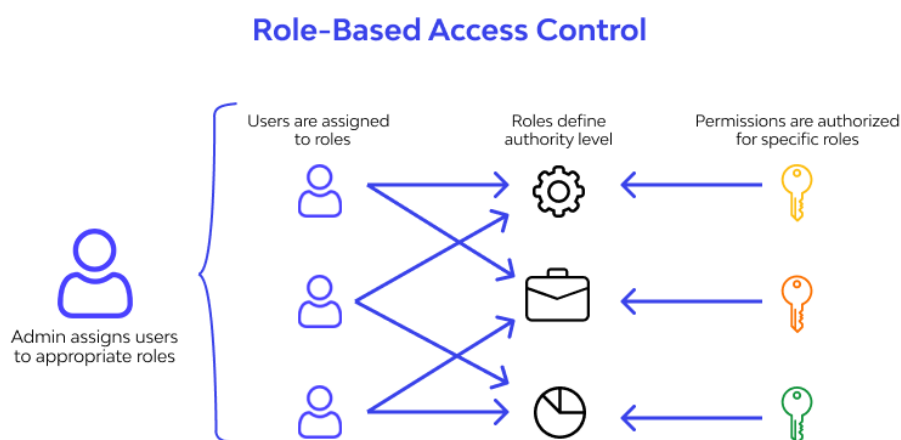


Figure 1 Role-based access control.

Also, medical institutions should invest in data encryption and secure storage practices—the encryption of genetic data in transit and storage protects against security breaches. Strong encryption techniques convert genetic data into a secure code that is unintelligible to outside parties. Simultaneously, secure storage procedures entail protecting genetic data repositories using strict controls, including audit trails, physical security methods, and access logs [18]. Together, these initiatives guarantee the integrity and privacy of patient genetic data throughout its entire existence.

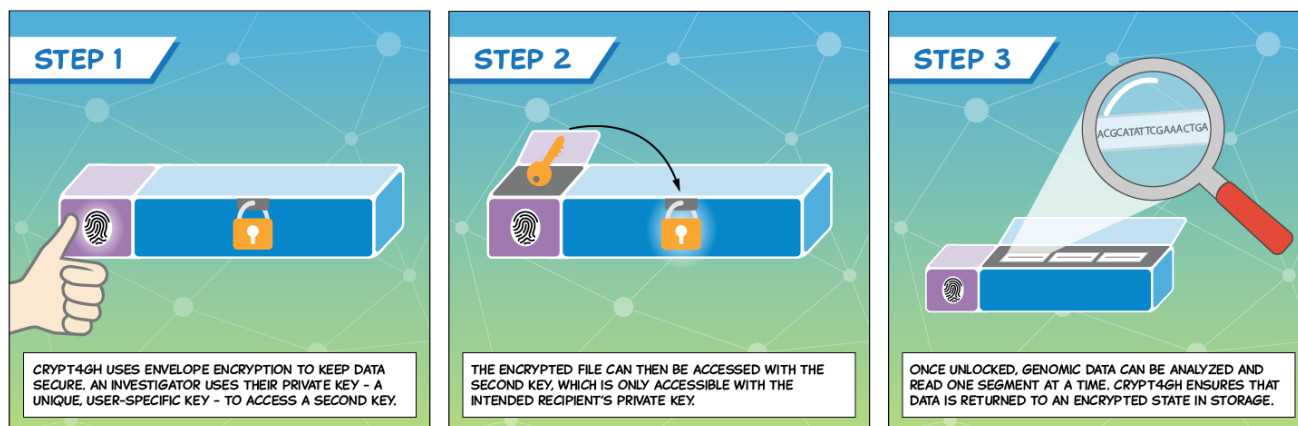


Figure. 2. Crypt4GH is the new strong approach to genetic data security.

From the Figure, The Global Alliance for Genomics and Health (GA4GH) has developed a new standard file container format called Crypt4GH that ensures genomic data security from the moment of first sequencing to sharing with experts at other organisations. There are two layers of encryption: the encryption of the data and the encryption of the unlocking process. There are two requirements for the recipient [18]. They require a key unique to the file being sent to access the contents within, and they also need a personal private key to authenticate themselves.

Apart from data encryption, data anonymisation is the key to reducing privacy hazards and maintaining the usefulness of genetic data for research and medical purposes [19]. Genetic data is separated from identifiable details using various methods, such as de-identification and pseudonymisation. In contrast, pseudonymisation substitutes fictitious identifiers for identifying features, and de-identification entails erasing personally identifiable information. These methods achieve a careful balance between maintaining the data's analytical utility and protecting privacy.

As aforementioned, institutions should adhere to regulatory frameworks ensuring strict compliance with rules like the Health Insurance Portability and Accountability Act (HIPAA) and the General Data Protection Regulation (GDPR). HIPAA is a federal law that mandates the development of national guidelines to prevent the disclosure of confidential patient medical data without the informed consent or awareness of the patient [20]. The Rule creates an equilibrium between safeguarding the privacy of individuals seeking care and healing and allowing significant uses of information. The Rule is intended to be comprehensive and flexible to handle the wide range of uses and disclosures that must be addressed, given the diversity of the healthcare marketplace [20]. GDPR, on the other hand, protects data, limiting access and what organisations can do with the genetic data. If someone is proven to violate these guidelines, they could face severe penalties and damages to their reputation. [21].

V. ADDRESSING PRIVACY AND ETHICAL CONCERNS

Ethics guides medical professionals, researchers and related individuals who might want to utilise genetic data; therefore, there is a need to address ethical concerns and privacy relating to genetic data [14]. Thorough training of medical personnel in the complex ethical issues raised by genetic medicine is essential. Training programmes should focus on the ethical ramifications of genetic testing and its technical components, encouraging patients to be more conscious of their rights, confidentiality, and the appropriate use of genetic information [10]. In order to maintain patient welfare and privacy as top priorities, this educational foundation equips medical practitioners to handle the ethical challenges that come up during genomic testing.

Besides, there is a dire need to raise public awareness regarding genetic testing. People who feel connected and knowledgeable about their genetic makeup can better make decisions about it. Public education efforts that explain the advantages and possible drawbacks of genetic testing should help to demystify the practice [22,23]. A culture where people are actively involved in the ethical decisions around their genetic data is fostered by highlighting the significance of informed consent, privacy protections, and the societal implications of genetic testing. Empirical evidence suggests that improving the consent procedure is essential for resolving ethical issues. Conventional consent forms frequently need to adequately explain the ramifications and complexity of genetic testing. The creation of straightforward resources that clarify the purpose of genetic testing, possible results, and the scope of data use is one area for improvement [5]. As the field develops, people should be able to ask questions and get updated information as part of an ongoing conversation about informed consent. Encouraging people to give informed consent protects confidentiality and privacy.

After thorough deliberation, this research realised that institutions dealing with patients' genetic data should incorporate dynamic consent models. Unlike static one-time consent, dynamic ones allow individuals to continually manage their preferences, guaranteeing that patients will always have control over their data during their healthcare journey. This paradigm recognises the dynamic nature of genetic research. Dynamic consent is consistent with autonomy and respect for personal decision-making by allowing people to modify their consent preferences over time.

VI. CONCLUSION

The complex balance of individual privacy and ethical issues in genomic medicine calls for steadfast focus. This study highlights the critical need to address these ethical quandaries alongside maintaining confidentiality. As advancements continue within the field of genetic testing, persistent attention to ethical conduct is a key priority. The development of genetic science places constant attentiveness and flexibility at its core, crucially determining genetics data's conscientious usage – all with a view towards a future where profound advantages from genomics can be gained ethically and responsibly while preserving personal privacy.

REFERENCES

- [1] S. Kanungo, J. Barr, P. Crutchfield, C. Fealko, and N. Soares, "Ethical Considerations on Pediatric Genetic Testing Results in Electronic Health Records," *Applied Clinical Informatics*, vol. 11, no. 05, pp. 755–763, Oct. 2020, doi: <https://doi.org/10.1055/s-0040-1718753>.
- [2] K. Hede, "Genomic Medicine is (finally) revolutionizing health care | AHA Trustee Services," *trustees.aha.org*, 2021. <https://trustees.aha.org/articles/1290-genomic-medicine-is-finally-revolutionizing-health-care> (accessed Nov. 15, 2023).
- [3] L. B. Andrews, J. E. Fullarton, N. A. Holtzman, and A. G. Motulsky, "Social, Legal, and Ethical Implications of Genetic Testing," *Nih.gov*, 2001. <https://www.ncbi.nlm.nih.gov/books/NBK236044/>
- [4] J. Shendure, G. M. Findlay, and M. W. Snyder, "Genomic Medicine—Progress, Pitfalls, and Promise," *Cell*, vol. 177, no. 1, pp. 45–57, Mar. 2019, doi: <https://doi.org/10.1016/j.cell.2019.02.003>.
- [5] Institute of Medicine, "Emerging Technologies in Drug Development," *Nih.gov*, 2012. <https://www.ncbi.nlm.nih.gov/books/NBK116452/>
- [6] S. Wang *et al.*, "Genome privacy: challenges, technical approaches to mitigate risk, and ethical considerations in the United States," *Annals of the New York Academy of Sciences*, vol. 1387, no. 1, pp. 73–83, Jan. 2017, doi: <https://doi.org/10.1111/nyas.13259>.
- [7] S. Arshad, J. Arshad, M. M. Khan, and S. Parkinson, "Analysis of security and privacy challenges for DNA-genomics applications and databases," *Journal of Biomedical Informatics*, vol. 119, p. 103815, Jul. 2021, doi: <https://doi.org/10.1016/j.jbi.2021.103815>.
- [8] T. R. Brown, "WHY WE FEAR GENETIC INFORMANTS: USING GENETIC GENEALOGY TO CATCH SERIAL KILLERS," *The Columbia science and technology law review*, vol. 21, no. 1, pp. 114–181, 2019, Available: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7946161/>
- [9] C. State and B. C. Ge, "International: GDPR v. HIPAA - Comparing and contrasting two important data protection regimes," *DataGuidance*, May 04, 2023. <https://www.dataguidance.com/opinion/international-gdpr-v-hipaa-comparing-and-contrasting>
- [10] J. P. Olejarczyk and M. Young, "Patient rights and ethics," *National Library of Medicine*, Nov. 28, 2022. <https://www.ncbi.nlm.nih.gov/books/NBK538279/>
- [11] "What is genetic discrimination?: MedlinePlus Genetics," *medlineplus.gov*. <https://medlineplus.gov/genetics/understanding/testing/discrimination/#:~:text=Genetic%20discrimination%20occurs%20when%20people>
- [12] J. Leefmann, M. Schaper, and S. Schicktanz, "The Concept of 'Genetic Responsibility' and Its Meanings: A Systematic Review of Qualitative Medical Sociology Literature," *Frontiers in Sociology*, vol. 1, Jan. 2017, doi: <https://doi.org/10.3389/fsoc.2016.00018>.
- [13] AMA, "Third-Party Access to Genetic Information | ama-coe," *code-medical-ethics.ama-assn.org*. <https://code-medical-ethics.ama-assn.org/ethics-opinions/third-party-access-genetic-information/#:~:text=Patients%20who%20undergo%20genetic%20testing>
- [14] E. W. Clayton, B. J. Evans, J. W. Hazel, and M. A. Rothstein, "The law of genetic privacy: applications, implications, and limitations," *Journal of Law and the Biosciences*, vol. 6, no. 1, pp. 1–36, May 2019, doi: <https://doi.org/10.1093/jlb/lasz007>.

- [15] E. Winchester and S. V. Hodgson, "Psychosocial and Ethical Issues Relating to Genetic Testing for BRCA1 and BRCA2 Breast Cancer Susceptibility Genes," *Women's Health*, vol. 2, no. 3, pp. 357–373, May 2006, doi: <https://doi.org/10.2217/17455057.2.3.357>.
- [16] Z. Wan, J. W. Hazel, E. W. Clayton, Y. Vorobeychik, M. Kantarcioglu, and B. A. Malin, "Sociotechnical safeguards for genomic data privacy," *Nature Reviews Genetics*, vol. 23, Mar. 2022, doi: <https://doi.org/10.1038/s41576-022-00455-y>.
- [17] M. Maxsenti, "Types of Access Control - Rule-Based vs Role-Based & More - 2022 Guide," *Genea*, Sep. 16, 2021. <https://www.getgenea.com/blog/types-of-access-control/>
- [18] "Crypt4GH: a secure method for sharing human genetic data," *www.ga4gh.org*, 2019. https://www.ga4gh.org/news_item/crypt4gh-a-secure-method-for-sharing-human-genetic-data/ (accessed Nov. 16, 2023).
- [19] Z. Zuo, M. Watson, D. Budgen, R. Hall, C. Kennelly, and N. Al Moubayed, "Data Anonymization for Pervasive Health Care: Systematic Literature Mapping Study," *JMIR Medical Informatics*, vol. 9, no. 10, p. e29871, Oct. 2021, doi: <https://doi.org/10.2196/29871>.
- [20] U.S. Department of Health and Human Services, "Summary of the HIPAA privacy rule," *HHS.gov*, Oct. 19, 2022. <https://www.hhs.gov/hipaa/for-professionals/privacy/laws-regulations/index.html>
- [21] M. Burgess, "What is GDPR? The summary guide to GDPR compliance in the UK," *WIRED UK*, Mar. 24, 2020. <https://www.wired.co.uk/article/what-is-gdpr-uk-eu-legislation-compliance-summary-fines-2018>
- [22] L. J. Finney Rutten, S. E. Gollust, S. Naveed, and R. P. Moser, "Increasing Public Awareness of Direct-to-Consumer Genetic Tests: Health Care Access, Internet Use, and Population Density Correlates," *Journal of Cancer Epidemiology*, vol. 2012, pp. 1–7, 2012, doi: <https://doi.org/10.1155/2012/309109>.
- [23] J.-J. Chin and H.-W. Tham, "Knowledge, Awareness, and Perception of Genetic Testing for Hereditary Disorders Among Malaysians in Klang Valley," *Frontiers in Genetics*, vol. 11, Dec. 2020, doi: <https://doi.org/10.3389/fgene.2020.512582>.

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