

### Medical Ethics : Our duty now

The word ethics is from Greek word ethos, the manner and habits of man or of animals. It indicates the rules or principles which govern right conduct. In case of medical ethics, for a long time till date, it applies about the values and guidelines that should govern decisions in medicine. From time immemorial, several opinions had come in different countries all centered around it (ethics), as an issue of right and wrong. There are several definitions. Some want to relate it with professionalism. These are close to one another and there is need of relationship.

History of Medical Ethics e.g. Hippocrates (460-377 BC), code of Hammurabi (about, 2200 BC) Thomas Percival (1803, Geneva Declaration 1948) etc. are there. Even one can see the changes of Hippocratic oath as the old Hippocratic Oath –425 BC and a new Hippocratic Oath –1998 AD<sup>1</sup>. Many of us read different books of western ethics. But our social environment, educational systems, religious beliefs and feelings, cultural heritage, available resources etc, are different.

As such the two could not be same in several aspects and should be so.

The codes or systems of western countries are not made applicable or accepted by the people of eastern parts.

We have less formal teaching programme about medical ethics in undergraduate education. It is encouraging to see that BMDC has published the code of Medical Ethics and is distributing it to the doctors<sup>2</sup>. The oath is taken by the members and fellows of BCPS during convocation. Another step is its inclusion in the text books as chapters<sup>3,4</sup>.

Ethics in medicine was complementary to the teaching of symptoms and signs in Islamic University of Medina, Kufa, Bagdad, Bokhara, Samarkand from 7<sup>th</sup> century onwards. Between 8<sup>th</sup> century and the end of the 15<sup>th</sup> century Universities of Cordova, Toledo, Almeria, Eadiz etc. taught ethics along with medicine to their students.

From the religious points of view ethics has got very high value. 'On the day of Judgement the weightiest item is one's balance shall be one's good ethics, and nothing shall weight more than that'- asserts the Prophet (P,BHU) in one hadith<sup>5</sup>.

The Quranic verse wa mun uhyaahaa fakurrama uhannaasa jamee 'aa' (And he who saveth one life is as if he saveth the whole mankind –5 : 32) affirms that medical ethics occupy a position among the noblest of human morals<sup>5</sup>.

The old Indian Medical Ethics are the Caraka Samhita and the Susruta Samhita. In C. Samhita the physicians were told to lead a life a celibate, speak only the truth, eat no meat, be free from envy and carry no arms. Confucian ethics had different understanding. The centre of each person's life is not himself or herself but the family<sup>6,7</sup>.

Going through the different books of different times and of different countries, the truth is 'doctors belong to fraternity of noblest of professions'.

Because of different factors between east and west, as mentioned earlier, any attempt for adaptation of western ideas of medical ethics in Asia will face problems. Transferring an idea is like transplantation. Rejection is expected. We above two very important points in our civilisation- 'benevolence' and compassion. Previously we had the impression that bioethics was a western product. But these sort of ideas are now rapidly changing. Several countries like Japan, China etc are preparing the ethics as per their own need. American Academy of Orthopaedic Surgeons have their ethics<sup>8</sup>.

We the Asians should interpret the principles of biomedical ethics from the perspective of Asian belief. We should remember the following points while discussing the ethics - a) moral bindings, b) legal bindings, c) conventional rules and d) codes of conduct.

### **Moral Bindings**

For example, we should take the history very cordially and examine the patients very gently keeping in mind that he has reached me as he is in distress. In this doctor patient relationship, the patients should always feel that he is in the hand of a relation. We should have sufficient time to listen to the patients. Humane touch is mandatory.

### **Legal Bindings**

Physician should introduce himself to the patient and also record the details of patient with date, time and signature. Maintenance of privacy is a must. Confidentiality to be maintained and informed consent for examination and any procedure to be taken.

### **Conventional Rules**

In an era with society of progressively loosing human values attention is to be paid in all respects in particular to confidentiality. One should honour the comment of other doctor (colleagues). Patients' findings, clinical datas, diagnosis and prognosis should not be discussed in front of patients (if consent was not taken)<sup>8</sup>. Higher education or study on a topic needs due permission from Ethical Committee which has again rules of its own.

### **Codes of Conduct**

The crafts of medical science is as old as mankind. We should believe the changes of codes over the years but always for the welfare of the patients. A global or universal code of medical ethics also seems paradoxical in the era of pluralism and postmodernism<sup>9</sup>. In 'the moral foundation of medical leadership the professional virtues of the physician as fiduciary of the patients- the detail description has been made<sup>10</sup>.

### **Violation of Ethics (Unacceptable Parts)**

There are certain topics which embarrass a physician.

Debates about public health ethics, equity and justice were discussed in "International debate about the right to health"<sup>11</sup>. Here few of those are mentioned. They need discussion and each may be a chapter for solution and decision :

Diagnostic procedures, private practice, gratification from pharmaceutical industries, self-promotion,

medical certificate, public hospital vs private consultation, decision about right or wrong treatment, chair-related post holding with special motives, accepting gifts, lunch and dinner, ethics in medical journalism (code of Ethics for Medical Press)<sup>5</sup> etc.

### **Oath**

Oaths are commitments. This is true for other professionals also. Several aspects are included in it. For us the following are few of those aspects

1. Confidence,
2. Physical, Mental, Social and spiritual help,
3. Help for healing
4. Obligations (Positive and negative)

Examples of positive obligations are

- a) Always to promote health and happiness,
- b) To inform dangers / risk of illness to a near one of patients (fatality, incurability, disabilities, complications etc),
- c) Informed consent, record maintaining, postmortem, confidentiality.
- d) Social and legal obligations

Examples of negative aspect are :

- a) Not to indulge in malpractice, any type of social, illegal professional practice.
- b) Never to have unusual personal relationship, black mailing, distortion of wittiness / medicolegal records,
- c) Never to cause personal, social embarrassment..

Health is a vital concern of every human being. Technology being its entrée into human activities long ago. The future sends ethical signals in two ways-man's hope to do and to be something; and signal of consequence. "There is no profession", Says Poul Ramsey, "that comes close to medicine in its concern to inculcate, transmit and keep in constant repair its standards governing the conduct of its members"<sup>12</sup>.

Physicians were thought to be man of wisdom – as such they were called, Hakeem derives from Hikmat or wisdom. Now also knowledgeable persons are doing this job. We should have relink our past and recent past, do self analysis, discuss among us and have necessary alterations and additions. The

editors/authors of 'Medical Ethics in the Contemporary Era' have rightly mentioned in the preface of the book'. The effort may prove to be a candle attempting to burn on a windy night to dissipate darkness to identify a path for the lonely wonderer.

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