

ETHICS IN MEDICAL PROFESSION

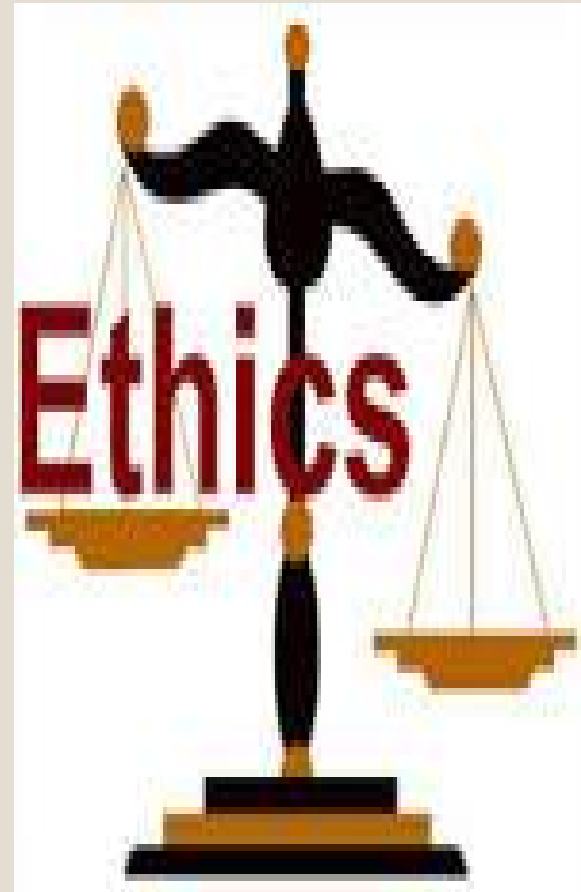
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“Ethics & Values in Public Governance”

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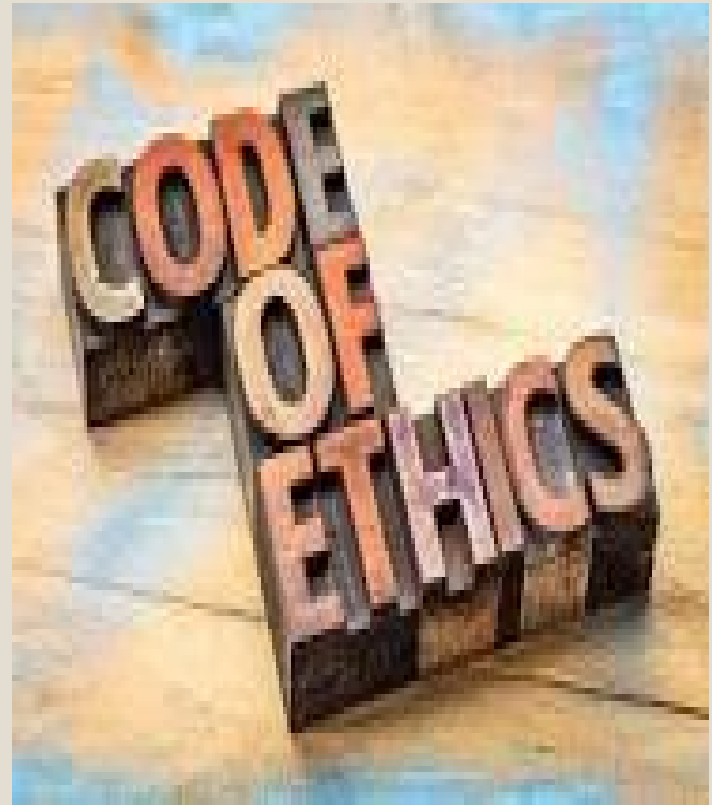
WHAT IS ETHICS?

- Ethics derived from 'ethos' means character or conduct
- Ethics is moral obligation
- Promotes welfare of human beings



WHY ETHICS IN MEDICAL PROFESSION?

- Inherent hierarchy in doctor patient relationship
- Vulnerability of patient
- Lack of knowledge about disease and treatment



PATIENT'S NARRATIVE

The power equation between doctor and patient can never be equal. Clearly, one feels at the mercy of, not just the doctor, but the whole medical system. One feels like a body that they are taking care of – or, given the degree of specialisation, one ends up feeling that each is looking at a particular organ, and how these organs are put together is anybody's responsibility.

Usha Rajaram

Ref: Indian Journal of Medical Ethics Vol IX No 3 July-September 2012

PROFESSIONAL CONDUCT, ETIQUETTE AND ETHICS REGULATIONS, 2002

- A physician shall uphold the **dignity and honour** of his/her profession
- Every physician should aid in safeguarding the profession against admission to it of those who are deficient in moral character or education.

CEHAT study reveals that 54% hospitals (261) did not have DMO and only 25 per cent hospitals had qualified nurses, 53 per cent did not have any qualified nurse

PROFESSIONAL CONDUCT, ETIQUETTE AND ETHICS REGULATIONS, 2002

- **Exposure of Unethical Conduct:** A Physician should expose, without fear or favour, incompetent or corrupt, dishonest or unethical conduct on the part of members of the profession.
- **Payment of Professional Services:** A physician should announce his fees before rendering service and not after the operation or treatment is under way.

PROFESSIONAL CONDUCT, ETIQUETTE AND ETHICS REGULATIONS, 2002

- **Obligations to the Sick-** No physician shall arbitrarily refuse treatment to a patient.

Example- denial of MTP service

Denial of services in public health system

- **Prognosis:** The physician should neither exaggerate nor minimize the gravity of a patient's condition.

Example- Hysterectomies done by inducing fear of cancer

PROFESSIONAL CONDUCT, ETIQUETTE AND ETHICS REGULATIONS, 2002

- Consulting pathologists /radiologists or asking for any other diagnostic Lab investigation should be done judiciously and not in a routine manner.

Example- unnecessary investigations for commission

UNETHICAL ACTS

Advertising

Rebates and Commission

Gifts from pharma companies

DOCTOR AS A RESEARCHER

Ensure that

- *the particular research proposal(s) has the due permission from the competent concerned authorities.*
- *such a research project(s) has the clearance of national/ state /institutional ethics committees / bodies.*
- *it fulfils all the legal requirements prescribed for medical research.*
- *the source and amount of funding is publicly disclosed at the beginning itself.*
- *proper care and facilities are provided to human volunteers, if they are necessary for the research project(s).*

Example- HPV vaccine trials

NON-DISCRIMINATION

- The registered medical practitioner shall not refuse on religious grounds alone to give assistance in or conduct of sterility, birth control, circumcision and medical termination of Pregnancy when there is medical indication, unless the medical practitioner feels himself/herself incompetent to do so.

Example- Denial of sterilization services to PVTG
Discrimination based on the religion

Outline of case facts

Samira Kohli, an unmarried woman, aged 44 years, consulted Dr Manchanda on May 9, 1995, complaining of prolonged menstrual bleeding. She was admitted and the consent form for hospital admission, medical treatment and also, surgery, were signed. The consent form for surgery said “diagnostic and operative laparoscopy. Laparotomy may be needed”. She was subjected to a laparoscopic examination under general anaesthesia. While Samira was unconscious and was being examined, Dr Lata Rangan came out of the operation theatre and took the consent of the patient’s mother for a hysterectomy. After her mother’s consent was obtained, Dr Manchanda removed the patient’s uterus (abdominal hysterectomy), ovaries and fallopian tubes (bilateral salpingoophorectomy).

INFORMED CONSENT

The physician should include information about:

- The diagnosis (when known)
- The nature and purpose of recommended interventions
- The burdens, risks, and expected benefits of all options, including forgoing treatment

Assess the patient's ability to understand relevant medical information and the implications of treatment alternatives and to make an independent, voluntary decision.

Example- Hysterectomy study

AUTONOMY

- Truthful and open communication between physician and patient is essential for trust in the relationship and for respect for **autonomy**.

Example- asking for husband's signature for MTP

My day in the general surgery ward

I am furious and deeply hurt. It had been just five minutes since I had settled on the cot allotted to me by the ward nurse. In a short while, the surgeon accompanied by a group of medical students came to see me.

“This is a case of hydrocele,” he said. He instructed me to go to the dressing room for examination. Moments later, I lay on a cot in a tiny room, while the surgeon examined my private parts and said things about which I had no inkling. I could hear some of the female students giggling. I felt reduced to a mere body with a disease.

PRIVACY

- Patient privacy encompasses a number of aspects, including personal space (physical privacy), personal data (informational privacy), personal choices including cultural and religious affiliations (decisional privacy), and personal relationships with family members and other intimates (associational privacy).

Physicians must seek to protect patient privacy in all settings to the greatest extent possible

STIGMA

- Stigma related to people's socioeconomic and cultural circumstances, “social stigma”

Quotes from the nursing and medical students

- *We consider the people who come from villages as illiterate or unaware of things, so we tend to stigmatise that group.*
- *If a person speaks a different language, “doctors tend to get frustrated and treat the patient differently and are more rude.*

DISEASE RELATED STIGMA

- Reduced treatment for fear of disease transmission
- Keeping a distance
- Avoiding meeting and communicating with patient
- Using mask and gloves only for certain cases

REASONS BEHIND INCREASE IN UNETHICAL PRACTICES

- Medical education does not emphasize enough on ethics
- Commodification of health care
- Rise of corporate hospitals
- Ineffective regulation of medical sector

*"Relativity
applies to
physics, not
ethics."*

Albert Einstein