

Morality in Medicine (part 1)

WHAT'S SPECIAL ABOUT MEDICINE?

1. Being a Physician has traditionally meant something special.
2. People come to Healthcare Practitioners for relief from pain and suffering and restoration of health and well-being.
3. Healthcare Practitioners to see, touch and manipulate every part of their bodies, even the most intimate.
4. All of this only happens because they trust their Healthcare Practitioners to act in their best interests.

MODERN DAY MEDICINE

1. Status of Healthcare Practitioners differs from one country to another and even within countries, with many Healthcare Practitioners feeling not as respected as they once were.
2. Control of healthcare moved away from Healthcare Practitioners to professional managers and bureaucrats.
3. Patients now ask Healthcare Practitioners to defend their recommendations if different from advice obtained from other health Healthcare Practitioners or the Internet.
4. Some procedures once exclusive to Healthcare Practitioners now done by medical technicians, nurses or paramedics.
5. Medicine attracts large numbers of the most gifted, hard-working and dedicated students.

“Many physicians feel that they are no longer as respected as they once were.”

Medicine and Ethics

“...to meet the expectations of both patients and students, it is important that physicians know and exemplify the core values of medicine”

- These values, along with respect for fundamental human rights, serve as the foundation of medical ethics.

WHAT'S SPECIAL ABOUT MEDICAL ETHICS?

1. **Compassion** – Patients respond better to treatment if they perceive the Physician appreciates their concerns and is treating them rather than just their illness.
2. **Competence** – Lack of competence can result in death or serious morbidity for patients. Rapid advances in medical knowledge require Healthcare Practitioners to maintain their competence beyond their long years of study. Moreover, they also have to maintain their ethical knowledge, skills and attitudes, since new ethical issues arise with changes in medical practice and its social and political environment.
3. **Autonomy** – self-determination, is the core value of medicine that has changed the most over the years. There is widespread acceptance by Healthcare Practitioners worldwide of greater patient autonomy as the ultimate decision-makers in matters that affect themselves. However, potential conflicts between Physician and patient autonomy still remain.

MEDICAL ETHICS AND OATHS

1. Medical ethics differs from the general ethics applicable to everyone by being publicly *professed* in an oath.
2. **Hippocratic Oath** – One of the oldest binding documents in history, the Oath written by Hippocrates is still held sacred by Healthcare Practitioners: A modern version is: “I swear to fulfill, to the best of my ability and judgment, this covenant: I **will** respect the hard-won scientific gains of those **Healthcare Practitioners** in whose steps I walk, and gladly share such knowledge as is mine with those who are to follow.”

3. **Declaration of Geneva** – the World Medical Association proposed a code for Healthcare Practitioners based on common features, and applicable to anywhere where medicine is practiced:

THE WORLD MEDICAL ASSOCIATION DECLARATION OF GENEVA

At the time of being admitted as a member of the medical profession:

I SOLEMNLY PLEDGE to consecrate my life to the service of humanity;

I WILL GIVE to my teachers the respect and gratitude that is their due;

I WILL PRACTISE my profession with conscience and dignity;

THE HEALTH OF MY PATIENT will be my first consideration;

I WILL RESPECT the secrets that are confided in me, even after the patient has died;

I WILL MAINTAIN by all the means in my power, the honour and the noble traditions of the medical profession;

MY COLLEAGUES will be my sisters and brothers;

I WILL NOT PERMIT considerations of age, disease or disability, creed, ethnic origin, gender, nationality, political affiliation, race, sexual orientation, social standing or any other factor to intervene between my duty and my patient;

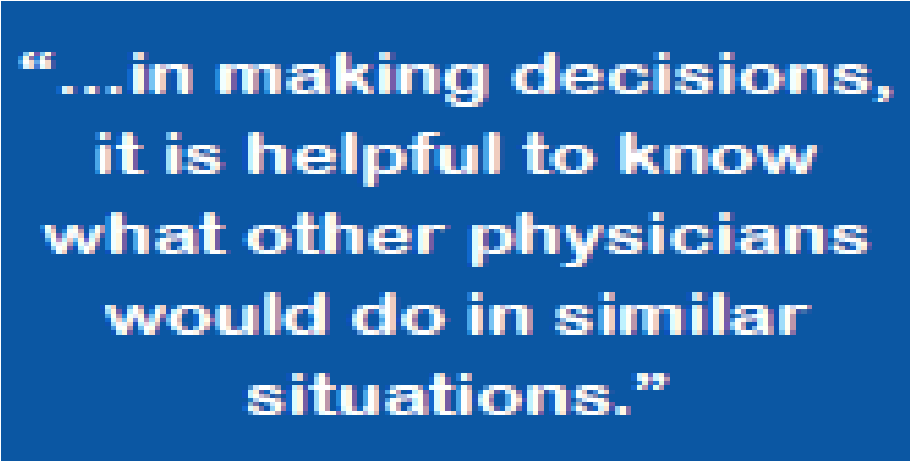
I WILL MAINTAIN the utmost respect for human life;

I WILL NOT USE my medical knowledge to violate human rights and civil liberties, even under threat;

I MAKE THESE PROMISES solemnly, freely and upon my honour.

WHO DECIDES WHAT IS ETHICAL?

1. Individuals disagree among themselves about what is right and what is wrong, and even when they agree, it can be for different reasons.
2. Most human beings agree on some fundamental ethical principles, namely, the basic human rights proclaimed in the United Nations **Universal Declaration of Human Rights**, amongst others.
3. The human rights especially important for medical ethics include the right to life, to freedom from discrimination, torture and cruel, inhuman or degrading treatment, to freedom of opinion and expression, to equal access to public services in one's country, and to medical care.
4. Over the centuries the medical profession has developed its own standards of behaviour for its members, which are expressed in codes of ethics and related policy documents.



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5. In many, if not most, countries medical associations have been responsible for developing and enforcing the applicable ethical standards. Depending on the country's approach to medical law, these standards may have legal status.
6. The ethical directives of medical associations are general in nature; they cannot deal with every situation that Healthcare Practitioners might face in their medical practice.

7. In making decisions about what is the right way to act, it is helpful for Healthcare Practitioners to know what other Healthcare Practitioners would do in similar situations.
8. Medical codes of ethics and policy statements reflect a general consensus about the way Healthcare Practitioners should act and they should be followed unless there are good reasons for acting otherwise.

References

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