

Medical Ethics

Introduction

Primum non nocere

The main principle of medical ethics

Above all, Do No harm

Another way to state it is that, "given an existing problem, it may be better not to do something, or even to do nothing, than to risk causing more harm than good."

Definitions

- The difference between Ethics and Moral ❓
- The Greek word ethnos means habit, action, character.
- The Latin word mos (morals) means habit or custom. Both words refer to the general area of right and wrong in the theory and practice of human behavior.
- Morals refer to standards of behavior held or followed by individuals and groups.
- Ethics refer to the science or study of morals and its activity in the academic context .

Ethics refer to rules provided by an external source, e.g., codes of conduct in workplaces or principles in religions. Morals refer to an individual's own principles regarding right and wrong.

Ethical versus legal obligations

Parameters of Comparison	Legal	Ethical
Basis	Based on law	Based on principles
Effect of nonadherence	Not adhering is punishable.	Not adhering is not punishable.
Scope of choice	Lawfully mandatory	Voluntary
Form	Have written records	Totally abstract form.
Governed By	Government	Individual, Legal and Professional norms

General principles of medical ethics

Beneficence (doing good) Non-maleficence (to do no harm) Autonomy (giving the patient the freedom to choose freely, where they are able) Justice (ensuring fairness)



1- Autonomy

Case:

- *A 26-year-old male has been involved in a RTA, in which he sustained blunt force trauma to his head as his head hit the front windscreen of his car. He did not lose consciousness – he is fully responsive and has no indications of neurological damage.*
- *He has a significant head wound that is bleeding continuously. This patient has refused treatment on the grounds that he feels “fine” and is refusing to have sutures to close his head wound. He would like to leave the Department.*
- *What is your opinion?*
- *Even though the best interests of this patient would be served by undergoing a CT scan and having sutures, he is an adult with full mental capacity, and so we must respect his patient autonomy in choosing to leave the Department. We cannot prevent him from leaving, and if we did it would be unlawful detainment.*
- **This principle states that any competent person should be given the freedom to decide on any decision that is related to his/her body and/or health. is the human right of a patient to control access to his/her body and what is done to him or her.**

3 conditions should be fulfilled to obtain correct autonomy:

- **Capacity** usually refers to the mental competencies that are needed for a human to make rational decisions, which includes the ability to understand the information about an intended intervention (or medical condition), appreciate the risks associated with the proposed intervention (medical condition, or research).
- **Disclosure.** the information given to the patient, who is supposed to take a decision are simple and understandable.
- **Voluntariness** refers to the importance of having the freedom to take these decisions without any pressure the emotional and social pressure conveyed by other family members or the health care team.

Beneficence

- Beneficence means Physicians have a duty to act in the **best interest** of their patients.
- **Why Is Beneficence Important?**
 - because it ensures that healthcare professionals consider individual circumstances and remember that what is **good for one patient may not necessarily be great for another.**
- Think about these cases:
 1. *An eight-year-old child has been admitted to hospital with a significant open fracture to his left leg. The limb is deformed with significant bleeding and the patient is extremely distressed. The parents are demanding immediate action to be taken. 2 options are present:*
 1. *Limb amputation to stop life threatening bleeding and avoid severe infection.*
 2. *Blood transfusion and try to stop bleeding and treat the fracture.*

Another example:

- A female aged 33 years old. She was treated from infertility and get pregnant at 22 weeks. She discovered that she has breast cancer and should start anticancer treatment which is contraindicated in pregnancy. Oncologist advised her to perform abortion. She decided to postpone treatment and continue pregnancy. What is her best interest?

Non-Maleficence

- The principle of nonmaleficence is captured by the Latin maxim, primum non nocere: “above all, do no harm.”
- Non-maleficence states that a medical practitioner has a duty to do no harm or allow harm to be caused to a **patient through neglect**.
- is the sister to [beneficence](#) and is often considered as an inseparable pillar of ethics.
- Non-maleficence differs from beneficence in that it acts as a threshold for treatment. If a treatment causes more harm than good, then it should not be considered. This contrasts with beneficence, where we consider all valid treatment options and then rank them in order of preference.

Case scenario

- *A 52-year-old man collapses in the street complaining of severe acute pain in his right abdomen. A surgeon happens to be passing and examines the man, suspecting that he is on the brink of rupturing his appendix. The surgeon decides the best course of action is to remove the appendix in situ, using his trusty pen-knife.*
- From **a beneficence perspective**, successful removal of the appendix in situ would certainly improve the patient's life.
- But from **a non-maleficence perspective**, let's examine the potential harms to the patient:
 1. The environment is unlikely to be sterile, so the risk of infection is extremely high
 2. The surgeon has no other clinical staff available or surgical equipment meaning that the chances of a successful operation are already lower than in normal circumstances

Justice

We have a duty to treat all fairly, distributing the risks and benefits equally. Patients in similar situations should be offered similar care unless justifying circumstances are involved, such as for emergency cases.

Consent:



Any physical examination needs permission or consent of the patient otherwise the doctor may be guilty of assault (battery) if he touches or even attempts to touch an unwilling person.

Definitions

- **Autonomy as the basis of informed consent.**
- **Consent** is a decision of a competent patient to accept the medical procedures proposed. The patient has the right to refuse the proposed treatment. Both consent and refusal must be informed, i.e., based on full disclosure of the details of the proposed treatment, including its benefits and risks.
- Children with some degree of competence can **assent** to treatment, which signifies their agreement with what their parents, their legal decision makers, have decided.
- **Competence:** is the intellectual capacity to understand, analyze, and judge information.
- **Paternalism** is a negative attitude that was common among physicians and has now almost disappeared. The paternalistic physician assumes that he knows what is best for the patient and should make treatment decisions without reference to the patient. Paternalism is a violation of the patient's autonomy rights.

Types of consent:

* **Implied consent:** where a person comes to visit a doctor or asks the physician to visit him, (does not extend to intimate or to invasive examinations)

* **Expressed consent:**

- ❖ *Expressed **written** consent.* (surgical interference or complex diagnostic procedures)
- ❖ *Expressed **verbal** consent.* (witnessed by another person)

Medical interference without consent:

- In an **emergency**, such as an accident where the victim is in extremis على حافة الموت, unconscious or shocked.....to save life or preserve health



- Routine medical examination of **new prisoner** to exclude infectious diseases. In addition, Pilot & airplane crew, Food dealers



Privacy and Confidentiality: Definitions

- **Privacy** is about the right not to be interfered with, to be free from surveillance, or more generally, a moral right to be left alone.
- **Confidentiality** is about the right of an individual to have personal, identifiable medical information kept out of reach of others.
- **Privacy** is concerned with the setting within which the patient's medical information is taken (i.e., the patient's body).
- **Confidentiality** is concerned with the information collected from/about the patient (i.e., the patient's information).

Measures to protect patients' privacy

- Make sure all physical examinations take place **in isolation** from other patients, unauthorized family members, and/or staff
- Provide **gender-sensitive** waiting and examination rooms.
- Provide **proper clothing** for inpatients.
- Make sure patients are **well covered** when transferred from one place to another in the hospital.



Measures to protect patient's privacy

- Make sure your **patient's body is exposed ONLY** as much as needed by the examination or investigation
- Make sure there is **another person (nurse) of the same gender** as the patient present throughout any examination
- Always **take permission** from the patient before starting any examination
- Ensure **privacy** when taking information from patients

Measures to protect patients' privacy

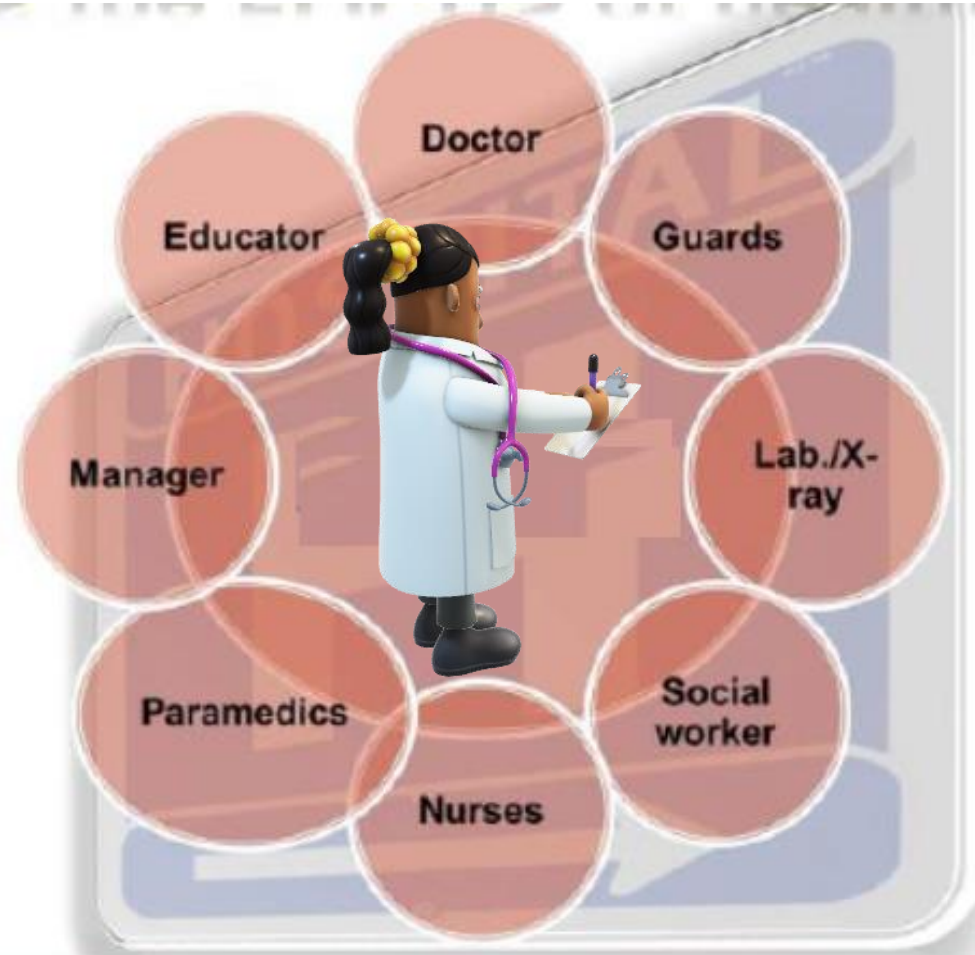
- **Avoid** keeping patients for periods more than required by the procedure
- It is **prohibited** to examine the patient in the **corridors** or waiting areas
- During an examination, **no unrelated non-hospital person** should be allowed to be present
- Give patients **enough time** to expose the part with **pain**
- **Only relevant personnel** are allowed to enter the **examination room** at any time during an examination



Why confidentiality is important?

1. Respect for confidentiality is firmly established in codes of medical ethics ([Hippocratic oath](#)) [قسم الطبيب](#).
2. Breach of confidentiality is not only unethical, but also illegal ([slide 10 & 12](#)).
3. Respects patient's autonomy.
4. Respects natural human desire for privacy.
5. Protects from social embarrassment, discrimination, or stigmatization (as covid patient).
6. Prevents misuse of information against patient.
7. Builds confidence between doctor and patient.

Who is the focus of health care system



Doctors Are NOT the focus of the healthcare

Where may the physician work?



Hospital

- Healer
- Manager
- Researcher



Medical college

- Educator
- Researcher
- Manager



Ministry of health

- Healer
- Manager
- Planner
- Researcher



Community

- Healer
- Health educator
- Manger
- Researcher

Duties of physicians towards colleagues: (physician – physician relationship).



Physician should not:

1. **Criticize** the treatment of his colleague.
2. Trying to replace another colleague in the **treatment of a patient.**
3. **Refusing** to attend and treat a fellow colleague or any of his relatives to whom he is responsible.
4. **Accept any fees** for the treatment of fellow colleague of any or his relatives to whom he is responsible.

Duties of the physician towards his colleagues.

5-There should be good **cooperation and respect** between the colleagues.

6-He has not to **open a clinic in the same building** with a physician of the same specialty except after taking permission of the medical syndicate and the physician himself.

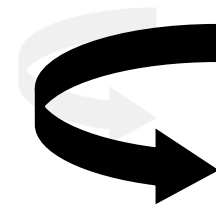


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7-He has not to compete with physicians by increasing or decreasing the fees than the range accepted by the medical syndicate.

8-When replacing a physician in his clinic, he must not entice **جذب (=take) patients from his colleagues .**



Duties of the physician towards the patients

- 1- He should be in good and kind relation with the patients.*
- 2- He has to do his best for caring of his patient. He should respect the patient's life, trying always to protect not to harm it and to reduce the patients pains.*
- 3- The physician must support the dignity of all persons without differentiation between them (social, economic, financial, religious and personal factors)*

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5-If he is unable for any reason to give the considerable care to the patient, he should ask for consultation of one of his colleagues.

6-He has not to reveal the patient's secrets.

7-If the patient or his family ask for consultation of another physician he should obey their wish.



Duties of the physician towards the patients (continued)

8- A doctor cannot be forced to treat any person, but having once accepted the case he must continue to treat him until other assistance can be obtained.

