Author Affiliation:

¹Demonstrator, Hamdard Institute of Medical Sciences and Research. Department of Community Medicine (HIMSR), Jamia Hamdard University, New Delhi, 110062, India. ²Assistant Professor, Department of Pediatric Surgery, Maulana Azad Medical College and Hospital, New Delhi, 110002.

Reprint Request: Meely Panda,

Senior Resident, Department of Community Medicine, Hamdard Institute of Medical Sciences and Research (HIMSR), Jamia Hamdard University, New Delhi, 110062, India. E-mail: meeliepanda@gmail.com

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Doctor Patient Scenario is Changing: So do the Medical Ethics Need a Change Too?

Meely Panda¹, Shasanka Shekhar Panda²

Sir,

Abstract

It requires a new physician to swear, by a number of healing gods, to uphold specific ethical standards which are considered a rite of passage for practitioners of medicine in many countries. Today the patient does not consider himself as a patient. The law does not see him as a patient. He has rather become more of a consumer; ready to sue you anytime anyplace for the deficiency of his services; services which he thinks are sold over the counter by the physician and his team. If the entire scenario has taken up the form of a barter system, where components like compulsion and duty are gaining prominence over humanity is it not high time that we doctors too start seeing him as a consumer?

Keywords: Doctor; Patient; Ethics.

The medical ethics we know is based on Hippocrates oath. Hippocrates oath is for doctor patient relationship. It requires a new physician to swear, by a number of healing gods, to uphold specific ethical standards which are considered a rite of passage for practitioners of medicine in many countries [1,2].

When an LIC agent takes up to 30% of your premium, we call it his hard work and do not think that if he was not paid, it would reduce the overall premium. When a doctor does that, it is called as cut practice. When a grocer or chemist gets free

consumable items or medicines as per his purchase, he does not reduce the price of all the items. We call it his earnings because of his hard work to be able to buy a larger quantity of goods. No one says he is cheating the customer. When a doctor does that, it is unethical.

When a high ranking employee in a financial sector gets a yearly bonus of over one crore rupees with a paid holiday for wife and family, we call it a well earned perk for his hard work. No one says had it not been for his perks, the overall borrowing interest rates would be lower. But when a doctor asks for a holiday for spending quality time, there is an air of panic everywhere; as if the world is about to end if he stays away. Things have been accepted these ways since the past. Clinicians are hardly given time to think about themselves and their families; and fighting for their own good only becomes a distant vision then – A twilight saga.

Today the patient does not consider himself as a patient. The law does not see him as a patient [3]. He has rather become more of a consumer; ready to sue you anytime anyplace for the deficiency of his services; services which he thinks are sold over the counter by the physician and his team.

If the entire scenario has taken up the form of a barter system, where components like compulsion and duty are gaining prominence over humanity is it not high time that we doctors too start seeing him as a consumer? Bitterness in any form of mutual relationship is tolerated only till a particular point of time beyond which things start taking nastier and unruly forms. The increasing numbers of attacks on doctors, the increased incidences of malpractices, the

growing lists of frauds, quacks, dominance of private practices, draining of doctors outside our country, misbehaviour of patients with health care professionals are examples of the breeches of our boundaries of tolerance on both sides.

What role does an ethic have in a consumer supplier relationship? Do not we think the medical ethics need to be modified in view of this changed relationship? We dream of a scenario, where we supply all the services/treatment as bought by the consumer/patient in a systematic manner; along with an element of humanity and concern for those who want it in return and of course free of cost.

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