

ETHICS



Medical Ethics Subject 3



1

The History of Medical Ethics & Medical Ethics Codes

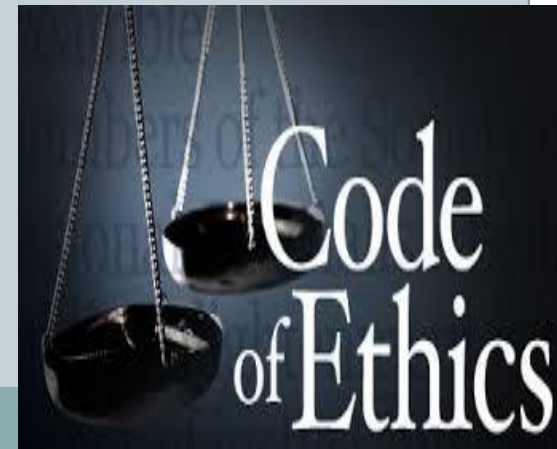
ASSOCIATE PROFESSOR DR. EMAN A. AL-KAMIL

DEP. OF COMMUNITY MEDICINE

COLLAGE OF MEDICINE

HASHEMITE UNIVERSITY

Assistant Professor Dr Eman Al- Kamil



The History of Medical Ethics

- ➡ Ethics can be traced to ancient times
- ➡ Medicine began to separate itself from witchcraft (magic) and became an experience-based knowledge and a professional skill.
- ➡ In ancient years, folk physicians didn't have fixed clinics or hospitals but went from one place to another practicing medicine freely.
- ➡ They hadn't formal training and weren't licensed but performed their work by their own skills and consciences.



➡ The principle also calls for **respect** for patients.

➡ The principle calls for “**universal love**,” that is, *to treat every patient equally, regardless of social status, family background, appearances, age, etc.*



➡ All patients must be **treated like your own relatives** regardless of their **social status, family economic conditions, appearances, ages, races, and mental abilities.**

➡ doctors to be very cautious and responsible in the course of **diagnosis and prescription** in order to **avoid mistakes** that would harm patients.

✚ With the introduction of Western medicine beginning in the nineteenth century, medical system has changed.

✚ A new type of medical system has emerged and a new perspective on professional ethics has gained people's attention.

✚ This change has also brought new requirements for doctors, who now are responsible not **only for their patients**, but also for **their hospitals and the whole society**.

✚ **“ Never being selfish but always ready to help others” have become the principal values of medical ethics.”**

Historical background

- Hippocratic oath
- Geneva(1948)
- Helsinki (1946)
- Sydney(1968)
- Oslo (1970)
- Tokyo(1975)
- Lisbon(1981)
- Hawaii (1977)

Graduation Day



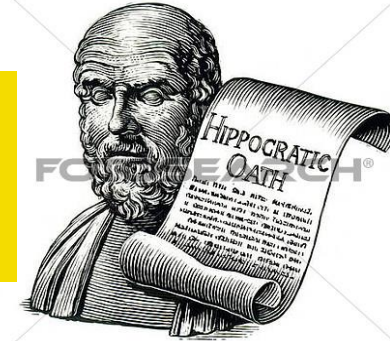
Graduation Day

- On the day of graduation / before start the medical profession, every new medical doctors should swear the “Hippocratic Oath”

The most ancient is the **Hippocratic oath** which includes all the essential elements of the code of practice.

These are:

1. **"First do no harm"**
2. To **advance the profession** rather than the individual practitioner.
3. Never to use the specialist knowledge or privilege to injure **but always to help the client (patient)**.
4. **Do not defer (postpone)** to specialist assistant whenever this is in the **best interest** of the client.
5. To **maintain professional secrecy**.



dayala0332c fotosearch.com



www.shutterstock.com · 439758814

When you **love medicine**, you will love of **humanity**.

Make a habit of **two things** :

- To help ;
- to do no harm.



Cure sometimes, treat often, **comfort always**.

Natural forces within us are the **true healers** of disease.

Declaralations in medical ethics

I- The declaration of Geneva (1948 revised 1968 and 1983)

It is updated version of Hippocrates oath it requires the doctor to:

- 1- Consecrate his life to the service of **humanity**.
- 2- Make " the health of my patient " his first consideration.
- 3- **Respect his patients secrets** (even after the patient's death).
- 4- Prevent "**considerations of** religion, nationality race, politics or social standing" between my duty and my patient.
- 5- Maintain utmost **respect** for human life from its beginning.
- 6- **Not to use** his medical knowledge "**contrary to laws of humanity**".



II-The World Medical Associations (WMA):

international code of medical ethics

(London 1949, revise 1968, 1983) requires- adherence to Geneva declaration:

- 1- The highest **professional standards**.
- 2- Clinical decisions **uninfluenced by the profit motive or unfair discrimination**.
- 3- **Honesty** with patients and colleagues.
- 4- providing **competent medical service** in full professional and **moral independence**, with compassion and **respect for human dignity**.
5. **Exposure of immoral and incompetent ones**.
6. respect a competent **patient's right to accept or refuse treatment**.



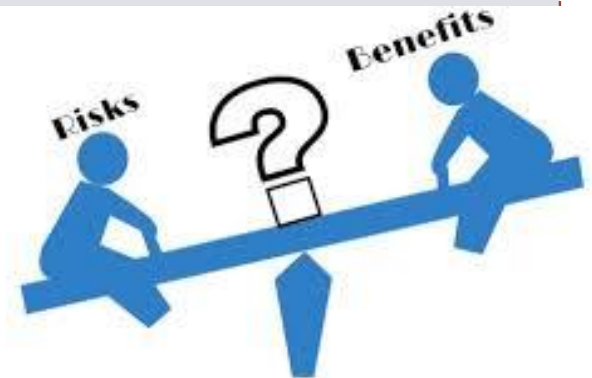
III- The declaration of Helsinki (1946 revised 1975 and 1983, 2008):

Governs biomedical research, in human subjects:

- I- "The interests of subject must precedence (priority) over the interests of science and society".
- 2- **Informed consent** is required.
- 3- Risk should not exceeds benefits.



Ethics Guidance
for Research



IV -The declaration of Lisbon (1981):



Concerns the **rights of the patient**:

1. Right to medical care of good quality

- Every person is entitled **without discrimination** to appropriate medical care.
- To be cared for by a doctor whose clinical and ethical **judgment is free from outside interference**.

2. Right to freedom of choice

- Choose his **physician** and hospital freely.
- The patient has the right to ask for the **opinion of another physician** at any stage.

3. Right to self-determination

- **To accept or refuse treatment** after receiving adequate information.
- Have his or her confidence respected (**Right to confidentiality**).
- Die in **dignity**.

4. Right to religious assistance

- Receive or decline spiritual and moral comfort includes the **help of minister of an appropriate religion**.



V- The declaration of Sydney (1983) on death:

- The **determination of the time of death** is the **legal responsibility of the physician**.
 - Usually, the physician will be able without special assistance to decide that a person is dead, employing the classical criteria known to all physicians.
 - **Two modern practices** in medicine, however, have made it **necessary to study the question of the time of death**
 1. **the ability to maintain by artificial means** the circulation of oxygenated blood through tissues of the body which may have been irreversibly injured and
 2. **the use of cadaver organs** i.e. heart or kidneys for transplantation.
- But **clinical interest** lies not in the state of preservation of isolated cells but in the fate of a person.

VI- The declaration of Oslo (1970) revised 1983 on abortion:

- ❖ It requires doctors to maintain most respect of human life from beginning .
- ❖ The role of the medical profession to attempt both to ensure the protection of our patients .



Where the **law allows therapeutic abortion** to be performed, and this is **not against the policy** of the national medical association, the following **principles are approved:**

- Abortion should be performed **only as a therapeutic measure.**
- A decision to terminate pregnancy normally should be **approved in writing by at least two doctors chosen for their professional competence.**
- The procedure should be performed by a **doctor competent to do** so in premises approved by the appropriate authority (hospitals).

VI I- The declaration of Tokyo (1975 revised 1983):

On torture:

1. it forbids doctors from condone(ignore) or participate in the practice of torture or other forms of cruel, in **human or degrading procedures**, whatever the victim, accused or **guilty**, and whatever the **victim's beliefs or motives**.
2. The **physician shall not provide any premises, instruments, substances or knowledge** to facilitate the practice of torture or other forms of cruel, inhuman or degrading treatment or to diminish the ability of the victim to resist such treatment.
3. The **physician shall not be present during any procedure during which torture or any other forms of cruel,**



VIII- The declaration of Hawaii (1977 revised in 1983):

On psychiatric ethics:

1- Patients are **offered best available** treatment and be given a chance **if more than one treatment**.

2- **Compulsory** is given only if the patient

A. **lacks the capacity** to express his wishes or

B. owing to psychiatric illness **can not see what is in his best interests** or

C. is a **sever threat to others**.

3- The psychiatrist must **not participate** in compulsory psychiatric treatment **in the absence of psychiatric illness**.

4- **Confidentiality must be secured** unless the patient **consents to release information** or patient's interests make disclose imperative.

5- The patient should **not be involved in clinical trial**.

IX - The declaration of Venice (1983):

Most recent declaration of WMA medical ethics **on Terminal Illness:**

- 1- Doctor duty **is to heal and relieve suffering.**
- 2- Primary responsibilities of the physician are **to assist the patient in maintaining an optimal quality of life.**
3. The physician must not **with holding treatment** in terminal illness with **consent of the patient** or patient's immediate family.
- 4- The physician must not employ extra ordinary means, which would prove of **no benefit for the patient.**
- 5- **Permits the maintenance** of organs for transplantation provided he acts in accordance **with the laws** of the country or after a **formal consent** given by the responsible person and provided the **certification of death.**



Thank You