Why Medical Ethics?

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Easier in three seconds than in 15 minutes!

Why Medical Ethics?

..Because medicine is a moral endeavour.

Because what doctors *can* do far surpasses what they *should* do.

Ethics counterbalances other strong forces (the “free” market, the political system, etc.)
Before I venture into answering a question that cannot be answered in more than 1 second and less than much more, 2 remarks (time!):

- Teaching ethics in medical schools will not make the unethical, ethical
- Teaching ethics in medical schools will not make the amoral, moral
- Teaching ethics in medical schools will aid those who join the medical school become better physicians if certain conditions are already met.

Admission criteria need to be thought of carefully!
Formal teaching alone will not do.
The informal curriculum also plays a major role in the “making of a physician”.

Most trainee physicians experience a great deal of clinical care, management, and gallant training, learning how to be a physician.
Clinical Behaviors and Skills That Faculty from 12 Institutions Judged Were Essential for Medical Students to Acquire

CRAIG S. SCOTT, Ph.D., HOWARD S. BARROWS, M.D., DOUGLAS M. BROCK, M.Ed., and D. DANIEL HUNT, M.D.


“Ethics is now regarded as an essential component of medical education”
Conclusions. Within a few decades the number of U.S. and Canadian medical schools requiring medical ethics has increased. Nevertheless, significant variation in the content, method, and timing of ethics education suggests consensus about curricular content and pedagogic methods remains lacking. Further progress in ethics education may depend on institutions’ willingness to devote more curricular time and funding to medical ethics. 

“Most U.S. medical schools had separate or covered medical ethics within required courses” – Miles et al. 1990

“All 16 Canadian medical schools now offer courses in medical ethics” – Baylis and Downie, 1990
The Royal College of Physicians and Surgeons of Canada requires bioethics teaching as a condition of accreditation for post-graduate training programs.

The American Board of Internal medicine requires ‘humanistic qualities’ evaluation in residency programme.

Physician as humanist: still an educational challenge

Victor R. Neufeld, MD

Editorial

Dr. Neufeld is Professor Emeritus, Faculty of Health Sciences, McMaster University, Hamilton, Ont.

CMAJ 1998;159:787-8
Why?

“Doctors hone their professional attitudes during their formative years as students and residents”

Medical Education 2006; 40: 607-617

Professionalism in medical education, an American perspective: from evidence to accountability

Jordan J Cohen
Unprofessional and wrong behavior in medical school is predictive of future unprofessional and wrong behavior in practice.

*The New England Journal of Medicine*

Disciplinary Action by Medical Boards and Prior Behavior in Medical School

Maxine A. Papadakis, M.D., Arianne Teherani, Ph.D., Mary A. Banach, Ph.D., M.P.H., Timothy R. Knellter, M.B.A., Susan L. Rattner, M.D., David T. Stern, M.D., Ph.D., J. Jon Veloski, M.S., and Carol S. Hodgson, Ph.D.

(NEJM, 2005), 353(25):2673
Let us look closer to home
Public perception about physicians in Lebanon

A study assessing the public perception regarding physicians in Lebanon revealed the following:

The physician traits most desired by the public were found to be: moral traits (41%), interpersonal traits (36%), scientific traits (19%) and other (4%).

The most unwanted traits/behaviours were a lack of interpersonal traits (57%), a lack of moral traits (40%) and a lack of scientific skills (3%).

Sample Traits

Desired
Inhumane
Negligent
Does not admit mistakes
Dishonest
Hurried
Does not discuss with patients
Unfriendly
Treats patients as a number or case
Disrespectful
Arrogant:
Does not respect appointments
High-handed
Treat patients as inferior
Pretentious
Annoyed with questions
Does not listen to patients

Not Desired
Humane
Honest
Ethical
Not materialistic
Compassionate
Humble
God fearing
Explains thoroughly
Good listener
Respects patients
Has good interpersonal skills
Gives time to patients
Caring
Patient
Smiles
Is not haughty
Sample remarks

- ‘Doctors in general are ok, but you find some that want to make money only.’
- ‘Curing patients is second on the list. First comes making money.’
- ‘Doctors these days are robots, they have no heart!’
- ‘They reduce medicine to a cold lifeless prescription.’
- ‘The medical sector has no ethics at all.’
- ‘Doctors are pretentious and full of themselves. They have no consideration for our feelings!’
- ‘I do not trust doctors in Lebanon and, in my opinion; doctors are inhumane merchants.’
Something must be done.
Introducing medical ethics and professionalism in medical schools is an important step.
Outcomes of teaching E&P

- Medical graduates will:
  - Acquire the character traits of an ethical/professional physician
  - Be able to display ethics and professionalism during their medical practice
  - Primacy of patient welfare
  - Healthy physician-patient relationship

Public trust in physicians is maintained
Major Challenges

- What can we do to help the student (future physician) *internalize* the virtues of an ethical, professional physician?
- This is the most important task that seems to face the medical educators of the century!
This will aid students, interns and residents find their moral compass.
Thank you!
Seminars | don't have time to do experiments!
I have to fake all these ethics with my data...