

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

**Ethics of Veracity in Health Care:
A phenomenological study of the
Omani physicians' lived experience
with truth disclosure to cancer patients**

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It was narrated that 'Abd-Allaah ibn Mas'ood said: "The Messenger of Allah (peace and blessings of Allah be upon him) said: 'Truthfulness is righteousness, and righteousness leads to Paradise. A person will continue to tell the truth until he is written with Allah as one who tells the truth. Lying is evildoing, and evildoing leads to Hell. A person will keep on telling lies until he is written as a liar.'" (Narrated by al-Bukhari, 6094; Muslim, 2607).

INTRODUCTION

The debate on the issue of truth telling is at the **core of contemporary biomedical ethics.**

.Because of cultural variables and the delicate interplay between autonomy and beneficence in medicine, differences in truth telling arise.



The ethics of veracity

- **Conformity to facts, accuracy, and habitual truthfulness.**¹
- **Comprehensive, accurate, and objective transmission of information, as well as to the way the professional fosters the patients or subjects understanding.**
- **Independent principle and virtue.**²

1.Pearsall 1999, p.159)

2.(Beauchamp & Childress 2009, p.289).

History of The ethics of veracity

.The codes of medical ethics have traditionally **ignored** obligations and virtues of veracity.

The Hippocratic Oath does **not recommend** veracity **nor does** the Declaration of Geneva of the World Medical Association

.The principles of Medical Ethics of the American Medical Association (AMA) from its origins **until 1980** made no mention of an obligation or virtue of veracity.

.The islamic view.

There is **no direct evidence** In the primary sources of Islamic teaching about truth telling to the patient. However Veracity and disclosure were derived from the principle **of autonomy which is , in turn, derived from the shari'at principle of intention, qa'idat al qasd.**²

Purpose of the Study

.To gain a deeper understanding of the nature and meaning of the lived experiences of physicians in handling the situation of diagnosing cancer in relation to truth disclosure and the ethics of veracity.

The phenomenon of these lived experiences has **not been yet observed in depth** in the Sultanate of Oman.

What are the Omani physicians' lived experiences in the practice of disclosing the truth about the diagnosis of cancer in Sultanate of Oman?

METHODS

Max Van Manen's hermeneutic, phenomenological method of research.

well-known contemporary phenomenologist who has published widely in this area.

The phenomenological , hermeneutic process is an **interpretive method**, in which the researcher interprets the phenomenon being described.

The term phenomenology is derived from the Greek word *phenomenon*, meaning, "**to show itself**".

Phenomenology is supposed to be used to **illuminate the true meaning of human experience through reflection by the participant and researcher.**

six research activities

**turning to a
phenomenon**

**describing the
phenomenon**

**investigating
experience as we
live it**

**manipulating a
strong and
oriented
pedagogical
relation**

**reflecting on the
essential themes**

**balancing the
research context**

Participants' inclusion criterion was as the follows:

- (1) Omani physician .**
- (2) Current employee of SQUH.**
- (3) Physician who has at least one year of medical experience at SQUH .**
- (4) Physician who had experience with cancer patients.**

The ethical issues and the Interview

Table 1: Participants' demographic data and the years of service in SQUH

Physicians	Age	Gender	Position	Years of service in SQUH
P1	27	M	Resident	2
P2	26	M	Resident	1
P3	36	M	Consultant	9
P4	34	M	Consultant	9

Data analysis and themes generation

1. listening and re-listening to the audiotapes
2. Transcribing the interviews verbatim, word by word.
3. Reading and re-reading every transcript
listen to or read a text several times , asking: *'What statements or phrase(s) seem particularly essential or reveal the phenomenon or experience being described? .*
4. looked in the different themes for typical quotations that were distinctive.
5. To turn back to the transcript to verify the understanding.

Table 2: The Categories

The categories

1. The reaction of the physician and the patient .

2. Breaking bad news strategy.

3. Training and breaking bad news.

4. The ethical side.

5. The attitudes of the physicians.

6. The attitudes of the relatives and the patient.

7. Cultural behavior.

Table 3: Original themes

Theme 1: The practical aspect of the experiences' Subthemes:

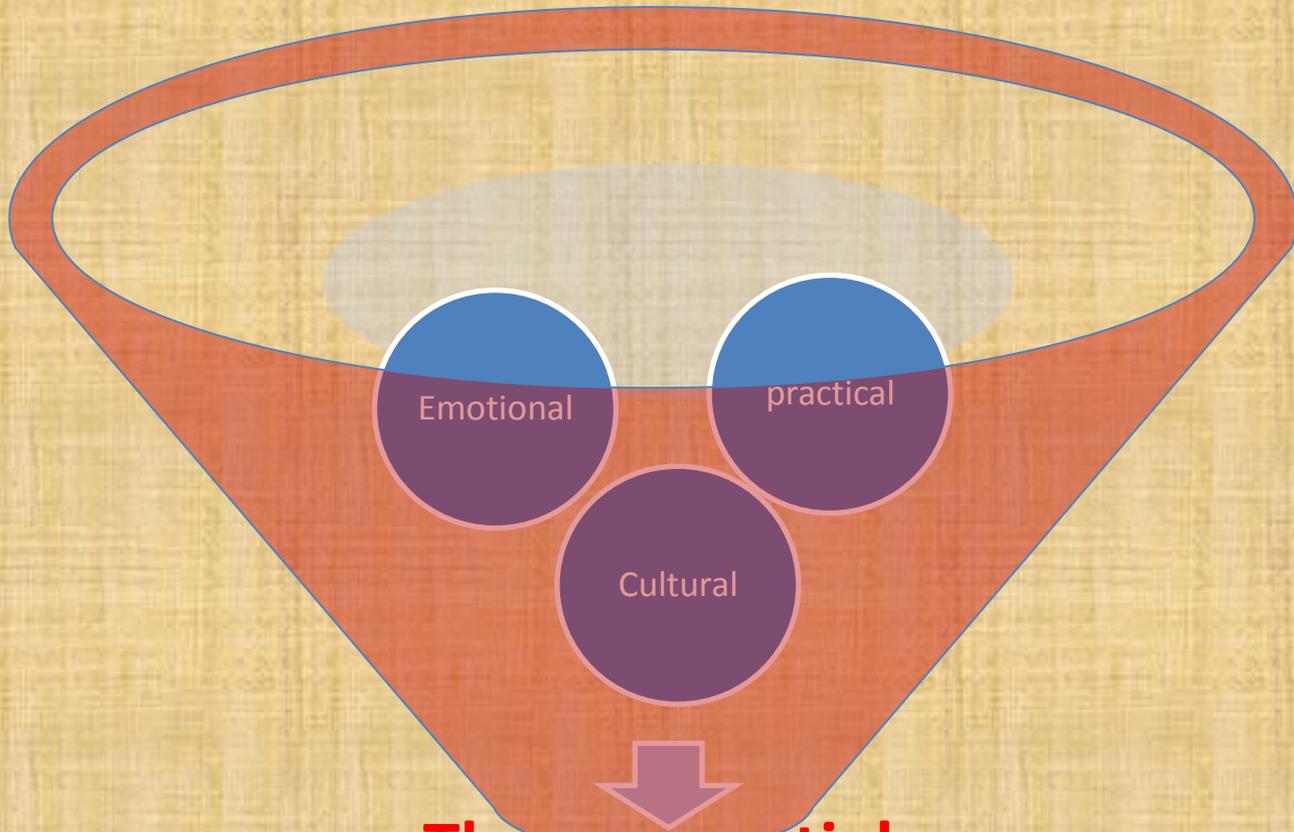
1. The ethical aspect and the physician's attitude.
2. The strategy of breaking bad news.
3. Absence of training in breaking bad news.

Theme 2: Cultural behavior' Subthemes:

1. Relatives preference.
2. The patient education in the west.
3. The hospital setting in the west.

Theme 3: The emotional aspect of the experiences' Subthemes:

1. Emotional sadness .
2. Personal grief.
3. The other emotions.
4. The positive emotions.
5. Control of the emotions.



**Three essential
themes**

Conclusion

The review of the literatures shows that there is no fully adequate moral theory from the west that can singly explain all the ethical or moral dilemmas.

Morality and ethics in Islam are of divine origin. The medical ethical codes can be derived from the basic law but the detailed applications require further intellectual effort, *ijtihad*.

Still a **GREAT** challenge to the physician comes from the frequent interference and insistence of the relatives on treating the patient without telling him/her the truth about the cancer diagnosis, prognosis and treatment.

This study showed there is a **GREAT** deficiency in physician education and understanding of Islamic rules in relation to ethical decision making.

The findings of the study suggest four important issues:



THANK YOU