

## EDITORIAL

### THE CHANGING STATE OF MEDICAL ETHICS

The Hippocratic oath has in a sense laid down a code of medical behaviour hundreds of years ago when it touches on the relationship between a doctor and his art, and the practitioner and his patient. Much of what he said remains in principle, but the ethics of to-day has become fairly complex through customs, usage, precepts and examples, and from time to time, instances of anomaly have come up to the surface. It has been said by some critics that the modern ethical discipline is a mere matter of 4 As—alcoholism, adultery, addiction, and advertisement. Scanning through the records of the General Medical Council, there seems good ground for such a belief, and it has to be admitted that an ethical code with these limits cannot be entirely satisfactory if it is to keep the profession at its best—to serve selflessly in the interest of amelioration or cure of human ills. In recent years, even the 4 As are not secure in their sway, especially with regards to advertisement, and not so long ago, the leader of B.M.A. launched out in severe language on the various unsatisfactory aspects of discipline regarding advertisement.\*

There can be little doubt that a profession such as ours is too dangerous to be left without ethics. Our bitter experience of war crimes of a medical nature such as the exposures at Nuremberg in recent years, and the jibes at quackery from a master satirist like Voltaire cannot leave us unmoved. To remain a healthy, respected, and dedicated profession, we must be prepared to announce our principles and be judged on their premises, and to drift aimlessly for the lack of courage will only lead us to public contempt, and perhaps resulting in some codes being foisted on us from external agencies!

The Geneva convention on medical code reads as follows:—

- I SOLEMNLY PLEDGE myself to consecrate my life to the service of humanity;
- I WILL GIVE to my teachers the respect and gratitude which is their due;
- I WILL PRACTICE my profession with conscience and dignity;

THE HEALTH OF MY PATIENT will be my first consideration;

I WILL RESPECT the secrets which are confided in me;

I WILL MAINTAIN by all the means in my power, the honour and the noble traditions of the medical profession;

MY COLLEAGUES will be my brothers;

I WILL NOT PERMIT considerations of religion, nationality, race, party politics or social standing to intervene between my duty and my patient;

I WILL MAINTAIN the utmost respect for human life from the time of conception; even under threat, I will not use my medical knowledge contrary to the laws of humanity.

I MAKE THESE PROMISES solemnly, freely and upon my honour.

In essence, this has brought the Hippocratic oath up-to-date, and has introduced a definite concept that doctors' prime duty is to preserve life, which is not a new point, but is now recast in unequivocal terms. Many of the mooted points in ethics are left unanswered, purposely perhaps to permit latitude from nation to nation, and racial custom to racial custom, but its uncompromising statement should leave the doctors in no uncertainty as regards the impropriety of euthanaesia, sterilisation, and abortion on grounds other than to save a life. True, no side has been taken in the dispute of the rights and wrongs of these issues, but there can be no doubt that, in the mind of the experts responsible for these phrases, if there is to be euthanaesia, abortion, or sterilisation, then society must look elsewhere for its executioner, for the doctors' avowed aim is to save or prolong life and not to terminate it.

All these, however, must leave one still with a sense of incompleteness. Must the height of a doctor's moral behaviour be represented by a meticulous avoidance of the 4 As? Surely, there must be much more to human behaviour, doctor's own included, than these flimsy sinews of moral strength! It is to be appreciated that even a martinet in the discipline committee of

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the Medical Council will be unwilling to exact penalty for a weakness to which he himself may succumb, for after all, no man is perfect enough to cast the first stone. It is commendable, too, that a medical man would probably be indulgent of the frailties of his colleagues even more than his own, and would shun a position where he might have to set himself up as a judge on questions of morality which had equally threatened his conscience

from time to time. Nevertheless, we must face the fact that if the profession is to remain the respected, the dedicated, the courageous, and the just, then steps must be taken to provide the where-withal, so that the vision may materialise. The day of perfection in medical ethics may never dawn, but that should be no reason for us to indulge in the opiate of self-satisfaction, especially when the situation is far from happy.

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