

The Study of Awareness of Medical Ethics among the Resident Doctors of Civil Hospital, Ahmedabad, Gujarat

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Abstract

Introduction: The number of malpractice suits against doctors is increasing in India. The medical professionals should be knowledgeable and aware of the issues and laws that govern patient care and follow the Code of Medical Ethics as laid down by the Medical Council of India. This is important as it will not only enable the highest professional standards in the practice of medicine but also help avoid legal problems. *Materials & Methods:* An anonymous self-administered structured questionnaire about knowledge of Medical ethic was devised, tested, & distributed for the cross-sectional survey to resident doctors of Civil Hospital, Ahmedabad, Gujarat, India. The study was aimed at assessing the awareness of medical laws and ethics among the resident doctors. Among the one hundred twenty five distributed questionnaires 115 were returned, out of which fifteen questionnaires were incompletely filled and were not included for study, so 100 participants questionnaires were considered for the present study and analysed. *Conclusion & Results:* The participants were aware of various issues related to medical laws and ethics like informed consent, medical negligence, consumer protection acts, dichotomy, patient autonomy, paternalism etc. & as majority of participants agreed on questions. The participants knew the values of medical laws and ethics in medical profession.

Keywords: Medical Ethics; Resident Doctor; Code of Conduct.

Introduction

Medical Profession is guided and regulated by various laws & ethical guidelines. Medical Ethics is described as moral principles (code of conduct), which should guide the members of medical profession in their dealings with the patients, their relatives, community, and with other colleagues in profession. Modern code of medical ethics is basically developed from several ethical principles put forth by noble men and organizations in medical profession from the historical period of medical

practice such as Hippocratic oath, Declaration of Geneva and International Code of Medical Ethics, etc, in spite of all these guidelines, there are still a number of reported incidents of unethical behaviour of medical students, resident doctors and health practitioners with patients as well as colleagues [1,2,3]. The Indian Medical Council (Professional Conduct, Etiquette, and Ethics) Regulations, 2002 is aimed at strengthening the ethical standards among registered medical practitioners in India.,

The medical profession is becoming more and more technology dependent and various economical and market forces are influencing the decision making of the doctors. The medical profession is considered to be a noble profession, doctors and hospitals are expected to provide medical treatment with all the knowledge and reasonable degree of skill & care and will not do anything to harm the patient in any manner either because of their negligence, carelessness, or reckless attitude of their staff.

The number of malpractice suits against doctors is increasing in India. The medical professionals should be knowledgeable and aware of the issues

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and laws that govern patient care and follow the Code of Medical Ethics as laid down by the Medical Council of India. This is important as it will not only enable the highest professional standards in the practice of medicine but also help avoid legal problems. To reduce these lawsuits, acquiring a balance in training in both technique and ethics at the stage of medical education might be necessary [4].

As mentioned above, if ensuring that medical students acquire a sense of ethics results in a decrease in medical lawsuits, then ethics education for medical students using legal precedents as subject matter might be the best option. Courses in medical ethics are becoming an integral part of the curricula for many medical schools in Europe. Establishing ethics education using legal precedents, which has already been achieved in Western countries, will be a very important issue in some Asian countries including India [5].

Various methodologies are adopted to enhance the up gradation of knowledge regarding Medical Ethics of trainee doctors. It has been found that ethics teaching has a profound influence on medical professionals' attitudes and decision making [6,7]. Moreover, some institutions have developed guidelines for ethics in clinical teaching and surgical residency programmes [8-10].

Across undergraduate and graduate medical education, there is a call for more substantive preparation for the ethical challenges encountered by medical students and residents during training and in future professional duties [11-15].

Several studies have shown that medical students and residents do not experience past and current approaches to medical ethics and professionalism as sufficient to help them address the challenges they face [16,17,18]. Residents in several studies have expressed a preference for clinically oriented ethics education to prepare them for the day-to-day ethical tasks encountered in their work duties [16,19].

The trainee period is a critical time for fostering ethical reasoning [20]. Professional attitudes & ethics skills of physicians are shaped in part by lessons of medical training [21]. The resident doctors are trainee doctors working in tertiary care centre, they are first contact medical care providers to patients in hospitals.

During their training it is essential that they are exposed to various ethical issues related to medical profession. The study is conducted to assess the awareness of medical ethics among resident doctors of Civil Hospital, Ahmedabad, Gujarat, India.

Materials and Methods

Study Design and Participants

An anonymous self-administered structured questionnaire about knowledge of Medical ethics was devised, tested (after thorough review of literature and adapted from various studies previously conducted) [22,23] & distributed for the cross-sectional survey to resident doctors of Civil Hospital, Ahmedabad, Gujarat, India. The structured questionnaire about awareness of medical ethics were pilot-tested on 10 resident doctors, prior to distribution of the questionnaire. A pilot study was done with a select group of resident doctors who were asked to fill out the questionnaire and return with comments and criticism. Minor changes were made to the final questionnaire. The participation in this study was voluntary and informed written consent was taken from each participant.

The questionnaire consists of a range of statements designed (after a thorough review of the literature) to identify respondents' awareness about medical ethics, perceptions towards physician-patient ethics, physician-colleague relationships and disclosure of medical errors & common medical laws. The questionnaire included a full range of response options, designed to identify the resident doctors' awareness for medical ethics.

Among the one hundred twenty five distributed questionnaires 115 were returned, out of which fifteen questionnaires were incompletely filled and were not included for study, so 100 questionnaires were considered for the present study and analysed.

Observation and Discussion

The Hippocratic oath is still held sacred by physicians: to treat the ill to the best of one's ability, to preserve a patient's privacy, to teach the secrets of medicine to the next generation, and so on. The Nuremberg code, Helsinki code are the foundation of ethical codes in medical practices. When asked about the content of codes 58% of the respondents were aware of them.

The importance of ethical knowledge in medical profession, the options were (1) not at all (2) somewhat important (3) Very Important (4) Extremely Important. 60% respondents were of very important opinion while 40% were of extremely important. That shows the respondents are aware of the importance of ethical knowledge for medical profession.

Table 1:

Sr. No.	Statements	Agreed N (%)	Disagreed N (%)
1	Children should not be treated without consent of parents or guardian except in emergency	92	8
2	Ethical conduct is only important to avoid legal action	27	73
3	Medical practitioner should refer patients to get share of fees	3	97
4	If patients wish to die, should be assisted in doing so no matter what his/her illness	18	82
5	Patients should always be told if something is wrong	89	11
6	Confidentiality in medical practice cannot be kept in modern care & should be abandoned	74	26
7	Patients consent is needed only for operation not for investigation or treatment	10	90
8	During treatment patient's wish must be adhered to	71	29
9	Doctors should give the best possible treatment irrespective of the patient's opinion	70	30
10	Close relative must be told about patient's condition.	74	26
11	Doctors and nurse should refuse to treat patients who behave violently.	32	68
12	Doctors should not write the prescription in secret formula	92	8
13	Doctors are influenced by drug company inducement including gift.	33	67
14	A physician may run an open shop for dispensing drugs and appliances prescribed by other doctors.	31	69
15	In one's own practice it is better to use the brand name than the generic name of drug.	12	88
16	Patient can approach the consumer court for compensation, if any medical procedure has gone.	68	32

Majority of the respondents knew the values of medical ethics in medical profession. None replied the ethical knowledge is not at all important in medical profession. In study conducted in by S.Hariharan et al. all the doctors agreed that knowledge of ethics is important to their work [25]. In other studies majority of medical students (64-68%) believe that ethical practice are critically important in the provision of highest standard of medical care [24,25].

27% of respondents were of the opinion of following ethical principles in their profession will avoid them from facing legal issues which is higher when compared to the study done by Mohammed et al [26] in the state of Egypt where only 4.7% thought so.

71% of the respondents said they would always adhere to the patient's wishes during the course of treatment, these findings are comparable to the study done by Seetharam et al [27] where 65.1%, Mohammed et al [26] where 57.8% & Adhikari [28] et al where 66.9% of the respondents were of the same opinion.

In our study 70% said that irrespective of the patients opinion doctor should give the best possible treatment to the patients, where the study by Adhikari [28] et al 60.2% were agreed to this 89% of respondents were of the opinion that patients should always be told if something is wrong when compared to study done by Walrond et [26] et al showed 74.5% of respondents strongly agreed to this.

Consent is important in ethical practices. Only 10% of respondents were agreed that Patients consent is

needed only for operation not for investigation or treatment with comparison to study Singh, et al [29] where 20.5% of senior resident were of agreed to this.

72% agreed that close relative must be told about patient's condition where as 82.9% agreed to it in a study by Akoijam Brogen [30] et al & 77.1% agreed to this in study by adhikari [28] et al .

92% of respondents agreed that Children should not be treated without consent of parents or guardian except in emergency with comparison to study by Singh et al [29] where 86.3% & Adhikari et al [28]. where 85% of respondents agreed to this.

Patient has a right of access to health care. The healthcare worker should take reasonably practicable steps to maintain a safe environment for patients and staff in which patients can be offered treatment in accordance with the duty of care that is owed to them [31] 68% of respondents were disagreed that Doctors and nurse should refuse to treat patients who behave violently, in compare to study by Akoijam Brogen [30] et al, 71.3% of junior doctors disagreed to it.

Dr. Hebert [32] acknowledges that interactions with pharmaceutical representatives can give rise to conflicts of interests by influencing a physician's prescription practices, he also describes many examples of professional boundary transgressions, which range from accepting gifts from patients to having sexual relations with patients. These real-life cases serve to remind healthcare professionals of the importance of maintaining a therapeutic and professional relationship with their patients.

The current crisis in health care and the resulting evidence of large-scale malpractice, such as unnecessary surgery and laboratory investigations, glamour-based (as against necessary) medicine, the 'cut' practice, and quackery etc; the practitioners and medical institutions play on gullible patients [33].

Getting share of fees by referring patients (dichotomy) is unethical practice, 97% respondents were against this practices as compared to the study by Seetharam et al [27] 80% of respondents are against and 80.2% were against this type of practice in a study [34] carried out by Bhardwaj et al.

33% of respondents were agreed that doctors are influenced by drug company inducements including gift whereas in comparison with a study by Adhikari [28] where higher percentage 80.5 % of respondents were agreed to it while study by Bhardwaj [34] et al 30.4% respondent agreed to it

A basic knowledge of how medical negligence is adjudicated in the various judicial courts of India will help a doctor to practice his profession without undue worry about facing litigation for alleged medical negligence [35].

In a question to Medical negligence comes under with 49% of respondents replied as criminal, 5% civil, 12% consumer protection, 34% all of them in comparison to study carried out in Vadodara [36] where 30.49% of respondents resident doctors replied as criminal, 21.95% civil, 18.29.% consumer protection and 29.27% all of them.

The question to a physician may run an open shop for dispensing drugs and appliances prescribed by other doctors, 69% of respondent disagreed with it. 88% of the respondent disagreed to the statement that In one's own practice it is better to use the brand name than the generic name of drug. Majority of the resident doctors (89.%) in present study said they would inform the patient about anything is wrong, Our findings were higher when compared to the study done by Seetharam et al [27] (16.6%), Biswath Chatterjee et al [37] in state of West Bengal (72.9%) and Mohammed et al [26] (83.6%).

In a question regarding the patients wish to die, should be assisted in doing so no matter what his/her illness, 82% of the respondents were disagreed in a study by walrond er et [23] al., 78% of the respondents are strongly disagreed with it.

About the source of knowledge for learning ethics, 42% of respondents were relied on the books on ethics, 15% on ethics journals, 25% on media including Newspapers, TV, Internet, social media., 10% on clinical training, 3% on conference. In a study carried out by Biswath Chatterjee et al [40] in

2009 on undergraduate medical students in West Bengal 47.8% of respondents replied the source of knowledge as books on ethics.

Summary and Conclusions

The study was aimed at assessing the awareness of medical laws and ethics among the resident doctors. The participants were aware of various issues related to medical laws and ethics like informed consent, medical negligence, consumer protection acts, dichotomy, patient autonomy, paternalism etc. & as majority of participants agreed on questions. The participants knew the values of medical laws and ethics in medical profession

The medical profession is sometimes being criticized from all sections of society due to unethical practices & over consumerism. Medical ethics are more or less self imposing codes of conduct among the doctors. The Medical council of India has laid down professional ethical codes of conducts but it failed to ensure strict ethical standards among doctors. The medical students are taught the medical laws and ethics in the subject of Forensic Medicine but there is no any formal training in practice of medical ethics during residency for the postgraduate trainee doctors. The postgraduate trainee doctors will be benefitted from getting the exposure of the medico-legal process and the its consequences. During residency, thorough literature review of ethical negligence cases should be considered compulsory and medical law cases with possible legal implications should be discussed as a part of their training. There should be regular integrated seminars, CME's workshops, conferences for the resident doctors to enhance their skills related to medical laws and ethical issues. The curriculum for teaching of resident doctors needs to be more detailed in regard to medical laws and ethical issues.

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