



Medical Ethics in Philosophical Perspectives

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Abstract : *Moral philosophy is a branch of philosophy that involves systematizing, defending and recommending concepts of right and wrong conduct. The field of ethics, along with aesthetics, concerns matters of value, and thus comprises the branch of philosophy called axiology. The study of research is related with applied ethics which means what a person is obligated (or permitted) to do in a specific situation or a particular domain of action. which is mainly focus on the Medical Ethics.*

Key words: *Ethics, Moral philosophy, medical ethics.*

The medical ethics is a one of the branch of the applied ethics. Health care ethics (aka “medical ethics” or bioethics), at its simplest, is a set of moral principles, beliefs and values that guide us in making choices about medical care. Our ethical responsibilities in a given situation depend in part on the nature of the decision and in part on the roles we play. For example, a patient and his or her family play different roles and owe different ethical obligations to each other than a patient and his or her physician.

Medical ethics is an applied branch of ethics which analyzes the practice of clinical medicine and related scientific research.¹ Medical ethics is based on a set of values that professionals can refer to in the case of any confusion or conflict. These values include the respect for autonomy, non-maleficence, beneficence, and justice.² Such tenets may allow doctors, care providers, and families to create a treatment plan and work towards the same common goal.³ These four values are not ranked in order of importance or relevance and they all

encompass values pertaining to medical ethics.⁴ However, a conflict may arise leading to the need for hierarchy in an ethical system, such that some moral elements overrule others with the purpose of applying the best moral judgement to a difficult medical situation.⁵ Medical ethics is particularly relevant in decisions regarding involuntary treatment and involuntary commitment.

Origin of the word Medical Ethics:

The term medical ethics first dates back to **1803**, when English author and physician Thomas Percival published a document describing the requirements and expectations of medical professionals within medical facilities. The Code of Ethics was then adapted in 1847, relying heavily on Percival's words.

Relation ship with medical ethics:

Medical ethics defines relationships in the following directions:

- a medical worker — a patient;
- a medical worker — a healthy person (relatives);
- a medical worker — a medical worker.



Medical ethics includes provisions on medical confidentiality, medical errors, iatrogenesis, duties of the doctor and the patient.

Medical ethics is closely related to bioethics, but these are not identical concepts. Since the science of bioethics arose in an evolutionary way in the continuation of the development of medical ethics, it covers a wider range of issues.⁶

Medical ethics is also related to the law. But ethics and law are not identical concepts. More often than not, ethics implies a higher standard of behavior than the law dictates.⁷

Relationships between doctors

Caraka advised physicians to hold discussions with their colleagues. Discussion increases the zeal for knowledge, clarifies understanding, increases the power of speech, removes doubts and strengthens convictions. In the course of these discussions, many new things can be learnt

A friendly discussion, held between wise and learned persons who frankly and sincerely discuss questions and give their views without any fear of being defeated or of the fallacies of their arguments being exposed for in such discussions, is rewarding to all participants. Even though fallacies may be voiced, no one tries to take advantage of the other, no one is jubilant over the other's defeat and no attempt is made to misinterpret or misinterpret the other's views.

The ethics of the profession

A passage in the Caraka Samhita summed up the ethical injunctions of that time: "He who practices medicine out of compassion for all creatures rather than for gain or for gratification of the senses

surpasses all. ", "Those who for the sake of making a living make a trade of medicine, bargain for a dust-heap, letting go a heap of gold. ", "No benefactor, moral or material, compares to the physician who by severing the noose of death in the form of fierce diseases, brings back to life those being dragged towards death's abode, because there is no other gift greater than the gift of life.", "He who practices medicine while holding compassion for all creatures as the highest religion is a man who has fulfilled his mission. He obtains supreme happiness."

Importance of the Medical Ethics:

Medical Ethics Problems Can Be Challenging

Medical ethics involves examining a specific problem, usually a clinical case, and using values, facts, and logic to decide what the best course of action should be

Some ethical problems are fairly straightforward, such as determining right from wrong. hit others can also be more perplexing, such as deciding between two "rights" two values that are in conflict with each other – or deciding between two different value systems, such as the patients versus the doctors.

Doctors may deal with a great variety of perplexing ethical problems even in a small medical practice. Here are some common problems identified in a 2016 Medscape survey, where at least some physicians held different opinions:

- Withholding treatment to meet an organization's budget, or because of insurance policies;
- Accepting money from pharmaceutical or device manufacturers;
- Upcoding to get treatment covered;



- Getting romantically involved with a patient or family member;
- Covering up a mistake;
- Reporting an impaired colleague;
- Cherry-picking patients;
- Prescribing a placebo;
- Practicing defensive medicine to avoid malpractice lawsuits;
- Dropping insurers; and
- Breaching patient confidentiality owing to a health risk.

Professional standards are a way to provide some guidance on ethical problems, but they cannot address every issue, and they may not address troubling nuances, such as reconciling two conflicting values.

Practical Implications of Medical Ethics

Some doctors think of medical ethics as a very esoteric field, removed from the practical considerations of clinical practice. It is true that medical ethics is first and foremost a matter of conscience, but it also has some very practical implications and applications.

Physicians who can describe their ethical concerns and use negotiating skills may be able to change the organizational policies that produce burnout.

Here are some reasons to take medical ethics seriously:

To help resolve disputes between family, patients, physicians, or other parties. Often, the parties involved are operating strictly on emotion, which makes it difficult to come to a logical and fair decision. Ethics adds another dimension to help make decisions.

To maintain a clear conscience. All doctors want to be sure they have done the right thing. Being an ethical physician is more important than making

money or seeing as many patients as possible.

To not make yourself look uninformed. Physicians sometimes stumble onto poor decisions because they did not understand their role, had not bothered to identify an ethical challenge, or hadn't thought the situation through to its logical conclusion.

To maintain the respect of your patients, heal missteps can destroy the bond between doctor and patient. Patients often implicitly trust their doctors, but once that trust has been breached, it is difficult to repair.

To maintain respectful relationships with other clinicians. Your colleagues often have very definite opinions about what is ethical, often enshrined in various codes of ethics of the profession or learned from mentors. Those codes and ethics role-modelling are created by people who practice some form of ethical decision-making.

To maintain some efficiency. Although ethical decision-making often requires extra time, it also can save time by anticipating disagreements that can slow down the care process. If you aren't ethical, patients or other caregivers who are upset with your decisions can seriously impede your work.

To reduce burnout. One cause of burnout is incongruence between physicians' personal values and those of their organization. Physicians who can describe their ethical concerns and use negotiating skills may be able to change the organizational policies that produce burnout.

Relationship between Philosophy and Medicine

There is a relationship between the Philosophy and Medicine. Medicine cannot exist without Philosophy. The



Philosophical stance early founders had is the basis on which medicine has developed medicine. The Pill you are given is based on the need for that pill. The need for that pill is based on the philosophical stance that they are trying to change a chemical state within you. Meaning you have a poorly functioning chemistry that is believed to need change a chemical property should be, and that your body is not in control. So yes, medicine is based on philosophy just not an intelligent one. To think that we truly know what the exact chemistry is supposed to be a certain point and time, over the innate ability of the human body, is egoistical intrusive, and dangerous.

Ethics form the base ground of values which differ from one culture to another. Ethics was applied in health care system, since ancient Egyptian times. A physician has moral obligations towards his patient based on physician - patient's relationship. The ethical principle of confidentiality confirms that patient can trust his health care provider not to disclose any information that the patient may have given in order to get cured. A current ethical issue in research involving human participant's informed consent has prime importance. The subject and his guardian must have the capacity to understand the issue in question and the possible risks of treatment in the trial study. We need to do more to ensure that medical research practices are sound and ethical, and the goals of research should be secondary to the well-being of the participants.

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