

Evaluation and Analysis of Ethical Issues in the Field of Medicine

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ARTICLE INFO

Article history:

Received 09 Apr 2020

In revised form 11 June 2020

Accepted 15 July 2020

Keywords:

*Ethics, Medical Ethics, Challenges of
Medical Ethics*

ABSTRACT

Extensive scientific and clinical studies have been conducted on the topic of medical ethics due to its significant importance in various societies, as well as its breath and health sensitivity in all communities. The present study aimed to discuss the comprehensive principles agreed both globally and in Islamic ethics in addition to defining and presenting a history of medical ethics. In addition, efforts were made to recognize and prioritize the challenges of medical ethics in India based on experts' opinions so that researchers and scholars would more focus on the challenges in medical ethics in the future. This was an applied research in terms of goal and a descriptive survey regarding data collection. Following the review of the literature and obtaining the experts' results, we identified 10 challenges in the field of medical ethics. Afterwards, the opinions of the experts were analyzed to rank the challenges. According to the results, the challenges of professional communication in medicine, education of physicians and professors and abortion had the highest priority.

1. Introduction

Similar to all professions, medicine requires ethics, and profession owners have two expectations of ethics: 1) systematic expression of ethical responsibilities in the profession and 2) accurate recognition and effective resolution of professional ethics (Shojaei and Abolhasani Niaraki, 2011). With the advancement of medical technologies, new and sensitive issues have emerged in the field, posing important challenges in today's world. To deal with these challenges, a science known as medical ethics has been taken into consideration. While the history of medical ethics is as old as medicine itself, it is currently known as an interdisciplinary science including philosophy, religious studies, laws, medicine, history, and sociology. Given the different foundations of each culture and community, it is extremely difficult to reach a complete consensus in this regard. Therefore, various societies have evaluated the principles that can address challenges with a holistic view. Given the importance of ethical issues and challenges in the field of medicine, the present study aimed to evaluate the challenges existing in the field of medical ethics in the country. To this end, the theoretical foundations of the research were reviewed at first, followed by introducing the research methodology. In the next stage, we evaluated the results and provided discussion and conclusion as the final part of the research.

1.1. Theoretical Foundations and Research Background

1.1.1. Ethics

The word ethics is the plural form of ethic interpreted as the inner form of man and nature and habit. The instincts, properties, as well as the spiritual and the intrinsic traits, exist in man are called ethics. On the other hand, ethical behavior or ethics are defined as the behaviors resulting from these properties (Naraghi, 1934). Ethics is related to the domain of human action and voluntary behavior and deals with the valuation of these actions. In general, valuation in ethics includes good and bad, right and wrong, and dos and don'ts (Bashir and Harati Nik, 2011). In fact, ethics is a set of mental and spiritual traits of mankind that emerged as the actions and behaviors that arise from the inner morals of a man. Therefore, it could be expressed that ethics is defined based on its impact. The persistence of one particular kind of behavior means that it has an inner root in the depth of one's life and soul, the root of which is ethics and mood. While the domain of ethics is observed as the limit of individual behavior, individual behaviors are transformed into collective ethics as they become more prevalent at the community level or in social institutions. Then, they penetrate the society's culture and find a dominant presence, according to which society can be recognized (Falah Tafti et al., 2013).

1.1.2. Medical Ethics

Medical ethics is a system of ethics that applies values to clinical practice and scientific research. In fact, medical ethics is a set of values used by experts in the case of any conflict. These values include respect for independence, no violence, charity, and justice (Beauchamp and James, 2013). In addition, medical ethics is an interdisciplinary science interrelated to various sciences such as ethics, law, religious studies, and philosophy. Therefore, focusing on

these fields and issues related to them in defining medical ethics is inevitable (Khaghanizadeh et al., 2012). Given the minor and general cultural differences, we deal with individuals with different values in presenting ethical issues every day. This issue is evident in a community such as the United States, which has a multicultural society. Ethical issues should provide comprehensive guidelines. Ethical problems resulting from advances in modern medical diagnostics have made the necessity of addressing medical ethics even more urgent (Nazari Tavakoli et al., 2013).

There are several principles in this area, some of which are mentioned below:

- **The Principle of Patient Autonomy and Independence**

Blood cell transfusion practice is forbidden in the Jewish religion. If patients' interests are to be taken into account, they should receive a blood transfusion. However, according to the principle of patients' independence, they are allowed to practice blood transfusion or face death (McCormick, 1991).

- **The Principle of Non-bias and Lack of Violence**

Risk imposition and causing irreversible damage to patients are among the examples of this principle. For instance, patients must know that they would have a longer life if they tolerated pain or they would have a shorter life in case of undergoing pain alleviation measures to decide about this issue themselves. For example, a pregnant patient who has cervical cancer must undergo a hysterectomy in order to maintain her health. While this act is to the benefit of the patient, it leads to unwanted loss of the fetus. Therefore, according to this principle, the decision must be made by the patient herself (Beauchamp & James, 2013).

- **The Principle of Charity and Benevolence**

The common definition of this term is that healthcare providers are responsible for taking patients' interests into account and performing accurate treatment actions to prevent patient injury. For instance, if a patient has committed suicide, the healthcare team must make efforts to return them to life (Beauchamp & James, 2013).

- **The Principle of Justice**

It is generally stated that individuals should be treated equally in medical services. One of the issues in this regard is justice in distribution (Beauchamp & James, 2013), which means that the attention of the medical team to a patient with an emergency situation is greater than that of a person who does not require immediate attention, effort, and supply according to the principle of justice.

1.1.3. International Codes of Medical Ethics

The International Codes of Medical Ethics was adopted by the General Assembly of the Medical Association in London in 1949, and corrected and revised in 1968, 1983, and 2006. The main goal of this principle is to determine and creating ethical principles for physicians based on their general responsibilities to patients and other colleagues worldwide. In this regard, some of the ethical codes include (Williams, 2016):

- 1) Respect: respecting the people means the patient has the right to be treated with dignity and respect. For instance, we cannot deprive an HIV-positive patient of treatment.
- 2) Honesty: it is necessary to report the inefficiency, defects, weaknesses, and immorality of colleagues in medical ethics codes, who have defects in their personality or attempt to deceive others. Application of this principle is often not that simple; on the one hand, a physician may be tempted to ruin the reputation of his/her colleague because of wrong personal motives, such as jealousy or retaliation. The physician may be reluctant to report a colleague's misconduct for friendship or common sense.
- 3) Confidentiality: confidentiality of patients' information is another part of ethical codes. In this regard, the information obtained during the medical professional activities regarding patients and their medical history must remain confidential.

1.1.4. Medical Ethics with Islamic Approach

The importance of ethics in Islam can be found in the words of Muslim saints and their way of living. Imam Ali states: even if we do not believe in heaven and right and do not fear of hell, it is worthy to seek ethics because they are our path to survival (Mostadrak al-Vasael, Vol. 11, p. 193). In our religious foundations, morality is generally referred to as the mission of the prophets. The prophet of Islam states: "I was sent to uphold and complement ethical values" (Bihar al-Anwar, Vo. 68, p. 382). Medical ethics is one of the derivatives of professional ethics; according to the experts of the field, the Islamic countries must consider ethical principles with the exception of four principles of the western school (as previously mentioned) due to their cultural, social, and religious differences (Sachedina, 2009). According to these scholars, the ethical principles of Islamic medicine include (Khaghanizadeh et al., 2009):

1.1.5. The Principle of Communication with God

The first and most important type of relationship is the relationship between human beings and their creator. In this regard, three sub principles of devotion, admonition, and gratitude are related to this principle.

- The principle of devotion: being devoted is revealed in being restrained from lust in terms of physical and instinctual dignity, knowing that science is a divine gift regarding intellectual dignity, and not seeking excellence in terms of moral and social dignity.
- The principle of admonition: a man always finds himself in the presence of God, which causes the physician to avoid deviation in all areas of work.
- The principle of gratitude: this principle makes the physician more humiliated for divine blessings. In fact, gratitude means that each physician considers the ability and expertise to treat patients as a divine blessing and appreciates God's blessings by helping patients.

1.1.6. The Principle of Communication with Oneself

The principle of communication with oneself deals with the question that: what is the responsibility and obligation of man against himself? This principle emphasizes the relationship between mankind and himself, removing any impurity from one's heart, as well as tolerating and putting pressure on oneself. The sub-principles of this category include piety, dignity, and self-knowledge.

1.1.7. The Principle of Communication with Society

The social life is a necessity for human beings, and the purpose of creation is realized when there is a collective and social life. This principle includes three sub-principles of justice and brotherhood and cooperation.

- The principle of justice: according to Ahmad al-Naraqi, justice in relationship with others means claiming rights and rejecting trusteeship, fairness in transactions, respecting elites, respecting the elderly, as well as helping the oppressed and the weak. In this regard, we can refer to issues such as discrimination in providing services to patients, meeting one's needs through immoral and illegal practices, extortion, and overlooking patients' rights.
- The principle of brotherhood: (the Believers are but a single Brotherhood: So make peace and reconciliation between your two (contending) brothers) (10 Al-Hujurat). This view is much more enhanced, compared to considering patients only as a client.
- The principle of cooperation: in terms of cooperation, the Holy Quran says (help ye one another in righteousness and piety, but help ye not one another in sin and rancor: fear Allah. for Allah is strict in punishment). Piety is obedience to the elders, and keeping their dignity in the family and social space is one of the signs of piety. In addition, piety is defined as helping and serving the elders of each tribe.

In this regard, another Ayah is (but do not cooperate in sin and aggression). Crime is a sin that leads to social damage, while aggression means violating one's personal and social limits and violating one's privacy. In the term (do not cooperate), the Quran says that (you who believe in God, do not cooperate in sins that lead to damage). This statement shows that believers are not immune to the temptations of the devil and sometimes commit sins that cause innumerable personal and social harm. In this regard, one of the most obvious mistakes is the affection for and attachment to worldly belongings. Believers should not help one another in the love and attachment to the world because they are violating the limitation of the servant of God. A servant must remain a servant at all times and accept his God's order wholeheartedly. In addition, a servant must accept all dos and don'ts from God and should not think that the importance of God's dos decreases with negligence. Believers should not cooperate in divine aggression.

4. The Principles of Communication with Nature

In Islam, the Muslim man is not indifferent to his surroundings and finds it a divine sign. Although free, humans cannot harm and destroy nature and intervene with their traits under the pretext of technological growth.

1.1.8. A Review of Medical Ethical Issues and Challenges

According to a library study and review of articles in this field, 10 items related to ethical issues and challenges were identified as follows.

1.1.9. Euthanasia and Mercy Killing

The term euthanasia is a combination of the Greek prefix EU (means good and easy) and the word thansania, which means death. In addition, the term is derived from Thanatos, which is the Greek god of nonviolent deaths. In Farsi culture, euthanasia means easy death, a simple, good death, sweet death, and mercy killing. In the western view, this type of death is often not questioned and the individual has the right to decide for himself/herself. However, some have also warned about the unpleasant effects on physicians' emotional state. Clinical physiologists and psychologists often seek to evaluate patients' ability to make decisions about life and death at the end of life. People with mental illnesses such as delusions or clinical depression may lack the ability to make the final decision (Assessing mental capacity, 2018). Islam considers the pain and sorrows of death as the remission of sins, and there is no justification for merciful death (Afzali and Marzband, 2014).

· Abortion

Some people respect the right to live for a formed embryo, whereas others believe that it is the right of the mother to decide about this issue since she is the carrier (Fatemi, 2001).

· Professional Communications in Medicine

These communications include the patient/doctor relationship, receiving consent, confidentiality, being truthful, and relationship with colleagues (Rezai Tarirani, 2012).

· Children's Rights in Medicine

An important issue in medicine is children's rights; due to underdevelopment and young age, they do not have sufficient capacity to understand medical issues and make informed decisions. Therefore, some believe that parents have legal authority over their children until reaching the legal age (Meyfour et al., 2015).

· Organ and Tissue Transplantation

The organ and tissue transplantation is so intertwined with the ethical debate that it has attracted the attention of religious scholars, philosophers, lawyers, doctors, policymakers, and even the general public in most countries of the world (Meyfour et al., 2015).

· Cloning

Today, the issue of "cloning" has become a global and public topic. While its details and future are unclear, numerous people and groups around the world are pursuing this new phenomenon from a variety of dimensions in their studies. Inside India, Faqīhs have reacted differently to the issue (Meyfour et al., 2015).

· New Methods of Contraception and Pregnancy Induction

This topic has also been mentioned in "The Canon of Medicine" by Avicenna. While the use of contraceptives is prohibited in Islam, it is allowed in some cases. Even abortion is allowed sometimes in Islam (Meyfour et al., 2015).

· The Dangers of Using Information Technology

The moral dangers caused by new information technologies have led to conflicts in their use with the principles of utility, authority, honesty, and justice. Generally, there is uncertainty regarding the confidentiality of information and dishonesty due to the hacking of systems by hackers and providing patients with inaccurate information. An example would be receiving positive test results by an HIV negative person. Inequal access to Internet services is also a type of injustice (Aminpour, 2007).

· Education of Medical Ethics

In the health system, making efforts to convey the concepts and meanings of issues in the field of professional ethics to physicians has been recognized as a challenge (Khaghanizadeh, 2012).

• Doctor-patient Conflicts of Interest

Made for the interests of the two parties, this type of conflict endangers the health and imposes more costs and problems on patients to respond to profitability.

A summary of the challenges and issues of medical ethics is presented in Table 1 based on the literature review.

Table 1. A summary of issues and challenges of medical ethics based on literature review

Column	Challenges of Medical Ethics
1	Euthanasia and Mercy Killing
2	Abortion
3	Professional communications in medicine
4	Children's rights in medicine
5	Tissue and organ transplantation
6	Cloning
7	New Methods of Contraception and Pregnancy Induction
8	The dangers of using information technology
9	Challenge of education of physicians and professors
10	Doctor-patient conflicts of interest

2. Methodology

In this study, we attempted to evaluate and analyze the most important challenges in the field of medical ethics. This was an applied research in terms of goal and a descriptive survey regarding data collection. First, the challenges and issues in the field of medical ethics were derived from the literature. Moreover, experts' opinions about the importance of each challenge and issue were collected using a questionnaire. In this respect, a questionnaire based on a seven-point Likert scale was designed to evaluate the level of importance of each challenge. In addition, the tool was exploited to receive the level of agreement of experts with the importance of challenges. Data analysis was performed using the Kolmogorov-Smirnov test (K-S) to determine and fit the type of data distribution obtained from the questionnaire. According to the results, there was an abnormal distribution of the data, which led to considering the data as an open distribution society and assessing them by nonparametric tests. Therefore, the challenges and main issues were ranked by the Friedman test. The content validity of the questionnaire was approved based on experts' opinions, and its reliability was confirmed at the Cronbach's alpha of 0.823 (proper reliability due to being larger than 0.70). Data analysis was carried out in SPSS version 22 using inferential statistics.

3. Results

The most important challenges and issues in the field of medical ethics were identified and ranked following the analysis of the results obtained from the questionnaires. In total, 53 questionnaires were distributed among the experts of the field at Fehli University of Medical Sciences to collect the data and recognize the most important challenges in the field of medical ethics. The participants expressed their views based on a seven-point scale. In order to ensure the recognition of all challenges in the field, an empty box was provided in the questionnaire so that the experts could add any missed challenge and score it based on their opinion. Afterwards, the normality test was performed on the collected data, for which we used the K-S test with the following hypotheses:

H_0 : the variable considered has a normal distribution.

H_1 : the variable considered has an abnormal distribution.

The results are shown in Table 2, according to which the P-value was ≤ 0.05 . Therefore, the H_0 was rejected and the abnormal distribution of the data was confirmed.

Table 2. K-S test results

Column	Challenge	Asymp.sig. (2-tailed)
1	Euthanasia and mercy killing	0.001
2	Abortion	0.003
3	Professional communication in medicine	0.015

4	Children's rights in medicine	0.001
5	Tissue and organ transplantation	0.009
6	Cloning	0.003
7	New methods of contraception and pregnancy induction	0.000
8	Dangers of using the information technology	0.008
9	Challenge of education of physicians and professors	0.001
10	Doctor-patient conflicts of interest	0.000

The abnormal distribution of the data led to the use of the Friedman test (a nonparametric test) to rank the data, the results of which are shown in Table 3.

Table 3. Results related to ranking of challenges using the Friedman test

Challenges	Mean Rank	Final rank
Euthanasia and mercy killing	4.93	6
Abortion	6.79	3
Professional communication in medicine	8.61	1
Children's rights in medicine	6.07	3
Tissue and organ transplantation	3.36	9
Cloning	4.50	8
New methods of contraception and pregnancy induction	2.21	10
Dangers of using the information technology	5.71	5
Challenge of education of physicians and professors	8.18	2
Doctor-patient conflicts of interest	4.64	7

According to Table 3, the challenges of professional communication in medicine, education of physicians and professors, and abortion had the highest priority.

4. Discussion and Conclusion

Modern medical ethics is, in fact, one of the branches of professional ethics that seeks to incorporate ethics into the practical domain of physicians and medical staff as well as in ethical decision making in medicine. This process involves an analytical activity in which the thoughts, beliefs, commitments, behaviors, emotions, and arguments of medical ethics decision-makers are carefully and critically examined. Medical ethics decisions in the field of medical practice discuss the axioms and values, good and bad, right and wrong, and dos and don'ts (Khaghanizadeh et al., 2009). The issues and challenges in the field of medical ethics can be interpreted based on the four globally accepted principles and four Islamic principles even if there are no mutual responses. There are different challenges in India due to its specific cultural and social context. Therefore, we prioritized the meticulous assessment of the physicians' opinion about challenges based on the geographical, cultural and sociological status of the country. As mentioned before, the main goal of the present study was identifying the most important challenges in medical ethics. A total of 10 challenges were derived as the main challenges after the view of the literature and using the opinions of experts. Following that, the challenges were ranked by statistical analysis of the questionnaires. According to the results of the study, the five most important challenges included:

1. Professional communication in medicine
2. Challenge of education of physicians and professors
3. Abortion
4. Children's rights in medicine
5. Dangers of using the information technology

It is recommended that the qualitative methodology be applied in future studies to identify the effective variables in the field of medical ethics and explain their correlations.

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How to Cite this Article:

Ravali S. Evaluation and Analysis of Ethical Issues in the Field of Medicine, *Journal of Social Sciences and Humanities Research* 8(3) (2020) 55–60.