Ethics: Core of Medical Profession

In the sick room, ten cents' worth of human understanding equals ten dollars' worth of medical science. ~Martin H. Fischer (1879–1962)

At the descriptive level, certainly, you would expect different profession to develop different sorts of ethics and obviously they have; that doesn't mean that you can't think of overarching ethical principles you would want people to follow in all kinds of places.

Medical ethics is a system of moral principles that apply values and judgments to the practice of medicine. As a scholarly discipline, medical ethics encompasses its practical application in clinical settings as well as work on its history, philosophy, and sociology.

Historically, Western medical ethics may be traced to guidelines on the duty of physicians in antiquity, such as the Hippocratic Oath. early Christian teachings. The first code of medical ethics, Formula Comitis Archiatrorum, was published in the 5th century; during the reign of the Ostrogothic king Theodoric the Great. In the medieval and early modern period, the field is indebted to Islamic scholarship such as Ishaqibn Ali al-Ruhawi (who wrote the Conduct of a Physician, the first book dedicated to medical ethics)

The image seems to be an imaginative depiction of the inside of a ethical committee board giving their verdicts between doctors without borders and doctors without boundaries. No one among us would defy the importance of ethics in medicine, as it is said a person without ethics is a wild beast that is unleashed to the earth. Since the beginning of civilized time nations are getting help from other nations in terms of their expertise. In medicine,

experts are welcome to shed their knowledge to sufferer's regardless of what part of the world they belong. Emergence of more deadly and horrific diseases like Ebola, HIV/AIDS has added more value to the doctors to work without borders. This world is considered a global village, so there should be no hesitance to take advantage from the expertise of a medical professional that does not belong affected area.

An organization named as **Doctors without Borders** was formed in 1971 by a group of French physicians, most of whom had worked for the International Red Cross in Biafra in 1968 and 1970. According to the group, they aimed to overcome two shortcomings of international aid, "that it offers too little medical assistance and that aid agencies are overly reticent in the face of the many legal and administrative obstacles to the provision of effective humanitarian relief."**Doctors without Borders:** A group which sends physicians and other health workers to some of the most destitute and dangerous parts of the world and encourages them not only to care for people, but also to condemn the injustices they encounter. The 1999 Nobel Peace Prize was awarded to Doctors without Borders (in French, Medicins Sans Frontieres MSF).

On the other hand ethical board has its consensus at; principles of beneficence, autonomy, and nonmaleficence, compassion along with fiduciary partnership are the core concepts in the doctor-patient relationship in therapeutic settings. There are varieties of reasons for boundary problems. Physicians ignorance, exploitative character, emotional vulnerability moral weakness and similar factors may pave the way for boundary issues resulting in nonsexual or sexual boundary crossings and violations.

While some cases of sexual exploitation involve predatory doctors, many other cases represent the culmination of a series of boundary crossings (non-exploitative departures from usual practice). The deliberate move to reduce formality in medicine has increased the likelihood of boundary crossings and violations. There are also individual doctor risk factors; boundary violations appear more likely when doctors are under stress, with insufficient emotional support. Doctors are often involved in other professional relationships as teachers, supervisors and team leaders; inappropriate sexual behaviour in these relationships is harassment. Public pressure for more punitive responses is likely if the profession is not seen to be doing all it can to deal with these issues effectively, and to be cooperating with other responsible agencies.

Preventive strategies include continuing education about ethics and the management of professional boundaries, along with appropriate psychological support structures for doctors.

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