

Editorial

Application of Medical Ethics in Clinical Practice: Current Perspective

Mahmud Hossain¹, Tarana Jahan²

¹Professor and Head, Department of Paediatrics, Monno Medical College and Hospital, Monno City, Gilondo, Manikganj, Bangladesh; Councilor and Member of SRC, Bangladesh Medical and Dental Council (BMDC), Bangladesh. ²Assistant Professor, Department of Microbiology, Monno Medical College, Manikganj, Bangladesh


Medical ethics is a code of conduct in order to render the best possible service to the humanity and to maintain the honor and dignity of the members of the medical profession. Ethics is a science of moral values or principles. Medical ethics is indeed the foundation for upholding professionalism, integrity, and compassion in healthcare. It encompasses a set of moral principles guiding healthcare providers in their relationships with patients, colleagues, and society at large. At its core, medical ethics promotes key values like beneficence (acting in the patient's best interests), non-maleficence (avoiding harm), autonomy (respecting patients' right to make informed decisions about their care), and justice (providing fair and equitable treatment).¹ By following these ethical principles, healthcare professionals are better equipped to navigate complex situations and make decisions that honor the trust placed in them by society. However, ethical dilemmas often arise, influenced by advances in technology, changes in patient expectations, and the complexities of healthcare systems. Ethical practice not only protects the rights of patients but is also a safeguard of medical practitioners. Today's physicians face complex challenges that require careful ethical consideration, including data privacy, end-of-life care, and disparities in access to treatments. These issues emphasize the need for ongoing ethical reflection and education within the medical profession, helping physicians make informed, compassionate decisions that promote fairness and respect for patient rights.

The history of medical ethics ushered since the code of Hammurabi about 2200 BC. The Greek physician Hippocrates declared an oath known as Hippocratic oath within 460 to 377 BC. Medical practice worldwide over and above the Hippocratic Oath is governed by normative

or moral philosophical theories as enshrined in (contemporary) medical ethics. In the medieval and early modern period, the field is indebted to Islamic scholarship such as Ishaq ibn Ali al-Ruhawi (who wrote the Conduct of a Physician, the first book dedicated to medical ethics), Avicenna's Canon of Medicine and Muhammad ibn Zakariya ar-Razi (known as Rhazes in the West).² The modern principles of medical ethics were prepared by Thomas Percival in 1803. Lastly Geneva declaration was declared in 1948 and was accepted by the general assembly of the world medical association in London on October 12, 1949. Till this day, we are abiding by those points of Geneva declaration.³ In ancient civil society, medical ethics was applied according to Hippocratic Oath. With the change of time, codes of conduct, laws have been upgraded. Now a days, medical ethics is a basic module of medical curriculum at the institutes of developed countries like USA, Canada, and many European countries.⁴ In Bangladesh, the Bangladesh Medical and Dental Council (BMDC) regulate the discipline in relation to misconduct, malpractice, negligence, in medical practice.¹ According to BMDC guideline: Disregard of professional responsibility to patient, such as gross negligence in respect to his professional duties to his patient may be regarded as misconduct sufficient to justify the suspension or the removal of the name of a medical practitioner from the register. The Medical and Dental Council Act, section 28 provides that if any registered medical/ dental practitioner has been convicted of any criminal offence, or after due enquiry, found guilty of infamous conduct in any professional respect by the council, the council may in its discretion direct the removal of the name of the medical practitioner from the register.² The word convicted is obviously used in relation to a duly constituted court.

Correspondence: Dr. Mahmud Hossain, Professor, Department of Paediatrics, Monno Medical College and Hospital, Gilondo, Manikganj, Bangladesh; **Email:** mahmudhossain1962@gmail.com; **Cell No.:** +880 1712-209260; **ORCID:** <https://orcid.org/0009-0009-7766-2356>.

How to cite this article: Hossain M, Jahan T. Application of Medical Ethics in Clinical Practice: Current Perspective. J Monno Med Coll. 2024 December;10(2): 52-54.

Copyright: This article is published under the Creative Commons CC BY-NC License  (<https://creativecommons.org/licenses/by-nc/4.0/>). This license permits.

Glimpse of Ethical Medical Practice Guideline for physicians:

According to Bangladesh Medical and Dental Council (BMDC) audience 2010: A doctor must keep his professional knowledge and skills up to date, refine & develop his clinical judgment as he gains experience. A doctor should assess a patient's condition adequately by taking detailed history, doing relevant physical examinations, be rational in advising investigations, prescribing medicines & performing any operative procedures where necessary. A doctor should be a good listener & give his patient reasonable & enough time for the brief narration of his ailment as patient's satisfaction is the absolute concern here. A doctor is expected to show the utmost empathy & compassion towards his patients. A doctor will prioritize & attend his patients according to their clinical needs unavoidable emergencies. A doctor should not discriminate his patients in terms of cast, creed, religion, gender, disability, financial condition, ethnicity, nationality or political bias. A doctor should respect and maintain the privacy of a patient during physical examination & must provide necessary means to cover the patient from other persons while examining, especially the private parts of the patient even while undergoing an operative procedure. A doctor must ensure and explain all the details preceding any physical examination or operation. Before any invasive or non-invasive procedure that a doctor needs to be assured about for the purpose of teaching, research, or treatment, informed written consent or other legitimate permission must be obtained. A doctor must not disclose any information with others regarding the ailment of his patient, without seeking his/her permission unless it is counted as medico-legal issue & he should also keep all information confidential. A doctor should not interfere in the family affairs or private life of his patient unless there is a professional reason to do so. A doctor should consider adequate counselling of his patient for giving proper visualization of his ailment, available treatment modalities along with the disease prognosis. A doctor should give the opportunity to his patient to clarify the questions or refuse any intervention & treatment after expressing his medical opinion with the greatest possible clarity. It is the duty of a physician to ensure possible least amount of suffering when a patient's death is imminent. This includes attending to the physical, emotional, social, and spiritual needs of a terminally ill patient. Whenever necessary a doctor should refer the patient to other specialist for either diagnostic or therapeutic services.

A doctor must not accept any financial or other inducement from any person or organization (diagnostic laboratories, hospitals, nursing homes) for the referral of a patient regarding consultation, investigations or treatment. Without any contract or liabilities or any compulsion, nominal gifts/products given by the pharmaceutical company for publicity purpose can be accepted. A doctor when prescribing should only choose the medicine or appliance which, in his professional judgment & considering cost effectiveness, will best serve the medical interests of his patients. A doctor must not associate himself with a non-qualified person in providing any form of healing or treatment for his patients. Doctor's society or organization can take non-compulsion support from any pharmaceutical company & allied industries for the arrangement of CME (Continuing Medical Education) or other academic symposium. A doctor should not mention anything in his/her profile which is not legally or professionally accredited. It is unethical for a doctor to make unjustifiable comments which, whether directly or by implication, undermines trust in the professional competence or integrity of another doctor. While attending a female patient, a male doctor is supposed to be accompanied by a female attendant or relatives of the patient.⁵

By grounding practice in ethical principles, healthcare professionals can uphold the dignity, trust, and honor that define their profession. In a time of rapid change, these ethical foundations provide a steady framework, reminding that the true measure of medical progress lies not just in scientific achievement but in compassionate, principled care.

Received:10 October 2024, **Accepted:** 22 November 2024 **Published:** 1 December 2024 **DOI:**<https://doi.org/10.3329/jmomc.v10i2.78106>

References

1. Jahan MU, Rahman SM. Understanding of professional ethics among a sample of medical practitioners in Bangladesh. Bangladesh Medical Research Council Bulletin. 2020;46(3):168-75
2. Latif A. Development of Pharmacology (Ilmul Advia) During Abbasid Period and its Relevance to Modern Age. Prowess Publishing; 2019;11.
3. Editor T. Code of Medical Ethics: Guidelines of Bangladesh Medical and Dental Council (BMDC). BIRDEM Med J 2014;4(1):1

4. Batistatou A, Doulis EA, Tiniakos D, Anogiannaki A, Charalabopoulos K. The Introduction of Medical Humanities in the undergraduate curriculum of Greek medical schools: challenge and necessity. *Hippokratia*. 2010;14(4):241

5. Bangladesh Medical and Dental Council. 2010. Code of Professional Conduct, Etiquette and Ethics. <https://www.bmdc.org.bd/docs/EthicsBookMakeupfinal.pdf>. Accessed 1 Oct 2024.