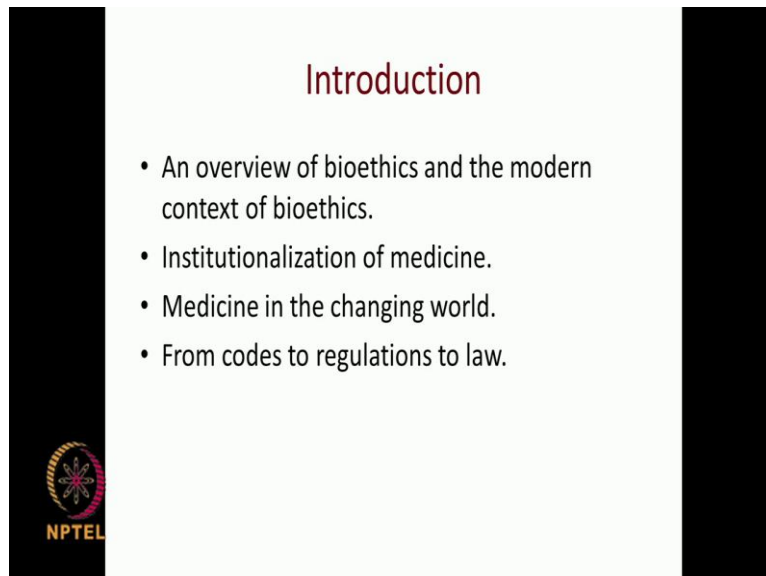


**Issues in bioethics**  
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**Module No. #01**  
**Lecture No. #01**  
**General Introduction**


Welcome to this course Issues in bioethics, Module one, Unit one. So, this course tries to introduce the discipline bioethics by highlighting some of the very important problems or issues that figure in. There is a slight focus on the historical and conceptual aspects and this lecture, we will focus the following topics

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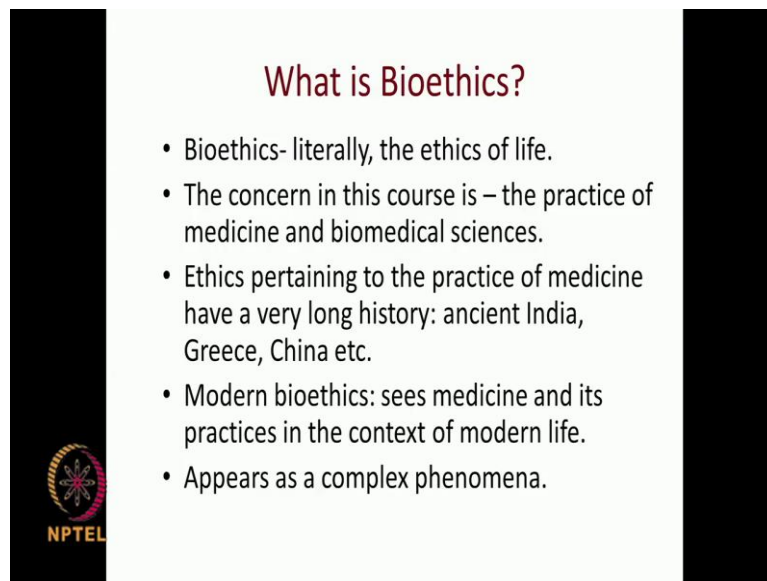
**Introduction**

- An overview of bioethics and the modern context of bioethics.
- Institutionalization of medicine.
- Medicine in the changing world.
- From codes to regulations to law.

  
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It tries to give an overview of bioethics and the modern context of bioethics, of course the historical and other aspects, we will be dealing more elaborately in a later lecture. In this unit, we will try to see how the modern context of bioethics is unique compared to several other aspects. And then in this context, the institutionalization of medicine is a very important concept or a very important problem and then medicine in the changing world is something, which we were going to, we are trying to map in this lecture. Again, we try to conclude by saying from, how codes to regulation and to law bioethics is gradually progressing.

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**What is Bioethics?**

- Bioethics- literally, the ethics of life.
- The concern in this course is – the practice of medicine and biomedical sciences.
- Ethics pertaining to the practice of medicine have a very long history: ancient India, Greece, China etc.
- Modern bioethics: sees medicine and its practices in the context of modern life.
- Appears as a complex phenomena.

  
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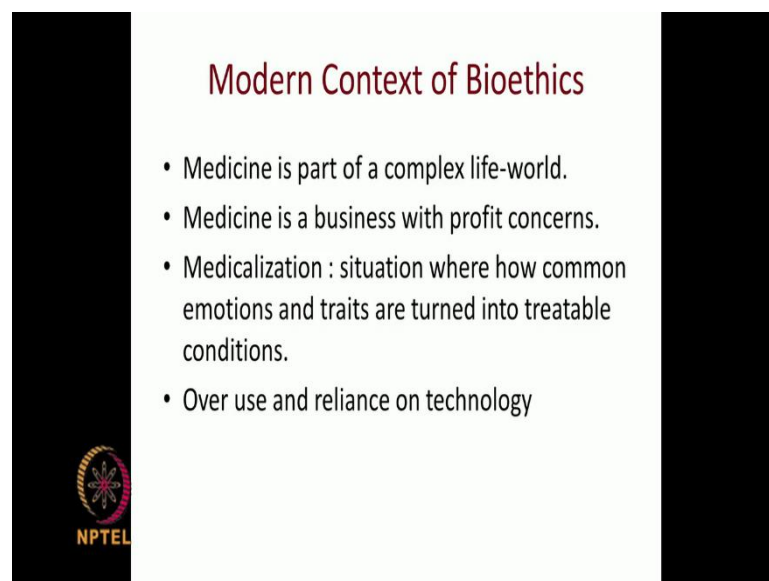
So, what is bioethics? So, we will see that bioethics literally means ‘The Ethics of Life’. But in this course we will be primarily dealing with the ethical issues which are relevant in biomedical ethics or rather medical ethics. The practice of medicine as well as usage of certain technologies assisting the science of medicine or in the practice of the science of medicine.

And then the concern in this course, as I mentioned the medicine and biomedical sciences and ethics pertaining to the practice of medicine have a very long history, because we can see that even ancient India which will be outlining in the next lecture. The science of medicine, which is called Ayurveda comes up with very strong ethical code or ethical prescriptions. In ancient Greece, China and many other civilizations, we can see that ethics or rather the practice of medicine is assisted by a very strong ethics or prescriptions on ethics. So, in that sense, it is a very long history.

And but modern bioethics is quite unique, because modern bioethics primarily deals with the ethical codes or ethical norms and standards which have to be followed by the practice of modern medicine and modern medicine in that way is quite unique compared to the ancient medicine or viz-a-viz Ayurveda or any other traditional practice of medicine. Modern medicine has certain very important features, which distinguish it from other forms of medical practice of healing practices that it uses technology a lot particularly in today's world. It uses technology a lot and also it is a science, it is a pure science.

It is based on the experimental method that is developed by natural sciences. So, this wedding with science has happened somewhere around eighteenth century, a close wedding with science, with transformation of healing practices into a science of medicine happened after enlightenment. So naturally the ethical issues, which modern medicine encounter are also going to be very different from the kind of ethical issues or ethical problems which ancient practitioners ever have envisaged.

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**Modern Context of Bioethics**

- Medicine is part of a complex life-world.
- Medicine is a business with profit concerns.
- Medicalization : situation where how common emotions and traits are turned into treatable conditions.
- Over use and reliance on technology

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And as I mentioned earlier, medicine appears as an extremely complex phenomenon in today's world you know that it is our part of a complex life world. There is the society, the modern society itself is highly complex. It is highly institutionalized and it is also divided into different functional spheres, which are more or less autonomous. So, in that context, medicine has become an autonomous institution to some extent. But at the same time, we all know that every society, every modern society particularly needs the help of modern medicine.

See for instance, a society in India and the Indian society almost 50 years back could have done without modern medicine probably. But today, modern India cannot even think of doing without modern medicine. We need the kind of assistance of modern medicine and the hospitals and the super specialty hospitals and all the technological paraphernalia, that assist modern medicine. The same time, parallel to this, medicine has become a part of an industry,

a very strong industry, a business with very strong profit. When you are industrializing, naturally the primary concern will be profit maximization.

So, medicine has also become an industry in today's world and medical industries connecting various aspects of medicine not just clinical aspect of the technological, the pathological and various other diagnostic aspects of many. Everything together constitute a highly complex web of activities, which is highly technologized, highly sophisticated and this kind of institution needs the support of huge money. And this money can come only from private parties, private industries. So, there is a very strong industrial interest that dominate in today's medicine in the practice of contemporary medicine.

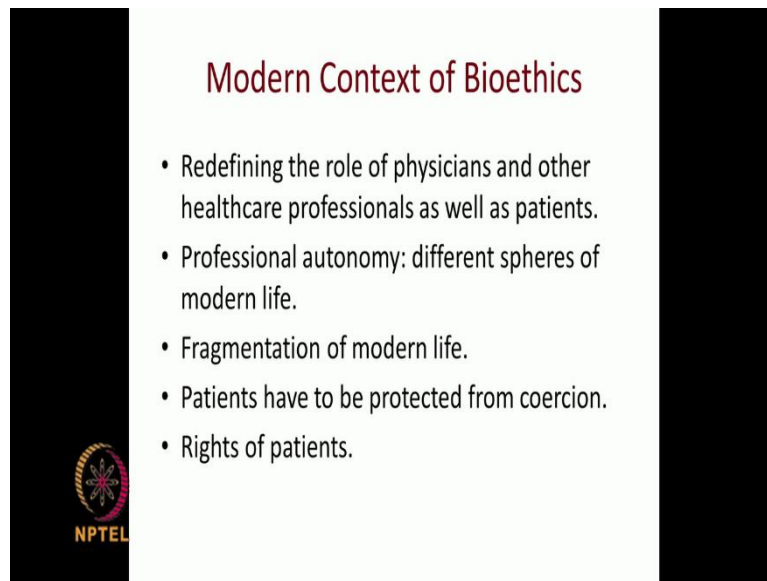
And there is this term, medicalization, which sociologist have started using to highlight. For example, sometimes little hyperactive kids, this kind of kids are quite common and many of our friends, I mean and if you remember during our childhood were quite active and this were never treated or never considered as a medical problem. But today, parents are worried about the activity, the over activity of their kids and this hyper- activism or hyperactivity they doubt hyperactivity and they approach the doctors.

Many doctors are now treating, such kids for hyper activism, that it has become a medical condition. It was probably not a medical condition some time back So now almost those common phenomena have become common emotions and traits have now turned into treatable conditions and then again there is another very alarming tendency that there is over use and over reliance on technology.

For everything, you know technology is relied upon. 20 years back, if you go to a doctor most of the diagnosis is done within his consultation room, by just touching, feeling your pulse or with the stethoscope. Most of the things were done by the doctor and one very important component of medical diagnosis was the conversation between the doctor and the patient. The doctors used to spend a lot of time with their patients, during those days.

But now in a changing world, doctors have no time or rather they immediately use technology. The help of technology and for everything there is a diagnostic test today. And in one sense, you know, we can critically see this phenomenon as an over usage and over reliance on technology.

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### Modern Context of Bioethics

- Redefining the role of physicians and other healthcare professionals as well as patients.
- Professional autonomy; different spheres of modern life.
- Fragmentation of modern life.
- Patients have to be protected from coercion.
- Rights of patients.

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So in that way, the modern context of bioethics is an extremely complex social context which definitely redefines the role of physicians and other healthcare professionals as well as patients. Because we all know that sometime back, the kind of unique relationship that existed between physicians and patients; physicians were almost treated as Gods and patients had ultimate faith on them.

There was absolute trust on their physicians and whatever physicians said patients trusted them and patients used to follow that. But now things have changed, now, there is a lack of trust. There is a fall in the level of trust that exist. Also the role physicians take in today's healthcare scenario has drastically changed from what it was earlier.

The relationship between physicians and patients have also undergone changes because earlier they used to be this concept of family physicians. The family physician of course knows in and out about their patients, their names, their family background, their health conditions almost everything about the patient, the physicians used to know. So the relationship was not just professional, it was also sort of personal.

But in today's world, the patients are primarily related to the hospitals not to the physicians. But the hospitals and physicians work in the hospitals. So, hospital or that context of the hospital functions as a mediator, which connects the physicians with the patients, and the

relationship is almost more or less impersonal relationship. This context also raises certain ethical issues.

And then there is this whole talk about professional autonomy, because every professional community is demanding that they should be given autonomy. So, doctors or physicians or healthcare professionals demand that, they should have, they should enjoy autonomy. Only then they would be able to deliver their services most effectively and efficiently. This demand for autonomy also raises certain issues. Because once they have become autonomous, they have become less answerable to the society.

Okay, so in that way, every professional society demands a kind of autonomy, a kind of freedom or independence granted by the society. Then, the whole society would become, what scattered units; not internally interconnected but some sort of connection that exist, which is absolutely professional which is absolutely artificial.

So, this also creates this model of society, which we are developing in today's world is also creating a lot of issues and naturally the role of physician, the role of healthcare workers also in this context become problematic. All these things, ultimately point to another very important and crucial phenomenon, which can be called as a fragmentation of modern life.

As I already mentioned, modern society is not one single unit. Society no more exist as a one single unit. Society is now a collection of different functional spheres. There is business, there is education, there is bureaucracy, there is judiciary and there are many other units, that makes up a society. And each sphere is relatively autonomous.

So, in what way they are interconnected? What makes them connected with each other? That's a question, because it's inevitable that these different units are interconnected only then they can function as one single unit at least functionally. So, you need, some sort of interrelationship and this fragmentation creates a huge problem and it is in this context, modern societies try to overcome the problems and the crisis that arise out of this fragmentation through laws, through the implementation of laws and certain policies.

But laws have their own limitations. On many occasions on many circumstances you cannot apply a law or rather the application of law will not be really fruitful. So, what is more

important, then becomes ethics, the question of responsibility, the question of obligation duty. All these aspects become important and the concept of law fails to encompass these aspects, which are very important for a society to function.

So, it is in this context, ethics makes a comeback. So, we have to talk about ethics. This is another very interesting phenomenon of our modern context of our modern life that patients have to be protected from caution. There are several factors that will have certain very adverse impact on the patients interest.

For example, in a typical clinical context, where decisions, medical decisions have to be made. First the patient goes to a physician and the physicians suggest certain treatment method. Who takes the decision? physician is suggesting two alternatives, either you can adopt this, either you can go for a surgery or you can take medicines and try to solve the problem. But, who takes the ultimate decision. Whether, it is the patient or the physician, that's a question and on many such occasions. Even today in our society, we will find that the patient, the physicians play a very important key role rather because often patients tell the physician that sir you take the decision for us, we trust you. But then again, if there is if anything happens, then they put all the blame on the physician.

So, this creates a lot of tension in modern life and another problem happens, when the patient's relatives play a key role in the process, when they take decisions for the patient. That again might be against the interest of the patient. There are many such cases which we encounter in today's world. So, all these issues, figure in the context of the modern practice of medicine in our contemporary society. And there are certain very important rights of patients.

patients have certain rights, which is blatantly violated, almost on a day-to-day basis. From a very simple situation like you go to a hospital and the doctor gives you or suggest you certain medicines, the doctor doesn't tell you for what. There is a responsibility of the doctor or the pharmacist to tell you that, how this medicine is going to work and what are the side effects of this medicine. Again, in many hospitals, this happens private clinics, it happened that the prescriptions are not given to the patient so this is again against the right of the patient. Because, patients are paying for the services, they receive. They are in a technical sense, they

are consumers. So, they have certain rights, which are granted by the court of law by the constitution. So, these rights are blatantly violated on many occasions in our society.

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**Institutionalization of Medical Ethics**

- Focus is more on the ethical issues in the context of institutions than in relations among individuals.
- Rampant institutionalization of medical profession.
- In modern societies, social existence is more than a relation between individuals or families.
- Simple ethical principles used for regulating individuals' lives are inadequate.
- Institutions play vital roles.

  
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And it is in this context, we come across the problems related to the institutionalization of medical ethics, which we have already seen. We have to approach ethics from an institutional context because the focus is more from patient, than the context of the patient physician relationship because that's not the primary relationship that we are concern with. In today's world, the patient physician, one-to-one relationship of course such relationships even today happen but that's not the primary context in which medical ethics or biomedical ethics becomes relevant or (probabilitized) in today's world.

Because, we have something like focus is more on the ethical issues in the context of institutions than in relations among individuals. This happens everywhere not just in medicine but it happens everywhere even in business or education or everywhere this happens in modern societies. See there is rampant institutionalization of medical profession, we have already mentioned this, there are hospitals, super specialty hospitals and patients are related to the physicians through the hospitals.

So, the mediation has become inevitable and in modern society, social existence is more than a relation between individuals or families. Simple ethical principles used for regulating



individual's lives are inadequate. So, you need certain codes to tackle the institutional, so that institutionalization of ethics become important.

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**Shift of emphasis**

From social trustee professionalism to expert professionalism

**Social Trustee Professionalism**  
Professionals alone or in small groups serve their patients or clients in accord with a public-spirited goal.

**Expert Professionalism**  
Professionals serve in organizations that value mainly their expertise and expect them to act in accord with the organization's goals, which are often determined by the market and economic pressure.

NPTEL

And then, this resulted in a shift of emphasis from, what we can call as a social trustee professionalism to expert professionalism. What is meant by social trustee professionalism - is professionals alone or in small groups, serve their patients or clients, in accord with the public spirited goal. On the other hand today, what we have is something can be called as expert professionalism, where professionals serve in organizations, that value mainly their expertise and expect them to act in accord with the organizations goals which are often determined by the market and economic pressure.

So, the moment institutions come into picture, what is relevant is expert professionalism, rather than social trustee professionalism, which is more personal. Now it has become so impersonal and medicine also, we can see has become part of an industry, where primary concern will be obviously profit maximization.

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### Medicine in the Changing World

- Medicine as a science and industry.
- Globalization of healthcare.
- Technologization of healthcare.
- Increasing need for research.
- The role of Governments.
- Accessibility and affordability of healthcare.
- Healthcare and the question of justice.

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So, we will try to situate or contextualize medicine in a changing world. medicine as a Science and industry because traditionally all of us know that, most of the societies in the world, we had our own healing practices, our own healing systems and most of these healing systems were not purely scientific. They were based on experiences, people have. Unique feature of it that, it is become complex science and has become part of an industry and then there is this whole process of globalization,

Globalization of health care. There are certain global standards that are evolving in Healthcare industry and both from the industrial from the technological perspective as well as from the perspective of certain practices that exist in in the industry. Brochure practices are shaped and designed in a certain manner in order to fit the global requirement and again naturally the ethical concerns have also now right now a global dimension. So, the kind of bioethical principle we are talking about today, we will be actually discussing some of these principles in the following lectures.

Say for example, something like autonomy and the Principlist approach adopted by Tom Beauchamp and others, where autonomy plays a key role. And this concept of autonomy is actually rooted in a concept of person, in a concept of individual person that emerged during somewhere in 18th-century and post enlightenment in Europe and many of us wonder that, what does this concept of autonomy have to do with the Indian individuals. Indians, here for example in India, still the family plays a very important role in decision-making and also

almost everywhere. You know even today, most of the Indians see them as part of a unit that is constituted by other family members. Of course, the nature of family, the concept, the family everything is undergoing changes, no doubt about it.


But still, there is a way, in which, this is different from the atomistic consumption of individual, which has led to the notion of autonomy and others. And as I already mentioned the technologisation of health care is one important feature the increasing need for research. This is another very important aspect of medical practice in today's world and which will be discussing a part of this course because research constitutes a very important part of the practice of medicine, and research needs clinical research needs people, who are ready to be to come forward as subjects.

And there are several other issues involved in this context, so they have much less a role in many countries. In India, still we have government, plays a very important role in the practice of medicine. Because, we have government hospitals, where practically, every treatment is free. And there are many good government hospitals in our country, no doubt about that. But at the same time, if you try to understand, where the government facilities stand viz-a-viz the quality which private industry, private medical industry can offer, we are nowhere near to that the sophisticated machineries which private medical Healthcare industries can provide, Governments cannot.

But still the government has a very important role to play in this context .because first the government will have to take care of the interest of the citizen and health is one of such components where the interest of the citizen are so intimately interwoven. So, governments, still have to play a key role. Now, another important issue are issues related to the concept of justice, affordability, accessibility of health care. Though, I mention that in India, we have a government hospitals, where treatment is offered free of cost, still many of us find it difficult to afford the kind of treatment, which is accessible to them.

Accessibility is a major problem, because there may not be a nearby good government hospital so they will have to walk miles and miles to go to the nearby government hospitals to get free treatment. So naturally they will have to rely on the nearest private clinic, where they will have to pay money from their own pocket and there are many such issues. Health care and the question of justice come into picture in this context.

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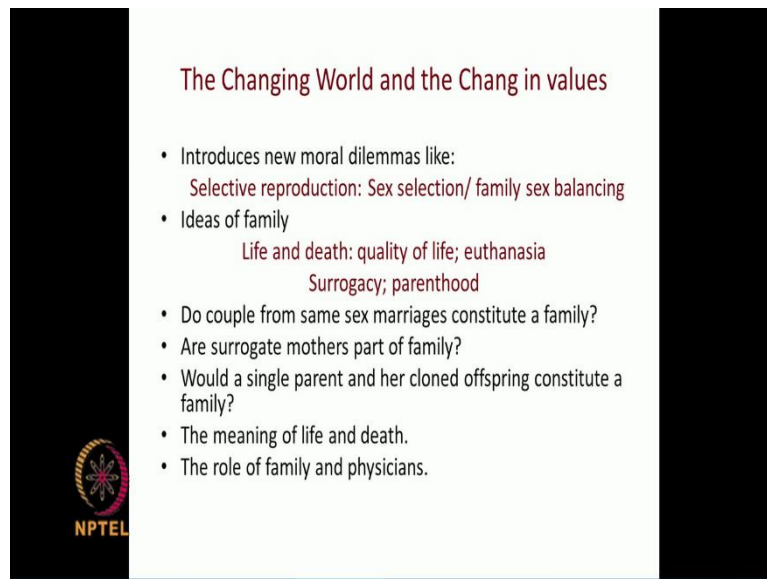
The Changing World and the Change in Values

- Changes in the world and changes in medicine have implications on values.
- Technologies make possible many things which were unthinkable earlier.
- Roles redefined: patients, physicians, family members.
- Religious and traditional values are challenged.

And again, the changes in the world and the changes in medicine have implications on values, so there is a way in which the practice of medicine has reverse influenced Social values because, the way in which, medicine is practiced will affect the value system a society has. Technology has made possible many things, which were unthinkable earlier. See for instance, for example, today by using certain technological devices, we can prolong lives of people. Many sophisticated technological procedures are available today. Plastic surgery is another very important area, where you know, it has done revolutions to the lives of people.

So, all these technologies have introduced certain situations in the society, where some of the traditional values are challenged. And, this situation in one sense, has very strongly redefined, the roles of patients, physicians and family members in the context. It is no longer possible for us to conceive the kind of relationship, that existed, between the different stakeholders, in the same way, as it existed 50 years or 25 years back. And religious and traditional values are very strongly challenged.

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The Changing World and the Change in values

- Introduces new moral dilemmas like:
  - Selective reproduction: Sex selection/ family sex balancing
- Ideas of family
  - Life and death: quality of life; euthanasia
  - Surrogacy; parenthood
- Do couple from same sex marriages constitute a family?
- Are surrogate mothers part of family?
- Would a single parent and her cloned offspring constitute a family?
- The meaning of life and death.
- The role of family and physicians.

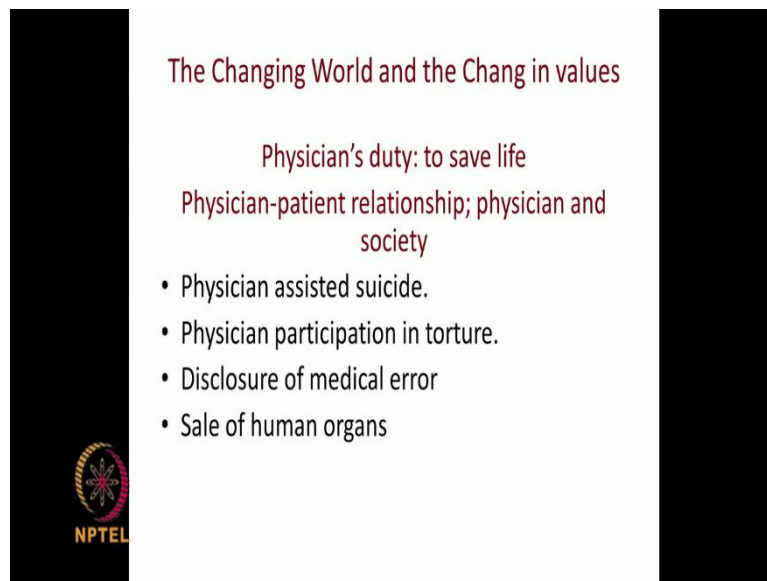
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The modern context has increasingly, started introducing dilemmas, like you know, selective reproduction, sex selection, family sex balancing. All these are problems which modern societies might encounter. What is wrong, if a couple decide to have, you know sex balancing in their family, if supposed a family already they have a son and they would like to have a daughter, What is wrong, if they decide to have a daughter with the help of technology, they can choose. They can make that choice; they can implement it. What is wrong, why should the government prevent this from happening? Again this will also have certain implications on the ideas of family, as we have traditionally inherited.

Then questions like life and death, quality of life, the problems raised by euthanasia, which has got two aspects the passive euthanasia and the active euthanasia ; where the physicians actually come forward and help the patient to end their life. So, all these have introduced certain complex ethical issues. Surrogacy is another very important procedure, which many people follow in today's world.

And this has questioned, the very conception of parenthood, who is a parent. There is a biological father, there is a mother and there is a surrogate mother, so the child virtually has two mothers, the actual mother and the surrogate mother. The surrogate mother has carried the baby for more than nine months, can you deny her motherhood? So all such questions come for analysis in this context.

And do couple from same-sex marriages constitute a family that's again a very interesting issue, which in today's world, we find extremely problematic and are surrogate mother part of family have already mentioned this. This would a single parent and her cloned offspring constitute a family. Now Science makes this possible, a person can clone his or her of offspring, so is it possible can would they constitute a family? The meaning of life and death, everything keep changing in today's world, the role of family and physicians also changes. (Refer Slide Time: 27:19)




The Changing World and the Change in values

Physician's duty: to save life

Physician-patient relationship; physician and society

- Physician assisted suicide.
- Physician participation in torture.
- Disclosure of medical error
- Sale of human organs

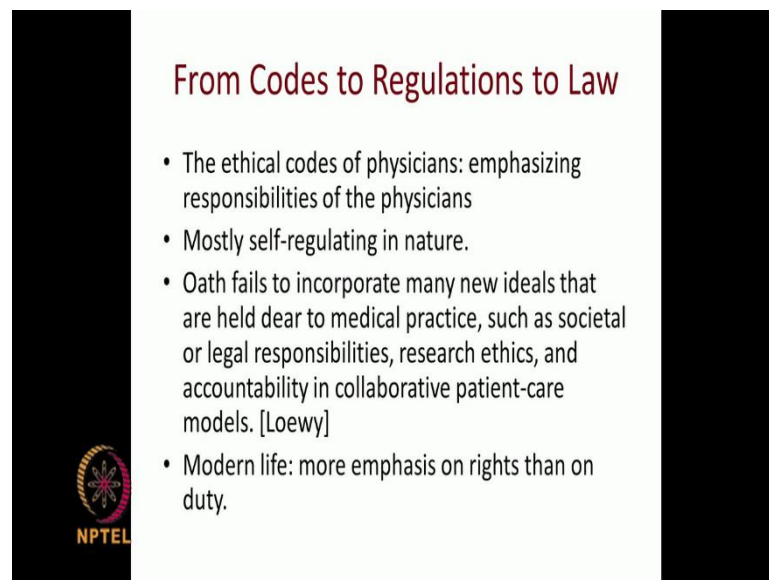


And then traditionally, we hold that the physicians primarily duty is to save life. But now there is this concept of active euthanasia, where the physician helps the patient to end their life or rather physician assisted suicides. Is it ethically all right for physicians, to do this? They are traditionally expected to save life, not to take life. Then in many countries physicians participate in torture, torturing the prisoners and other people. So on what basis can you justify this?

And then disclosure of medical error is another very important and a serious domain which modern medicine is concerned with. What would be the implications of this whether hospitals or individual professionals come forward to do this. And the sale of human organs, this is another very tricky area, very fishy area rather because on the one hand surrogacy is permitted in a country but sale of human organs is not permitted. So, surrogacy can be technically termed as rending the body parts.

But if rendering is possible, what is wrong with selling. So, there are certain technical ethical issues, I mean logically, you know if this is possible, this also should be possible. But this raises certain ethical questions, which the other one is not raising. All such of complex issues figuring and public health ethics.

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### From Codes to Regulations to Law

- The ethical codes of physicians: emphasizing responsibilities of the physicians
- Mostly self-regulating in nature.
- Oath fails to incorporate many new ideals that are held dear to medical practice, such as societal or legal responsibilities, research ethics, and accountability in collaborative patient-care models. [Loewy]
- Modern life: more emphasis on rights than on duty.

So, what we have seen is that you know the traditional ethics. Traditional bioethics largely relied upon the concept of codes for physicians. So, ethical code of physicians will be discussing a little bit of this in the next lecture, emphasizing the responsibility of physician. There is a famous Hippocratic oath, but they are mostly self-regulating in nature.

The oath was taken by the physicians and they have this responsibility to follow that. But there is no concept of external regulation, as far as the oaths or codes are concerned. They are meant for internal regulation or self-regulation. But now gradually you know with this concept of internal regulation or self-regulation alone modern society cannot function, there should be very strong external regulations as well.

So, this is what, the oath fails to incorporate many new ideas, that are healthier to medical practice such as societal or legal responsibilities, research ethics and accountability in collaborative patient care models. So, we need to go beyond the oath, so to regulations and then finally to very strong oaths. So, we need to come up with legal frameworks, to protect the interest.

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### The Important Contexts

- Clinical medicine: physician-patient relationship.
- The context of research: the development of new drugs and the pharmaceutical industry: growing controversy and even hostility in the relationship between the pharmaceutical industry and the public. [Michael A. Santro]
- The technology interface: the new developments in medicine and pathology; medicalization.
- The politics of medicine: medicine and power.

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And so it is in this context, the important context can be outlined, which will be discussed in detail as part of this course, we will see clinical medicine, where the physician patient relationship is once again examined with by highlighting certain important conceptual riddles. Then the context of research is examined, because you know one interesting context is that development of new drugs and the pharmaceutical industry growing controversy and even hostility in relationship between the pharmaceutical industry and the public.

So quite often pharmaceutical industry has been criticized by many for being unethical or rather some even would say that, the most unethical. Which is justifiable or not and on what account people can criticize them? Because, they are after all industries and their concern should be profit maximization. But quite often, they are judged with certain other parameters. So, how far that is justifiable? The technology interface, which has become inevitable in today's world, the new developments in medicine and pathology medicalization, technologisation all these problems come into picture in this context.

And upon finally, the politics of medicine becomes a very important concern for us from a philosophical perspective, where medicine, where we can examine, how medicine has become a way in which you know authority power can be executed. So, these are some of the concerns, which this course is going to deal with. So, the next lecture, we will address the historical evolution by highlighting some of the traditional models. And for the time being, we will wind up this class, the first unit. Thank You.