

Editorial

Medical Ethics in Pakistan: Bridging Principles and Practice

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The basis of practicing medicine has always been on mutual trust between the patient and physician. In addition to the clinical and technical skills of the physician, there needs to be a very strong ethical judgement and empathy in the physician. In these times where technology is rapidly replacing humans, medical ethics remain a vital compass that help a physician navigate tough decisions while ensuring human dignity and welfare.¹

Ethical practice relies on the five basic principles summarized as ABCDE.

Autonomy: Autonomy ensures that the patient and only the patient has a complete right over making all the decisions regarding his/her health and treatment; the only exception being if that the patient is not competent or waives his/her right.

Beneficence: Beneficence means that whatever the doctor decides must be in the best interest of the patient.

Confidentiality: Confidentiality is most relevant in medical profession, ensuring that there is a complete trust between the patient and the treating physician and bounds the physician to keep any information about the patient safe with him unless there is a risk of harm to patient or others.

Do No Harm (Non maleficence): It reminds the physician that under any circumstances, no harm should result to the patient as a direct consequence of physician's action.

Equity (Justice): The physician is bound to use the resources to ensure that there is no discrimination among patients and all are treated equally.²

Since long, doctors have frequently encountered situations

that test ethical principles. The doctors might find themselves at crossroads when making tricky decisions like end of life care, withdrawing life sustaining treatment, DNR status of a patients and allocating limited health resources to patients in a justified manner. These dilemmas are amplified further in a resource limited country like Pakistan where a physician has to decide often without guidance in situations like an overburdened health system, scarce resources and inadequate institutional support. Decision making in such a situation is rarely straightforward.³

Although ethical values are very deep rooted in Pakistan, medical ethics still remain underdeveloped in Pakistan. The existing ethical guidelines offered by institutions often offer broad directions, and rarely focus on context specific guidelines for clinical dilemmas faced during practice. So as a result, many health professionals begin their careers without focusing on key aspects of medical ethics like confidentiality and autonomy.

Another major issue that Pakistan faces is that Medical ethics education is uncommon and unevenly incorporated in undergraduate and postgraduate curricula. The Institutions that have medical ethics in their curricula primarily focus on theoretical aspects, rarely focusing on real life scenarios. The result is that the young doctors are not well equipped to face such situations themselves without guidance.

Another significant concern is the limited effectiveness of ethics review mechanisms. While many institutions have ethics review committees or institutional review boards, their functioning varies considerably. In some cases, ethical review is perceived as an administrative requirement rather than a meaningful process aimed at protecting patients and research participants.

Strengthening medical ethics in Pakistan requires a very thoughtful and sustained effort. Ethics education should be centrally integrated in curricula by PMDC throughout undergraduate and postgraduate medical training, emphasizing case based learning and mentorship rather than sole theoretical aspects.⁴

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comprehensive and context specific guidelines should be made, especially with regard to matters involving consent, veracity, ethical organ donation, patient-centric attitudes toward patient care and, formal bioethics education. Establishing a hospital ethics committee in all clinical settings can be a source of guidance to young physicians in aiding them in decision making when encountering tough ethical dilemmas in clinical practice. And finally a public awareness campaign can sensitize the people

about their rights that are frequently overlooked.⁵

Ultimately, medical ethics is not merely a regulatory requirement; it is a professional commitment to compassion, fairness, and integrity. By strengthening ethical awareness and institutional support, Pakistan can move toward a healthcare system that not only advances scientifically but also upholds the trust and dignity of those it serves.

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