

EDITORIAL

MEDICAL PROFESSIONALISM

Medicine is really about service, not just science. It is basically a combination of art, science and professionalism. The lucky doctors of the past were treated like God and people revered and respected them.¹ Medicine is fundamentally a human activity aimed at helping the sick through healing, alleviating suffering and caring for people with respect and dignity.

The role of physician as a professional is to heal the suffering empowered by science and maintaining the codes of ethics governed behavior. The societal contract between a patient and healer (Physician) has a secret of financial incentive but the principal elements remain communication, respect, compassion and trust.

In the 21st century, the medical profession is confronted by an explosion of technology, changing market forces, bioterrorism and globalization.² As a result physicians find it difficult to meet their responsibilities to patient and society resulting in considerable strain on doctor-patient relationship. The commercial enterprise entered in between sufferer (patient) and professionals as 3rd party and public perception seems to think medicine as no longer a profession of care giving rather it became a 'trade'. Although, 'Medicine is not a trade to be learned but a profession to be entered'.³ Unlike their ancestors most of the present day practice-based professionals are now choosing commercial enterprise and clinics or hospitals for their private practice and as a result the service is likely to be governed by enterprises rather than doctor-patient individual relationship.

Today we witness a fast pace of commercialization and globalization on all spheres of life and the medical profession is no exception to these phenomena.^{2,4} Technology is progressing at such a speed in medical science that sometimes it is difficult to keep pace with it especially in country like Bangladesh where availability is variable in public and private sectors. The practice of 'evidence based medicine' is now expected instead of 'eminence based' one. This leads to a more diagnostic driven confirmation of disease process and thus investigation become a prime

importance. But the quality assurance of these investigations in all respect including in the commercial enterprise is yet to start in our country. The machine driven policy of diagnosis need authentic quality assurance in every aspects.

Drug dispensing is another very crucial factor in delivering quality care service. Bangladesh can boast to have more than 200 pharmaceuticals engaging in the drug dispensing sector but at least some of them don't have any quality control system to maintain standardization. So we are not sure what actually we are taking as drug and whether the material is fact or fictitious. Previously most of the medicine was natural product either plant or other natural origin but contemporary science has given us the opportunity to have very effective drugs acting at molecular level. Previously, "Medicine used to be simple, relatively ineffective and safe but now it is complex, effective and potentially dangerous."

Medical professionals should have elements like competence, duties and responsibilities and right to train, admit, discipline and dismiss. Professionalism is the basis of contract with the society and it should maintain a proper standard.^{5,6} Communication, compassion, trust and respect make a role model set up of a physician and very sadly we do not have enough examples of role models now a day due to commercialization. The sufferer and healers is now either consumer or paternalistic based and shared style of decisions is absent. We need real role model in front of us particularly for the 'future doctors'- the students of medical professions- doctors, dentists, nurses, laboratory personnel, health workers.

The complexity based knowledge professionals should have altruism, accountability, morality, integrity and service should be governed by code of ethics.⁷ The public expectation of a physician is simple. He should be up to date, thorough, skillful, trusty and honest with integrity. Doctors should have open relationship and they should be in a state to listen, to have respect, to treat with kindness and consideration, to communicate effectively, to advice without patronizing and will keep secrets safe.⁸ To maintain these

characteristics and maintain the self-regulation, assessment by self-standard, local peer review and external review is essential. Public mistrust to professionals as they failed to self regulate, put self interest more than patients and the public, protected incompetent and unethical colleague, disorganized associations and present method of seeing large number of patients be it public hospital or in private practice.

Medical error is a reality. The doctor who has never made a mistake or exercised flawless judgments has not yet born. The chief aim of science is not to open the door to infinite wisdom but to set a limit to infinite error. Health care professionals are yet to start to address this 'error'. This does not mean that we have to punish for making errors, this is primarily to prevent recurrence of same error again. The more we discuss about errors the better, the sooner we start it the better. Can we start something like 'ballot box' where any professional without naming can drop the description of error made if any and a group can discuss them periodically in generic terms.

It is now visible and welcome that the private and Non Government Organizations are coming as alternatives to the public sector but the service they provide should not be trade based and particularly to provide primary health care by commercialization is unlikely to succeed in the long run.

Being a professional does not mean being cold and impersonal. A doctor who is a good professional has a very close personal relationship with his patients as he knows in service industry everything is based on relationship.⁸ To promote health as an aim to remain disease free we need extensive communication by all types of health professionals irrespective of status. This is a time where we are passing through a phase of 'unfinished agenda' of communicable diseases and almost an 'invisible' epidemic of non-communicable diseases for which we don't have a 'vaccine'. How can

we address the issue of prevention of non communicable diseases and health promotion by simple means of encouraging living health life, eating healthy and safe food, refraining from smoking, remaining active and continuing exercise, keeping small family so and so forth. Possibly the health professionals should start a movement of 'Healthy Bangladesh Initiative' right now with this type of agenda. So it is essential for all medical professionals to cherish effective, stable interpersonal relationship with patients in order to restore the lost luster of the profession.

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