

## Hippocratic Oath. How much do we remember of it?

Last week I quoted some of the essential features of the Hippocratic Oath in the article, “Modern Medical Consultation Today”. I have been so bothered about the reality that I couldn’t put aside the Oath from my mind. I feel some urgency to dwell on it in detail. I hope some doctors will read this and remind themselves what we promised to the *Gods* at our graduation. We see around us today the total opposite of the Oath. Why have we stooped so low to let that happen?

Hippocratic Oath is the oldest binding documents in history, the Oath written by [Hippocrates](#) is still held sacred by physicians: “to treat the ill to the best of one's ability, to preserve a patient's privacy, to teach the secrets of medicine to the next generation, and so on.... One of the best known prohibitions is, "to do no harm". Today, if any thing is certain, there are more health professionals who are doing just the opposite, eclipsing the honest practitioners to oblivion.

Let us consider the modern version of the Oath and its components one by one.

*I will respect the hard-won scientific gains of those physicians in whose steps I walk, and gladly share such knowledge as is mine with those who are to follow.*

*The classical version of the Oath goes far beyond it! To hold him who has taught me this art as equal to my parents and to live my life in partnership with him, and if he is in need of money to give him a share of mine, and to regard his offspring as equal to my brothers in male lineage and to teach them this art - if they desire to learn it - without fee and covenant; to give a share of precepts and oral instruction and all the other learning to my sons and to the sons of him who has instructed me and to pupils who have signed the covenant and have taken an oath according to the medical law, but no one else.*

Many of our worthy teachers upheld this part of the Oath and taught us to do the same. But we also notice how many put price on it and secretly guard sharing good practices with other colleagues, which may benefit masses. In fact we notice daily that practices which are clearly harmful being promoted by professionals advising and working for pharmaceuticals. How short cuts are made to promote a drug that may not have been proven adequately to help the sick.

On the other hand, not speaking out or doing something when one observes the opposite, has its own consequences. An interesting study describes, what do clinical teachers do when they believe they are witnessing deficiencies in compassion and respect? Which behaviours of trainees raise these concerns? How do attending physicians respond, and why? Because of uncertainty about appropriateness and effectiveness, attending physicians were reluctant to respond to perceived disrespect, uncaring, or hostility toward patients by members of their medical team.[\[1\]](#)

*I will apply, for the benefit of the sick, all measures which are required, avoiding those twin traps of overtreatment and therapeutic nihilism.*

Often attention is paid to only the presenting problem, which receives symptomatic treatment. Rarely, even some if not all measures which are required are considered. A child presenting with diarrhoea or respiratory problem, but also showing clear malnutrition is a good example. Rarely attention of the mother is brought to the nutritional needs of the child. Child get treatment, gets better, and returns to the clinic after a few weeks with the same problem. Needless to say that unnecessary or over-treatment is the order of the day. An example was cited in my last week’s blog how doctors easily prescribe loads of medications which are grossly contraindicated without proper assessment of the

illness. Isn't over-medication harming the individual and possibly many to follow because of the unnecessary and excessive use of antibiotics? To start a line (IV infusion) to every patient admitted to the hospital has become a norm. So much so that patients feel that unless an IV line is started, s/he is not being cared for. The medical profession has taught public to expect visible treatment/medication rather than the explanation of the treatment provider. Therapeutic nihilism is evident from how patients are shunted around to different specialist, when simple advice will put the patient at ease.

*I will remember that there is art to medicine as well as science, and that warmth, sympathy, and understanding may outweigh the surgeon's knife or the chemist's drug.*

How often we hear the bluntness and ruthlessness of medical professionals without any feelings for the patient. Patient should come out of the consultation room reassured not panicking what to do next. Opposite of it is equally bad to falsely reassure the patient with a condition which requires a systematic approach to treatment. Balanced approach is of paramount importance, considering the patients state of health. How rich or influential patients are differently treated and exploited with charm, than those who are poor or uneducated and can't afford expensive treatment. We see the difference in state run clinics/hospitals as opposed to the treatment received at private medical centres. Rich or poor, needs of a patient are the same. Both deserves the same compassion, attitude and treatment from health service providers.

*I will not be ashamed to say "I know not," nor will I fail to call in my colleagues when the skills of another are needed for a patient's recovery.*

Patients often think that the doctor has all the answers or there is a cure for everything and the doctor will provide a magic bullet in the form of a pill or injection. How often we fail to admit to the patient that we do not know enough of the presenting problem or to call for help for a second opinion. Many don't seem to have time for that. Rarely, we are willing to discuss the concerns and misconception of the patient and make them understand the health problems.

So much knowledge has been unearthed about diseases and their treatment. No doctor can hope to know more than a tiny fraction of all there is to know. "I know not" is most important in this context. When a doctor knows not, shouldn't he ask for help? This is perhaps the most important part of the modern Hippocratic Oath.[\[2\]](#)

*I will respect the privacy of my patients, for their problems are not disclosed to me that the world may know. Most especially must I tread with care in matters of life and death? If it is given me to save a life, all thanks. But it may also be within my power to take a life; this awesome responsibility must be faced with great humbleness and awareness of my own frailty. Above all, I must not play at God.*

Basic ethics in medical profession and an important promise to maintain patient confidentiality are the core values of medical profession and the oath. At personal level it is of great significance that doctors and nurses do not talk about their patients in a such a manner that ordinary people around us, especially common friends, come to know about the medical conditions of a patient. Whilst everything about patient need to be restricted to the four walls of the consultation room, things like pregnancy test results of a teenager or an unmarried women; diagnosis of a sexually transmitted infection, can cause serious damage to an individual by casual utterance of a few words. Patient information has become even more significant in this age of tremendous advances in Information Technology. Data breaches and sale of patient data are scandals that we hear in everyday news.

*I will remember that I do not treat a fever chart, a cancerous growth, but a sick human being, whose illness may affect the person's family and economic stability. My responsibility includes these related problems, if I am to care adequately for the sick.*

One of the fundamental problems of the day. Most of the time symptoms are being treated not the patient as a person with health problem. Patients with psychological issues, both rational and irrational, needs a person who would hear them rather than just prescribing a drug that might calm the patient by inducing sleep.

George Spaeth writing on Treat the Patient– Not just the disease states, “I believe a doctor’s primary job is not just to treat disease, but to care for how people feel and how they function. Patients may understand that something has improved because of your treatment—after all, you’ve undoubtedly told them so—but what they really want from you is improved functionality and quality of life. That may or may not happen as a result of your treatment... Seeing our goal as treating the patient—not just the disease—is a simple change in perspective. But it’s a change that can make a world of difference; it can change how effective we are at helping our patients to end up with happier and more effective lives”.[3]

*I will prevent disease whenever I can, for prevention is preferable to cure.*

The Greek physician Hippocrates recognised this in 430-360 BC and to this day no one can argue with this fact. Prevention is better than a cure because it literally prevents the discomfort and costs of becoming sick or experiencing a similar preventable event. It also often takes less effort to prevent something than to cure it, hence the popular expression "an ounce of prevention is worth a pound of cure."

It is the most obvious but often neglected responsibility among medical professionals today. Someone showing borderline raised blood sugar is labelled as a diabetic and put on treatment rather than advice on the cause of the elevated blood sugar and paying attention to diet and exercise. Many chronic medical problems are due to life style and general neglect of our bodies. Labelling and prescribing drugs alone is not the answer but through preventive advice giving control to the patient instead of dependency on medical treatment. Obesity is a worldwide epidemic today. Whilst it is understandable that there are some intrinsic factors governing this problem, vast majority of children and adults simply eat too much and the wrong foods and lead sedentary life. Simple and most basic answer is to address intake and output, check on eating and exercising.

*I will remember that I remain a member of society, with special obligations to all my fellow human beings, those sound of mind and body as well as the infirm.*

This has been forced, rightly so to keep medical standards, on medical professionals everywhere. One has to be a member of the speciality to practice in any country. However, anyone having had the experience to join a medical association outside his/her country of graduation will know the obstacles placed in their path to register as a medical doctor. The procedures to follow are understandable but there are umpteen obstacles which are quite unnecessary even humiliating, like having to sit for English exam in Australia, even though Australia recognises the UK higher qualifications. Whilst associations collectively support good causes and control the medical practice; nevertheless, each one of them have something or the other to answer for the power they wield.

Professional medical associations (PMAs) play an essential role in defining and advancing health care standards. Their conferences, continuing medical education courses, practice guidelines, definitions of ethical norms, and public advocacy positions carry great weight with physicians and the public. However, many physician leaders and government officials are calling for fundamental reforms, certain that past practices have undercut scientific integrity and patients’ best interests.[4]

*If I do not violate this oath, may I enjoy life and art, respected while I live and remembered with affection thereafter. May I always act so as to preserve the finest traditions of my calling and may I long experience the joy of healing those who seek my help.*

Yes there is a great reward of self-fulfillment and job satisfaction after successfully treating a patient. A reward that rarely experienced by any other profession. We do not profusely thank the bank clerk for maintaining our account or a shopkeeper for buying a chocolate at the grocery, but a patient on relief of a health problem after treatment will go out of his/her way to thank a doctor. The joy seen on the face of a patient after successful recovery from the treatment/surgery provides unimaginable pleasure to the doctor. Parents after a normal delivery, taking home a healthy baby, thank doctors and nurses profusely, even though in a normal spontaneous delivery it is the mother who did all the hard work! We must not forget to gracefully acknowledge the gratitude.

### **References:**

- [1] [Jeffrey H Burack](#) et al. Teaching Compassion and Respect. [J Gen Intern Med](#). 1999 Jan; 14(1): 49–55. doi: [10.1046/j.1525-1497.1999.00280.x](#)
- [2] [Albert Lim Kok Hooi](#). I Know Not. Opinion. December 2010. <https://www.nytimes.com/2010/12/21/opinion/21iht-edlim21.html>
- [3] [George L Spaeth](#). Treat the Patient— Not Just the Disease. Review of Ophthalmology. December 2015. <https://www.reviewofophthalmology.com/article/treat-the-patient-not-just-the-disease>
- [4] [David J. Rothman](#) et al. Professional Medical Associations and their Relationships with Industry. JAMA. 2009;301(13):1367-1372 (doi:10.1001/jama.2009.407)