

Ethical Codes Are Coded Ethics

– Some Decoding Is Necessary before Application

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Professionals and ethical codes

The doctrine of professionalism is marked by a commitment to competence, expertise and ethical practice, as well as a pledge of service to society. Professionals, unlike businessmen, are expected to subscribe to a value that assigns a higher priority to doing socially important and useful work than maximising profits or merely pursuing economic rewards.¹

All professional bodies, professing to be ethical and social enterprises, develop their own ethical codes to publicly articulate their commitment to professional standards and integrity, so as to win the trust and confidence of the clients they serve. Professionals who are members of a professional organisation are expected to uphold the principles stated

in the organisation's ethical code. Thus all professional bodies are expected to possess an explicit ethical code for their members to uphold and for the public to know of their professional ethical commitments.

Ethical codes articulate the values, principles and standards to which professional bodies and their members aspire to uphold, and by which their conduct and performance are to be judged. Ethical codes encompass the professional aspirations, professional virtues and ideal standards needed to become responsible, respectable and reasonable professionals.

All professional bodies require their members to abide by a formal code of ethics and enforce procedures for disciplining members who violate these codes, values

and principles. Membership to professional bodies is not an automatic right by qualifications or certifications. It is a privilege granted to persons who are appropriately competent and shown to uphold the values of the profession by conduct and performance.

The medical profession has a long tradition of ethical codes, declarations and pledges to publicly declare our commitment to put patients' and society's interests above those of the profession's.

What do ethical codes mean to the medical profession?

For medical professional bodies, the ethical code is a promissory code of how patient and public interests should be preserved by the profession. Ethical codes can be proactive and espouse good clinical practices to achieve safe, effective, timely, efficient and equitable patient-centred medical care. Ethical codes can also be reactive and express what the profession would not do. For example, medical professional codes worldwide have sworn not to allow the use of medical science and skills in the torture and inhumane interrogation of prisoners.

Ethical codes are developed to protect the patients, public and society by clearly stating professional standards and expectations. By referring to the ethical codes that the medical profession subscribes to, patients and the public become aware of situations when these professional expectations or standards are not met. The ethical codes demonstrate our professional commitment, that is altruistic, open and clear in preserving patients' interest uppermost – the fundamental principle of primacy for patient welfare.

Besides that, ethical codes educate and inform practitioners on ethical principles and values, and provide broad guidance on their expected professional conduct. Regular discussion and reflection on ethical codes increase awareness and clarify values for the profession.

Ethical codes are mechanisms for professional accountability. They allow professionals to monitor their own behaviour (self-regulation), and this in turn promotes patient safety and helps medical professionals avoid medical malpractice.

Lastly, ethical codes remind us about our common origin and purpose as medical colleagues, and help construct and encourage upholding of professional standards and ethical conduct. The codes remind us of our promise and serve as

a catalyst for collective continuous improvement of medical practice. In short, ethical codes provide broad and general guidance for professional conduct and performance.

Ethical codes – what they are not

Ethical codes cannot be detailed and prescriptive. As medical practice is multidimensional, dynamic and complex, ethical codes cannot provide specific nor precise answers to the numerous ethical dilemmas that occur daily in medical encounters. Ethical codes cannot be comprehensive to cover all clinical situations, but can help mark out the extremes of unacceptable or unethical behaviour.

Not static documents cast in stone

Ethical codes undergo changes with new developments in the field. Over the years, respect for patient autonomy and informed consent have taken the foreground. New guidelines have been drawn out recently with the

emergence of developments in telecommunications, such as the Internet, social media and telemedicine. Guidelines on confidentiality, privacy and professional propriety (etiquette) when interacting on new electronic media platforms have been reviewed. When necessary, professional bodies and ethics committees review, revise and update the codes and provide advisories or guidelines to help interpret them.

Not secret codes

The work of professional bodies and their ethical codes should not be cloaked in secrecy. Revisions of ethical codes should be public and transparent processes that involve all stakeholders in healthcare, beyond the medical profession.

The more rigorously an ethical code is debated upon, the greater its value and acceptance by the entire profession and society. Fear of strong debates and attempts to railroad ethical code revisions are against the very basic tenets of medical professionalism. Collegiality, an important pillar of medical professionalism, is based on inclusivity, collaboration and mutual respect. As Medicine rightfully belongs to society, and the profession its trustees, so are ethical codes.

Not recipes in a cookbook

Ethical codes are not recipes in a cookbook to help cook up ethical solutions or rationalisations for decisions already made without justifications. Rationalisation is the process

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of finding reasons to support a conclusion committed to on other grounds. Justification is the process of combining factual evidence, strong arguments, and ethical principles to establish that an action is the right thing to do. Becoming an ethical clinician or gaining ethical competence is more than simply following a set of rules.

Not criminal codes

Ethical codes are not criminal codes or penal codes to draw up charges for disciplinary inquiries to prosecute professionals. It is recognised, both in ethics and law, that medical practice is marked by uncertainty and variability. It is clear that no two situations in medical practice are identical. The ethical principles derived from ethical codes are to be interpreted in the context of each case by ethical analysis.

Although ethical codes are written as simple unambiguous do's and don'ts, or musts and must nots, or shoulds and should nots, they are not expected to be used as simple rule books. Ethical codes cannot be applied in a rote manner.

Ethical codes are necessary but not sufficient for judging professional behaviour or determining an ethical lapse or professional misconduct. Resolution of ethical dilemmas, lapses or judgement of professional misconduct are complex, dynamic and contextual. Hence, they are not amenable to a simple direct application of the code. Comprehensive collection and collation of data, followed by analysis and reasoning process with good judgement are essential in resolution of a dilemma or decision of professional misconduct.

Following strictly to the letter of an ethical code alone will not necessarily make for ethical practice or conduct. Truth-telling is recognised as an important attribute of integrity, but truth-dumping is an uncompassionate act. Exercising ethical judgement cannot be avoided in clinical practice or interpreting ethical codes.

Ethical codes can be in conflict with other guidelines

Enunciations of the ethical codes can be in conflict with the law, local cultural practices, clinical practice guidelines, personal values, employment contracts, and institutional policies and practices. Patients and clinical situations are complex and unique, and principles enunciated within the ethical codes itself can be in conflict with one another. The classical example is the refusal of medically beneficial therapy by a competent adult – the principles of patient autonomy and beneficence are brought into conflict. Ethical analysis and ethical competence is necessary in resolving these conflicts.

What is important and effective in promoting ethical behaviour and performance?

All professionals must have a knowledge base of the ethical and legal principles that govern or influence medical practice. In addition, the professional education process must provide for developing ethical awareness, ethical motivation and professional virtues and character. In addition to clinical competence, development of skills in ethical competence needs a safe place to develop. Coaching and mentoring are essential for professional development. In achieving ethical competence, the doctor needs to learn skills in ethical reasoning and analysis, so as to translate the words in the ethical code to professional performance and conduct standards.

Ethical reasoning and analysis are akin to clinical reasoning and analysis, so they are best demonstrated and learnt at the bedside and in the clinic.

Ethical codes are essential compasses for achieving ethical integrity and accountability within the profession. The codes are not a substitute for the active process of ethical analysis and decision making. They cannot substitute the active transformative learning experience, of clinicians (individually and collectively) struggling with unique and unexpected ethical dilemmas, responsibilities and challenges in the care of our patients.

It is important and necessary for every professional body to have an ethical code that their members can refer to. Ethical codes are necessary but not sufficient to ensure that medical professionals exercise their ethical responsibility. These codes cannot ensure ethical behaviour, but education on professionalism and ethical competence can. ■

Reference

1. Relman AS. Medical professionalism in a commercialised healthcare market. *JAMA* 2007; 298(22):2668-70.



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