



MEDICAL ETHICS & HUMAN RIGHTS



This speech was delivered as the opening address of the SMA Lecture 2016 on Health and Human Rights.

The annual SMA Lecture was instituted in 1963 and the Lecturers are appointed and invited to speak by the SMA Council. The Lectureship is awarded to eminent and distinguished persons who have made significant contributions to medicine and the community. The first non-SMA Member to be invited to deliver this Lecture was Dr MK Rajakumar of Malaysia in 1983 and the first non-doctor was Mr Justice P Coomaraswamy in 1989. Some of our past lecturers include Chief Justice Sundaresh Menon, Mr Ngiam Tong Dow, Mr K Shanmugam and last year's lecturer, Prof Tommy Koh.

ZIKA

The Ministry of Health announced our first localised community spread of the Zika virus infection in Singapore on 28 August 2016. Within the first week, positive Zika cases in Singapore had gone from zero to more than 200, raising serious concerns about a potential surge of cases in the community with the virus spreading across the country, and eventually around South East Asia.

More worrying news followed with the first case of a pregnant woman diagnosed with positive Zika on 31 August this year. It was reported in the press that the pregnant patient lived in the Sims Drive/Aljunied Crescent area; she had displayed mild symptoms of the virus and was taken to KK Women's and Children's Hospital. The health authorities added that she lived with a household member who was also diagnosed as positive for Zika.

You may be wondering what an infectious disease outbreak has to do with this afternoon's topic on human rights. I brought up this example because as practising clinicians, the issue of medical ethics is closely linked to human rights and is therefore an important and relevant topic. This example of a Zika infection in the community highlights the tension between the rights of patients to confidentiality and the needs of society.

The general public also has rights of access to pertinent information and the right to be protected from harmful infectious agents.

HUMAN RIGHTS

We talk about human rights because we believe that each one of us is born equal. However, we are born into this world under different circumstances not of our choice. Each of us identifies with different societies, cultures and traditions, is brought up under different socio-economic backgrounds, and attests to different religious beliefs and political ideals.

Regardless of our differences, we cooperate as a society based on the fundamental principles of equality and social justice. Competent adults are to be treated equally and allowed autonomy – they should be able to make decisions for themselves, whether wise or unwise. Social justice means that resources should be allocated on the basis of need and this is especially pertinent in healthcare.

Prof Sir Sabaratnam Arulkumaran explained some of the rights related to healthcare in his interview published in the September issue of *SMA News* (<https://goo.gl/GhIEG2>) – the right to life, the right to access the best healthcare possible, the right to privacy and confidentiality, the right to make decisions and the right to information, to name only a few.

MEDICAL ETHICS

The understanding of human rights is therefore an important and integral part of our practice of medicine. As healthcare professionals, we abide by a code of ethics: to do that which is good and that which is right in our relationship with our patients.

We are also familiar with the four ethical principles of respect for autonomy, justice, non-maleficence and beneficence when we apply medical ethics in daily practice and use it to guide us in decision-making. We can then see that medical ethics

and human rights are complementary and work hand in hand.

APPLICATION

Given that the fundamental principles are in agreement, we sometimes encounter areas where there is tension and conflict between human rights and medical ethics.

The control of infectious diseases, as illustrated by the case of Zika infection in Singapore, is one clear example where public health interventions may infringe on the rights of individuals. The rapid spread of infectious diseases is a constant threat in our modern global economy where people from all over the world travel freely and intermingle. We have also seen the devastation of SARS and the influenza pandemics in recent times.

Patients expect confidentiality to be absolute, because it is fundamental to the trust they place in doctors with their intimate details, and medical ethics require that patient information be protected as far as possible. However, the protection of the general public through contact tracing, dissemination of relevant information and early public health intervention is critical, and takes precedence over an individual's rights of privacy and confidentiality.

Other areas of ethical tension include court cases where the rule of law requires confidentiality to be breached, or in legal requirements for diseases to be reported (such as a positive HIV status, when the patient's sexual partner will be traced and informed).

Ethical decisions also arise in cases where patients lack the mental capacity to make autonomous decisions and doctors will be required to make decisions on their behalf, based on the patient's best interests.

As a final example, the decision to vaccinate a population to protect

the general public may infringe on the rights of individuals too. Some individuals may object to having their children vaccinated, citing their rights to make decisions for themselves and their dependents.

The practice of medicine is constantly changing. The advances in technology pushing the boundaries of what constitutes life and even death, the widespread adoption of telemedicine that challenges individuals' rights to privacy and confidentiality, and the availability of new but expensive forms of medical treatment that widen the gaps in society between those who can afford healthcare and those who cannot, are just some examples.

I am confident that Prof Sir Arulkumaran's lecture will raise our awareness of these issues, and that we will come to a clearer understanding of the topic on Health and Human Rights this afternoon. I look forward to Prof Sir Arulkumaran's lecture and to a lively panel discussion thereafter. ◆

PROFILE



TEXT BY

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Dr Wong Tien Hua is President of the 57th SMA Council. He is a family medicine physician practising in Sengkang. Dr Wong has an interest in primary care, patient communication and medical ethics.