

SMA Ethics Essay Awards 2001

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Editor's Note

The topic of the SMA Ethics Essay Award 2001 was "Medical Paternalism Serves the Patient Best". The abstracts of the two winning essays are published here. The complete essays will be reproduced in the December issue of the Singapore Medical Journal.

WINNER IN THE MEDICAL CATEGORY: MR LAURENCE LIM SHEN, NATIONAL UNIVERSITY OF SINGAPORE, MEDICINE, FINAL YEAR.



Laurence receiving his award from Prof Low Cheng Hock, President, SMA.

"Medical paternalism serves the patient best."

It seems obvious that in a post-modern, constructivist world where meaning and value systems are often subjective and relative, any absolutist view is likely to be questionable. This is the more so if it relates to ethics, the foundations, interpretation and application of which have been – and continue to be – much debated.

So, in addressing the proposition, my efforts were directed at identifying a position that would mediate polarity. I examined the contention that the doctor, because he is better informed, may claim greater acuity and powers of judgment, and its defences against the charge of interfering with individual liberty and autonomy through various

arguments such as the harm principle, the welfare principle, the principle of legal moralism and the appeal to uncertainty.

While there is some validity to the arguments proposed, absolute paternalism would seem incompatible with respect for individual rights. How satisfactory, then, is the paradigm shift from paternalism to the independent choice model where the doctor presents neutral statistics – as little biased as possible by his own views and judgments – and leaves the decision-making entirely to the patient or his/her relatives. This clearly had its limitations too.

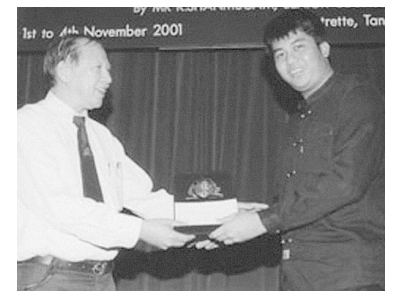
As with much of human experience, the answer would seem to rest in mediating the happy mean. Recognising a distinction between autonomy (self-determination) and independence (total freedom of choice without any interference) allows for a model of qualified independence or "enhanced autonomy" (Quill & Brody, 1996). This is predicated on doctor-patient dialogue, exchange of ideas/views, negotiation of differences, and sharing power and influence for the common purpose of serving the patient's best interest. This model would seem to be a responsible and effective approach to management of clinical dilemmas, as well as one that in its pluralistic approach is consistent with fundamental moral and philosophic propositions. It is by no means flawless, but in an imperfect world, there can be no perfect solution; constant negotiation with the realities – however uncomfortable – is an inescapable fact of life.

Actions are right in proportion as they tend to promote happiness; wrong

as they tend to produce the reverse of happiness. (J S Mill, Utilitarianism)

On that supposition, I submit that guided paternalism is arguably what serves the patient best.

WINNER IN THE NON-MEDICAL CATEGORY: MR NOEL HIDALGO TAN SUWI SIANG, Ngee Ann Polytechnic, School of Film and Media Studies, 2ND YEAR.



Noel receiving his award from Prof Low Cheng Hock, President, SMA.

"Deconstructing paternalism"

On the motion that "medical paternalism serves the patient best", this essay reviews current arguments on medical paternalism vs patient autonomy. Citing medico-ethical texts and journals and selected real-life applications like electroconvulsive therapy (ECT) and the advanced medical directive (AMD), the essay argues that medical paternalism cannot serve the patient best insofar as current debates limit themselves to 'who' wields the decision-making power. Such debates side-step 'what' the patient's best interests are. The essay further argues through the case of Traditional Chinese Medicine (TCM), and acupuncture in particular, that the current dominant Western school of thought excludes other forms of 'alternative' treatment through medical paternalism. ■