Review Article

Lessons in medical ethics from ancient Indian teachers

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Abstract

Age of medicine is as old as the age of human on the earth. The doctor today is a scientist, technologist and healer at the same time. The ethics germane to the medical profession can't be simple and uniform. Nor is the ethics simply a matter between the doctor and the patient; the society with its entire economic and political dimension is involved in much bigger way. Certain basic traditional thoughts given by ancient Indian teachers like Hippocrates, Charaka, Sushrutha and Vagbhata are still become relevant. Medical ethics in the medical curriculum, must be included not as a normative discipline but as a practical course with its own problems and considerations. As per Indian outlook, the role of ethics is certainly vast and varied, from treating a common cold, to the controversy on euthanasia, from the simple obligations of a family doctor, to the specialist services in the high cost, high technology five star nursing homes.

Key words

Lessons, Medical ethics, Ancient Indian teachers, Traditional thoughts, Indian outlook.

Introduction

Age of medicine is as old as the age of human on the earth. In the golden era, doctor was not only a healer, but family counselor and the tribal priest, all at the same time. Sir William Osler told that "the physician must be friend, philosopher, well-wisher and guide of the patient and the family under his care" [1]. In the current scenario, hunger of earning more money is deteriorating doctor from his ethical and moral



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values but still golden words told by golden men like Charaka, Sushrutha, Vagbhata etc. are very much effective to impart in our daily life. Ancient teachers of India had shown us a lightened path to improve ourselves not only as doctor but also as human.

The present context

Rapidly expanding science and technology has brought revolutionary improvements in diagnosis and treatment. The doctor is playing three roles as scientist, technologist and healer at the same time and it's difficult to cope up with all at a time. Drug industry, hospitals and nursing homes with high technology tend to become business houses nowadays. How hollow would the words sound when we read the declaration of the tenth World Medical Assembly in Havana during 1956: "The primary obligation of the physician is his professional duty; in performing his professional duty, the physician's supreme guide is his conscience" [2]. Does the medical education imparted today touch the mysterious 'conscience' in any palpable way? The talk of medical ethics should revolve around this 'conscience' which is increasingly becoming the 'grin of the Cheshire cať.

Unfortunately for the medical technology, there are now several hurdles which the conscience of the medical practitioner should cross or circumvent, to maintain the so called professional dignity; what his judgment would be in cases like euthanasia, iatrogenic diseases, medico-legal responsibilities, pregnancy tests, artificial insemination, organ transplantation, invitro fertilization, embryo transfer technology, genetic engineering, use of cadaver or dying patients for their organ, and even blood transfusion (which is objected by many religious groups including Jehovah's witnesses). These are issues which are ethical in character and import.

These are some of the problems which pertain to the medical profession now and which involves ethical consideration in addition to medical. We have moved far away from the Hippocratic context. The ethics germane to the medical profession can't be simple and uniform. Nor is the ethics simply a matter between the doctor and the patient; the society (with its entire economic and political dimension) is involved in much bigger way. The doctor's integrity is now related to the drugs, drug manufacturers, medical representatives, law, the patient's family, organized medicare services, and the doctor's own standard of living.

The ethics of prolonging life applies to several other issues in the field. The terminally ill need peace, comfort and dignity, but advanced technology often deprives them of these things, in the misdirected effort to prolong the obfuscation of the border line between life and death. In the present scenario, sophisticated surgical and medical technology can be easily abused. This is a reflection which underlines the need for a fresh reappraisal of medical ethics, independent of the technological advance in the field of medicine.

The enduring values

In the welter of all this confounding issues, certain basic considerations still become relevant. These were also touched by Hippocrates more than two thousand years ago, as well as by the ancient Indian medical writers like Charaka [3], Sushrutha [4] and Vagbhata [5]. The Indian text books prescribe elaborately how a physician must train himself to be an effective healer, and how he must conduct himself in society and with the patient.

The traditional Indian approach to the problem is indeed a simple one. But it deals with the core of the problem. That the approach does not



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envisage the technological advance of more recent times or the population explosion, does not take away the merit of the approach, which concerns itself with the essential values of the healing art.

In the words of Charaka, the earliest Indian medical writer who lived centuries before the Christian era, sickness prevents a person from pursuing his values of life which include satisfying the normal desires and having the usual pleasures of life, acquiring wealth and securing financial comfort, leading a life of virtue and social usefulness. This triad characterizes normal human life. The person who is sick is unable to lead a normal life, pursuing this triad, and to this extent he threatens the society in which he lives and of which he is a part [3]. Values of life are fulfilled only by a healthy person. The physician who restores the health of the person will indeed gift him with the values of life.

Four are the gifts praised in the society: providing defense for the weak and helpless, feeding the hungry, teaching those who want to learn, and treating the sick; and the best among them is providing health to the sick. The Smriti texts are found to regard the physician in an exceptional light; the usual disabilities and restrictions of caste, status and so on, do not apply to the physician, because what he does no one else in the society can do [6].

Mithkshara, the commentator of the famous law-giver Manu said that the physician was always pure and among the elite [6]. Charaka said that a physician is superior to a Brahmin, because if the Brahmin is twice born, once from the mother and second time when threading ceremony is done, the physician is thrice born, when he completes his medical education [3]. Charaka, however classified physicians into two categories: the right ones and the wrong ones. The former remove the diseases and assure life, while the later produces illness and remove the life itself [3]. There were quacks and fakes even in the ancient times. They have been termed 'prathi-rupakas' or ku-vaidyas. Even the law of the land laid a heavy hand on them. Manu, the law-giver, enjoins that the fake physician must be severely punished [7]. Yajnyavalkya-smiriti lay down that a quack is to be fined heavily [8].

According to Charaka, the physician should be a benefactor in as much as he facilitates people to attend to the three main objectives of life, viz. virtuous living, wealth and security, and pleasures of life, for all the three depend on health. The physician in this sense is looked up on as a 'donor', for his gifts bodily health and wellbeing. Yogarathnakara, a medieval work on medicinal preparations, said that the physician is most virtuous on this account and worthy of all honor.

As we all know monetary considerations play increasingly important and enormous role in modern society. A large number of young and brilliant aspirants take medical practice only for the rich rewards that it entails. The social fabric has become so complicated and tangled that one does not distinguish the competent and the honest doctor from the commercial minded doctor who merely puts on airs. Ethics in this context gets terribly out of gear. The old and honored concepts of service, propriety, efficiency, integrity, honesty, commitment and sincerity do not seem to be applicable to the modern times. The code of conduct, even when one has a notion of it, seems impracticable. It is economics, and not ethics, that seem to rule the roost.

Ideals to be pursued

Mahabharata, the great Indian epic, told us that we must cultivate the physician who is wise,

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virtuous, pleasant, friendly, honest, and compassionate [9]. Adequate medical education is no doubt 'a light' that will extend the horizon of one's vision and refine ones native talent. The education according to Charaka should enable the student of medicine to hold this light and enter in to the inner life of the patient, so that he can treat him effectively; otherwise the education is wasted [3].

Medical ethics in the medical curriculum, must be included not as a normative discipline but as a practical course with its own problems and considerations. The role of ethics is certainly vast and varied, from treating a common cold, to the controversy on euthanasia, from the simple obligations of a family doctor, to the specialist services in the high cost, high technology five star nursing homes. Vagbhata's Ashtanga samagraha indicated that an efficient doctor is friendly towards all, compassionate to the patients, happy when he sees healthy people, and composed when he finds that his patient is unlikely to be saved; his good conduct is what distinguishes him [5].

Finally the advice given by Charaka, may be pertinent for the doctors even today: 'He who practices not for money nor for caprice, but out of compassion for the living beings is best among all physicians. The physicians who set out to sell their skill like merchandise only lose sight of the gold and acquire heaps of dirt. Hard is to find a conferrer of spiritual blessings comparable to the physicians who snaps the snares of death for his patients and proffers renewed lease of life for them' [3]. At the end, we all should accept the quoting of Charaka that may all beings be happy, may all beings be free from ailments, may all good occur to all people, may no one be troubled with misery [3].

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