Ethical concerns of medical profession

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Ethical principles along with legal systems are the most potent regulators of man's behavior in collective life. They are two basic drives of civilization. Author gives a short analysis of foundation of ethical reasoning and its effects on individual and collective behavior. Medical profession is highly charged with moral responsibilities and duties. Ten heterogenous groups of ethical concerns have been identified in medicine. In order to ensure the professional performance according to ethical demands, medical profession is under permanent careful scrutiny. Author discusses the influeces of scientific progress and unusual circumstances on physicians profession and

ethical concerns. The professional oath imposes the criteria of ethical standards which extends beyond the framework of medicine. Author records that, during the war in Croatia in years 1991-92, medical professionals have acted in accordance with ethical standards of the medical oath, even under the most severe attacks targetted on hospitals. He thinks, that fact will be recognized as improvement of ethical standards. Author proposes a recognition of preconceived and deliberate attacks on the hospitals as a new category of war criminal acts against humanity.

Key Words: ethical concerns, medical profession ethical standards of medicine

»Nothing in the whole world, or even outside of the world, can possibly be regarded as good without limitation, except a good will. No doubt it is a good and desirable thing to have intelligence, sagacity, judgement, and other intellectual gifts, by whatever name they may be called; it is also good and desirable in many respects to possess by nature such qualities as courage, resolution, and perseverance; but all these gifts of nature may be in the highest degree pernicious and hurtful if the will which directs them, or what is called »character« is not in itself good.«

Immanuel Kant, 1797.

THE FOUNDATION OF ETHICAL REASONING AND JUDGEMENT

The intellectual wander of human mind has been generating the questions and delivering the answers about the external world and its own position in that world. Regardless of behavioral, cultural, ecologic and economic conditions and differences, it seems such interrogative background interests and tendencies are common to any ethnic group or any nation. In searching for deeper and more complete answers man is sometimes faced with difficult problems. There are the questions of the profoundest interest to man's spiritual life, which so far have remained insoluble to the human

intellect. Despite the impressive advancements and successes in various areas of undertakings, such questions seem to be resistent to human interpretative approaches.(12) They represent a permanent challenge to human intellectual powers. Good and bad as qualities of things and conduct of human life are a basic subject of ethics, the moral philosophy. Ethics differs from science in fact that its fundamental data (the quality of good versus bad) are feelings and emotions, or spiritual reflections based on them, but not percepts. Ethical judgement does not state a fact. It expresses the optative or imperative mood, not indicative one. Therefore, ethical reasoning is closely related to the hopes, desires and good will, which represent a complex reflective construction of feelings and emotions. Moralists of various philosophical schools have been offering heterogenous, sometimes even contradictory, interpretations of good. Good is defined to be that which is an accordance with nature (Stoics), which increases pleasure and diminishes the pain (Epicureans and Utilitarians), which accords with the fitness of things (Idealists), or, which accords with revealed will of God (Christian theologians). (8) All those systems have a common optative mood in their treatment of the subject. Problem becomes even more complex when good-versus-bad classes are faced with the categories of truth-versus-falsity and beauty-versus-ugliness. Relations among these pairs of categories are quite resistent to theoretical analysis. They seem to have a common origin in feelings and emotions. All three pairs are qualities which are much easier to comprehend in their relations to pragmatic life questions. Though they are touching the rational sphere of the intelect just as reflection, they have very strong influence on man's behavior. In the process of harmonizing the general and private interests, collective human mind develops a set of standards, general guidelines of behavior. According to such standards man expresses the inclination to do the things and processes, which benefit to him and to his neighbour fellows. He has a natural tendency to decline the things and conducts which produce negative effects. The catholic theologians have elaborated extensivelly the moral issues, are re-stated them in the Documents of the Vatican the Second. Their insight into problem reads as follows: »In the depths of his conscience, man detects a law which he does not impose upon himself, but which holds him to obedience. Always summoning him to love good, and avoid evil, the voice of conscience can, when necessary speak to his heart more specifically; do this, shun that«. (4) Such way of thinking defines the principles of moral conduct to be an inherent and endogenous thing of the nature of human mind.

It seems that basic principles stem from body physiology. According to the aggregate results of the conduct towards the self and others or both, which are sensed as pleasurable or painful, mental reflection of ethical judgement defines the stemming prototype categories of being good or bad, respectively. The proof of such reasoning is the absurdity, which is created by reversing the application of the words. (32) From such prototype mental physiology seems to have developed other analogies at various levels of ethical judgement.

At the individual level moral conduct is manifested in three fundamental conceptions: duty, virtue and good. Duty is the obligation of moral action. Virtue represents the moral power of the agent. The highest good is the objective aim of both. These aspects are introduced into mans spiritual life during the formative period. Critical guidelines are instilled through processes of rearing, direct private experiences, religious education, teacher's influences and positive general social influences. Through ethical conduct man activities are directed to secure the inner perfection of his personality. It expresses a tendency and promotes conditions of maintaning the human life on the highest point of development. Moral conduct can be recognized in individuals' lives as constitutive positive elements of professionalism, the institutions of marriage, parenthood, filial duties to parents, cultural appreciation, friendship and general consciousness of responsibility. Some professions are charged with the higher demands of individual moral conduct (see bellow).

Collective life has developed the modes of social phenomena which contain the ethical principles as driving forces. Enthusiastic nature of ethics serves as alloying force of individual and social interests. It bridges the differences between the two. It seems selfevident that correct social ethics develops from correct individual ethics. Their common denominator gives the appropriate spiritual framework for the appreciation of the dignity of man. The modes of behavior such as altruism, conciliation, humanitarianism, generosity, chastity, industrious attitude, obedience, the reverence for the life and, partially, authority and political performance, represent the human expressions driven by moral standards. (33) Each of those policies seem to be of importance in making the civilization structure feasable. (30) These features have a common reverberation in feelings and emotions, even in a very remote ethnic groups. They enable easy communication and offer recognizable patterns among the groups. There is, however, difference, in the active significance and power attributed to them by various groups.

MORAL VERSUS LEGAL PREMISES OF CIVILIZATION

Moral principles crosses the boundaries of many fields. It contributes to practical and spiritual man's behavior. Ethics appears to be of importance in all descriptive sciences (doctrinal sciences) of human behavior, such as psychology, sociology, economics, politics and jurisprudence. Even natural sciences have a significant impact from the ethics, at least, in their cognitive steps.

It would be interesting for the purposes of this discussion to focus the ductus of thoughts on relations of moral and legal norms. Human group life was made possible through the original agreement. (27) That agreement seems to be founded on ethical concepts of obedience and experiences of trespassing them, in collective collisions of individuals. In order to alleviate the conflicts, more rigid forms of regulations were required. Historical experience has forced the development of a legal system, as rationalized standards of behavior. The system of written norms was established. (29) Transfussion of ethical principle into a written codex changes its optative mood into indicative one. It becomes a minimal executive precondition to be obeyed. Through generations and generations of improvements such legal systems have evolved into very sophisticated networks or regulations. A legal system is the most explicite, institutionalized and complex mode of regulationg human conduct. Together with ethical standards it forms a dual system of corrective influences. Such dual system has enabled the growth of group life towards civilization. (18) Many anthropologists consider

the establishment of the systems of laws as one of the most important vehicle of civilizations (26). Based on civilization strucuture, cultural creative expressions were made possible. The social duties and obligations are not inherent part of the person. They come as an attachment to the social role which individual fulfills in group circumstances. It is beyond the interests of this manuscript to elaborate on mechanisms, historical, mental and pragmatic reasons of establishing of dual regulatory siystem of civilization. That fact is taken as given. It is a product of development which permeates and persists in any ethnic group behavior. Therefore, it seems it has a significant phylogenic role in human society. The exact nature of relationships between the ethical and legal regulation systems remains a subject of the discussions. It appears that in primitive societies legal rules are not sharply distinguished from the dictates of social morality or from religious prescriptions. Organized forms of social control in relatively advanced civilization separate the two into clearly recognizable entities.

Both ethical as well as legal systems play role in various human activities and social establishments. Their regulative function can be easily recognized in the state organization, churces establishments, academic institutions, sport organizations, traffic regulation, et cetera. They form a basic framework in which human life and activities may materialize the appropriate rights and dignity. Medicine has a special position in regard of her relations to society, cognitive approaches, pragmatic duties and ethical charges. In addition to legal responsibilities, medical professionals are under permanent screenings of their ethical standards of performance. Legal charges and scrutiny may come into consideration in the contents of professional problems treated in the entries 1, 2, 4 and 6 in Table 1. Less often it is case with other specified problems.

THE NATURE OF MEDICAL PROFESSION IMPOSES ETHICAL STANDARDS

World Health Organization definition of health gives a broad framework of medical professional duties. Not only absence of the diseases, but improving the health and social well-being has been put into medial care framework. That fact has imposed almost endless source of problems. In addition to the problem of dynamic cognitive position, medical establishment has historically very early taken care of ethical standards of performance. The professional oath has been implemented. Historically it was rooted in the Hippocratic oath. The oath implies that there are intellectual, as well as moral, conditions to be fulfilled by those who would dedicate themselves to the service of health. (6) Whole professional and nonprofessional life is to be performed

in accordance with the oath. The physicians' oath mentally prepares the graduates, and warns physicians on ethical demands of their profession. Ethical concerns may be classified as in Table 1. Some problems listed are self- explanatory. Therefore, discussion will be focused to the areas where further explanations are needed.

Euthanasia may generally be defined as the taking of another's life because of merciful motive to alleviate his pain and suffering. The decision of withdrawal or witholding of life support from critically ill has been reported to be responsible for about half of all deaths in the intensive care units in three hospitals studied. (31) Based on physicians' team judgement the decision is being inflicted with the consent of closest relatives of the patient. The moral load to the physician comes from the uncertainty about the patients pathophysiologic status in the moment when euthanasia decision is to be materialized. Due to such uncertainty it always remain the question of potential reversibility. In order to facilitate the process of decision written guidelines have been developed. However, they do not solve the content of problem (as outlined in Table 1, issue 1). On the other side, the ethical concerns of euthanasia crosses the limits of medical and family affairs, and invokes judical, religious and other aspects. Therefore the practice of medicine remains under severe scrutiny of other social judgements. There are differences in attitudes concerning the authanasia in various religious denominations. (23) Romano-Catholic church has openly opposed the euthanasia on grounds of her philosophical interpretation of meanings of pain and suffering. (34) Besides euthanasia problem, dying and death cause a natural questing wander, which contains the elements of fundamental ethical concerns. (22)

TABLE 1.

MEDICAL PROFESSIONALS ARE FACED WITH THE FOLLOWING AREAS OF ETHICAL CONCERNS:

TABLICA 1. MEDICINSKI STRUČNJACI SUOČAVAJU SE SA SLJEDEĆIM ETIČKIM ZAHTJEVIMA:

Ethical issue	Problem contents
1. Euthanasia	The question of iatrogenic termination of life. Passive and/or active physician's role brings about the contradiction to the basic norm of medicine »primum non nocere«.
2. Arteficial abortion	Intrauterine induced termination of fetal and embrional life rises the question of man's duty to the un- born

TABLE 1, continuation TABLICA 1. nastavak

3. The ownership and distributive justice in providing health services

The availability of medical benefits is a function of the wealth of nation. Therefore, poor society can offer less than what contemporary medicine in optimal condition could provide. Similar relates to the various strata of richer societies.

4. Professional missconduct

Physicians failure to react timely according to doctrinal judgement generates, in addition to others, the moral responsibilities, as well. The permanent growth of relevant knowledge imposes demand of continuous upgrading of knowledge. Professionalism assumes the keeping the facts of disease as patient's private and secret thing. Disclosure of medical facts (to nonmedical persons) might be done only with the consent and in the interest of the patient.

5. Moral conduct of physician under unusual circumstances Catastrophes (floods, earthquakes, wars and other mass perturbations) impose special tasks to the medical professionals, in terms of organization, logistics of work and position in such disabled society.

6. Tissue transplantation and conservation (including arteficial insemination) Advancement of medical sciences has generated the propriatory and other problems with grafting and functioning of human body tissues.

7. Development of drugs, therapeutical procedures and research on human mental and body physiology Present understanding of physiology is partial, ever growing one. Management of the disease is therefore under permanent demand of improving the quality of cognitive interpretations.

8. Treatment of mentally disabled and altered patients

Patient's mental capacity limits his participation natural procedure of making the decision on his own health problem. Due to that physician (and others involved) bears higher degree of responsibility.

9. Duty to disseminate knowledge relevant to general human health

10. Physician's virtue and duty to establish postive professional transfer with the patient treated.

Physicians are the principle interpreters of health knowledge. Their failure to recognize and to warn the public on the potential effect of certain phenomena might cause a long term negative seguela. (greenhouse effect, acid rains, ozone layer destruction, radiactivity in biosphere and enlargement of desert soil). The impact of science achievements should be timely instituted into medical schools, because of their functional position in medicine.

The major objection to the modern medicine is a progressive growth of diagnostic techniques, which brings about a tendency to minimize physician's communication with patient. Time of disease is very vulnerable period of life. Loosening of contacts patient senses as fright. Due to that, very often, he is disappointed as being kept »in dark«.

Medically nonjustified arteficial abortion puts physicians into very delicate postition (issue 1 in Table 1). From the biological point of view, arteficial abortion is a termination of life, even in cases when abortion has medical indication. Therefore, it always remains to the legal systems, tradition, religious and social inclinations to define their postion of the act. Physicians are, however, obliged to take an active intrpretative role in dispute. Their understanding and judgement about life processes should be a leading framework of decision. They should not leave decision to the others, because of some pragmatic reasons.

Understading of biology of immunoreactivity has enabled tissue grafting. It has openned very wide area of problems (2,37). Bilogical relations between donors and recipients, potential commerce of organs, rejection of grafted tissue, transmission of the diseases, conservation of tissues, are real problems. Each of them contains the ethical doubts. Transplantation medicine represents an important therapeutical approach. Since it always involves the donor, the other human fellow, it will permanently continue to be a subject of ethical judgement. In much broader sense, gene therapy experimentation is bringing about a new facet of ethical concerns, related to transplantation medicine.

Research involving human body, tissue samples or body fluids have always been under special monitoring of the public as well as scientific community. From the unspeakable and insane nazi experiments on prisoners

of war (1,3) to present human genome project (27), ethical disputes have been tryinig to find a rational framework and justification. Issue 7 in Table 1 stresses that point. Any proposed experimentation ought to be approved by the etical committee, after very carefull, step by step justification of undertakings. Such procedure expresses the need for collective participation in decision. It distributes the moral load on group, according to a collective judgement. This issue comes into very close proximity of physicians everyday work, applying even a very standardized methods and procedures. Namely, the level of certainty of biomedical cognition always leaves a room form moral doubts. Therefore, clinical diagnoses and judgements regularly contain ethical concerns. On the other side, it is moral duty of physician to evaluate and promote positive achievements of science in his everyday work. He should decline parasceintific interpretations and influences on his work. Alternative medicine and other paramedical pressures on the profession are sometimes very strong and annoying. Physican should be the interpreter and public counter-advocate against the application of such approaches. They very often may cause a hurt to the health, what is in direct contradiction to the professional oath. Physician should protect the interest of the patient against unresponsible self-proclaimed healers.

THE GROWTH OF SCIENTIFIC BIOMEDICAL KNOWLEDGE INCREASES MORAL RESPONSIBILITIES OF THE PROFESSIONALS

Physicians' professional postition is considered as a priviledge. It is priviledge in sense of making a decisions which may induce and do induce a positive change in patient's life. No other profession is in such critical position to generate a paramount guidelines for others people individual life in its everyday performance. That is a strong source of rewarding professional satisfaction. Due to that fact, medicine has enjoyed a special appealing position in the system of human values. Throughout history, regardless of cultural and civilization level of development and achievements, medicine has been kept at very esteemed position.

On the other side, medicine imposes a big demand on physicians' and students' life, in terms of time consumption and efforts required. The education process in one of the most demanding. Basic characteristic of contemporary biomedical sciences is their very fast passage from stemming cognitive steps towards the application. Owing to development of molecular biology approaches biomedical sciences have blossomed last twenty years. (19) They have entered into mature exact stage. Classical physiology and pathophysiology of body phenomena have been enriched with molecular kinetic

data. Biology of disease and potential places of therapeutical interventions are seen in radically new ways. Such revolutionary development has imposed to practicing physicans and other professions in medicine the unavoidable demand of active learning of new facts. Present research very often generates discoveries, which seem to be very close to definite cognition. (20) The understanding of processes is at higher certainty level. Concomitant development of biotechnology offers new therapeutical products and procedures. Therefore medical schools ought to adjust their programmes to that fast changes. (20,21) Failure to do so brings about a serious ethical concerns (the problems described in entries 4 and 7 in Table 1). Both, physicians and medical schools are under newly imposed pressure to make additional efforts to achieve the optimal performance. Very fast transformation of medicine calls for professionals souvereignity. The framework of university gives a basic freedom for the introduction a new procedures. Special treatment of the medical systems is required in postcommunistic countries. Due to mytical omnipotence of the system, communists have produced a serious erosion of academic standards and values. For example, depretiation of medical academic standards has led Croatia to the periphery of world biomedical sciences. It is a moral duty of medical professionals to improve the scientific, educational and health providing standards. Generations to come will judge this postcommunistic period according to successes in eliminating the parasitic phenomena. All professionals are called upon, and ethically obliged to purge the system of pseudoscience. The sad fact of quazi-quality is proved by the obhorrence of peer review in the evaluation of scientific performance. It is against better professional conduct and beliefs to continue with the parasitic heritage. Long term run of academic life in medicine imposes the demand on professionals to take an active role in promotion of real scientific standards in medical schools (issue 9 in Table 1). Therewith they will institute the self-growing system of dissemination and generating the relevant knowledge. (19,20,21) The elimination of quazi-science should be the first line of the purge. Otherwise, the burden of quazi-quality will perpetuate into self-expansion, with the long term negative sequela.

Positive experience of integrative approaches has accelarated the cognitive as well as pragmatic development of medicine. Recognizable outputs are witnessed in growing demand of societies and nations for a higher standards of medical performance. Longer and longer life expectancy is at least partial result of the advancements of medicine. (14) Prolongation of life generates additional social load, as well as ethical concerns.

ETHICAL STANDARDS OF MEDICINE DURING THE WAR

Civilization is social order promoting cultural creation. There are at least four contitutive elements of civilization: economic provision, political organization, pursuit of knowledge and art, and, moral tradition. They represent the fundamental blocks of human civilized life. They make the essential difference towards the other species. It seems moral drive represents a very strong energy for transition from chaos and insecurity towards constructive and free life. Moral categories have a strong normative power, both on individual as well as collective behavior. (5) Disappearance of the one of elements might cause a cataclysm of whole civilization structure. Wars can be defined as the most negative application of human mental capacity and behavior to solve the conflicts among the groups. Looking from historic prospective contemporara war activities are the most tragic one. Present war in Croatia* has disclosed several ethical issues.

Negative past experiences have led mankind to make a conscious effort to prevent the suffering of people inflicted by war activities. Several internationl conventions were written and politically supportted by majority of civilized nations. Laws of war, (9) Maintenance of Peace and Security (10), than, Convetion for the protection of Civilian Persons in Time of War (efective 1949) (11) and the Rules for Behavior in Combat (15) are examples of such international agreements. Even more, internationl community has foreseen the penalties to those who do not obey the standards. Convention on the Prevention and Punishment of the Crime of genocide (effective 1968) are the act expressing the beliefs of their regulatory preventive influence and power. The aggresors against Croatia and Bosnia and Herzegovina are sworn signitories of all above mentioned agreements. However, despite that, they have publicly, to the eye of live recordings, performed in the years 1991-92 the most brutal criminal acts against any of those laws (17,18). Concerning the physicians' ethical standards the situation is even more tragic. Namely, more then fifty of physicians have been sitting in the Parlament of Republic of Serbia (one of the aggressors) as elected delegates. Not a single protest they have put forward. Silently, they have become corresponsible for the public crime. Even more, having endorsed professional oath they are supposed to be a procurators of ethical conduct. Failure to have done so disqualify them publicly. Aggressors have developed a new level of criminal activities. Hospitals, health service facilities and professionals have become a direct target or their attacks (7,16,17,18,24,25,35, 36). The symbol of red cross has become the target 16. At least six hospitals in Croatia were more than three months under unceasing artillery fire, while inside the buildings and shelters physicians were trying to save life and alleviate the pains of the suffering ones. There is no doubt that attacks were preconcieved (24,25,35). Deliberate destructions of hospitals in the cities represent the aggression with the cannibalistic spiritual framework**

Despite the indignation and diffictulties to accept the facts, international community is faced with the necessity to redfine the crime codes. That aggressors' behavior forms a new negative quality of man's acts, never recorded in recent history. Aggresors' collective mental decline to the level of preconcieved hospital destructions calls for their internation reappraisal of such behavior. Deliberate group savage-like behavior, having the copious amounts of weapons in hands, becomes the threat to the world order. It imposes a moral responsibility of mankind to take a definite action against such trespassers of the basic principles. Failure to react to that new criminal category, might trigger a chain induction with the broad tragic consequences. The ignorance might be especially dangerous for the contemporary world, whic is loaded with all sorts of destructive weapons, including nuclear arsenal. This unspeakable deliberate destructions of hospitals have surpassed the level of nazi-crimes during the second world war. International community should accept a sad lesson and prevent any such collective insanity, now and forever.

Health service system of Croatia has been thrown into the harshest test of its ethical principles of professionalism. Under the most severe artillery attacks aiming the hospitals themselves, physicians and other medical personnel have continued to do their sacred profession in the cellars and shelters (7,18,25). It will be remembered as an epic story that medical professionals of the Vukovar hospital have persissted in taking care of patients till the very moment when they were taken into the concentration camps as prisoners of war (25). Their practical example has revived and rebuilt the legend that physicians' duty is superior to his own life. Dozens of medical professionals were killed on duty. There was not a rare case when they treated the patients of the aggressors' side. They have imposed a new moral standards of profession. Under direct atttacks

^{*}The war in Croatia started in May 91, and has continued through the day of manuscript completion. The Republic of Croatia has been brutally attacked by four aggressors: Republic of Serbia, Republic of Montenegro, Yugoslav Federal Army and the institutions of ex-Yugoslavia.

^{**}The term, cannibalistic policy, was introduced into contemporary literature by Sakharow, describing the Stalinistic conscious policy of torturing and killing of innocent disabled human fellows in the concentration camps of "socialistic progress". Similarly, the victims were physically and/or mentally disabled, due to conditions of life, and were devoid of any means of defending themselves. (A.D. Sakharow. Progress, Coexistence and Intellectual Freedom. New York; W.W. Norton Company, 1968, pg 52).

they have performed their duties in accordance with the oath. One might say, they have added therewith a new dimension of general framework of professional ethics.

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Sažetak

ETIČKI ZAHTJEVI MEDICINSKE STRUKE

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Zavod za patofiziologiju Medicinskog fakulteta Sveučilišta u Zagrebu, KBC Rebro

Etička načela i pravni sustav vrlo su moćni uredbeni mehanizmi čovjekova ponašanja u grupnom suživotu. Oni su osnovna linija uspostave civilizacijskog poretka. Autor članka ukratko raspravlja izvore i nastanak etičke prosudbe, te njezine učinke na život pojedinca i grupe. Priroda posla medicinskih profesija nalaže povišene etičke zahtjeve i odgovornost pojedinca. U tekstu je razlučeno deset raznorodnih grupa moral-

nih dvojbi. Za osiguranje pune profesionalnosti u skladu s moralnim zasadama, medicinske su struke pod vrlo pažljivom paskom javnosti. Autor članka nalazi da znanstveni napredak i posebni uvjeti postavljaju pred liječnika dodatne etičke zahtjeve. Dužnost prema liječničkoj prisezi proteže se i na njegova djela izvan medicine. Autor bilježi da su liječnici, za rata u Hrvatskoj godina 1991-92, radili prema uzusima liječničke prisege i pod neposrednom opasnošću napada na bolnice. To objašnjava kao novo dostignuće etičnosti u medicini. Pisac članka predlaže da se svjesno i namjerno razaranje bolnice kategorizira kao novi tip zločina protiv čovječanstva.

Ključne riječi: etički zahtjevi, medicinska struka,

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