

Aleksandra Frković:

Medicine and Bioethics

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The readership can enjoy the new Zagreb PERGAMENA edition, which has for more than a decade had its "Bioethics" editions and can be proud of its significant bioethical titles, including *The Diving Bell and the Butterfly* (Jean-Dominique Bauby), Proceedings *Challenges of Bioethics* (ed. Ante Čović), *Bioethical Education* by Nada Gosić, *Bioethics and Responsibility in Genetics* by Iva Rinčić, *Bioethical Ecumenism* by Ivan Cifrić, *Medications or a Story of Deception* by Lidija Gajski, *Bioethics in Clinical Practice* by Aleksandra Frković, etc.

A prolific author, Aleksandra Frković, MD and a bioethicist has, after publishing *Bioethics in Medical Practice* in 2006, delighted the professional, scientific and general bioethical public with a new study *Medicine and Bioethics* in which, as we shall see, she covers the most important segments of medical and bioethical interferences.

The book consists of the introduction and four extensive chapters, as well as the summary and index of names. The first chapter entitled *Health Care – Reflections on the Safety of Patients and Quality of Life* is dedicated to a very important concept of health care from the bioethical point of view, issues of safety of patients (ethical committees in health institutions, Luxembourg Declaration on Patient Safety, health workers and the safety of patients) and bioethical reflections on the quality of life (breastfeeding as a foundation of life quality, dysthanasia or medical uselessness, convention on human rights and medicine, euthanasia, recommendations of declarations and codices of medical ethics).

The second part of this extensive study is dedicated to *pain and bioethics*. In particular chapters Frković deals with numerous issues of insufficient pain treatment, psychological and emotional pain, spiritual pain, social and economic aspects of pain, medical aspects of pain (chronic pain resulting from malignant illnesses, chronic non-malignant pain, pain in terminal patients, pain in childhood, etc.) and birth-giving pain.

The third part entitled *Bioethical Education in Clinical Medicine* is dedicated to the presence of bioethics in clinical medicine and the important issue of including bioethics in the curriculum in medical education. The author ends this chapter with discussing guidelines for valid bioethical education in clinical work (in Croatia) and with listing significant scientific conferences and bibliography on bioethics, and finally the raising of the issue of bioethical education in perinatology.

Finally, in the fourth and the most extensive part of the study, the authors discuss bioethical aspects of education and informing a patient and the unavoidable bioethical and medical ethical topic – *doctor-patient* communication. In chapters of this part, the reader will find the following topics: education of patients (education of patients regarding their safety, complementary/alternative therapy and patients' education), informed consent (informed consent in clinical work and legal regulations related to informed consent in Croatia), ethical issues in cytology, *doctor-patient* relationship, the question of communication and communicational skills, *doctor-patient* communication and empathy, empathy measuring, empathy and sex, empathy in medical practice, empathy in psychiatry and the learning of empathy, bioethical aspects of communication with deaf patients and patient's obligations (e.g. smoking, alcohol and pregnancy – the question of obligations of a pregnant woman).

As the author says, all listed topics reflect the fact that the great scientific development and new technological findings and their application in medicine have provoked numerous ethical dilemmas from birth to death of an individual. It has been realized that the rules concerning doctor-patient relation cannot be exclusively in the domain of medicine so in order to make numerous ethical decisions, a participation of various experts is necessary: lawyers, philosophers, sociologists, theologians, psychologists, social workers. The author further notices that lately a lot has been discussed on the quality of health care, but that it would be useful to have more discussions on the quality of life in the broadest sense. For a quality life, each individual needs balanced nutrition, a job, stable financial situation, secured dwelling, fulfilling of spiritual needs, etc. Finally, for the quality life of a patient, both adequate medical care and the care of those nearest to the patient are important. Unfortunately, says the author, a patient is frequently left without the most basic elements for living.

Let us, in a few words, mention another bioethical problem which is emphasized by Frković. It is the pain as a bioethical fact, or more precisely insufficient treatment of pain which is not only medical but also a bioethical problem. As the author herself believes, as a complex phenomenon, pain would be treated more successfully if all the dimensions of the problem were included: psychological, emotional, spiritual, social and medical. It is unethical to let somebody to needlessly suffer. However, as

the author says, pain can exist even in the absence of suffering, and suffering can exist in the absence of pain. Medical professionals, believes the author, do not have sufficient knowledge on the complexity of pain so their permanent education on "pain management" is necessary. This is the topic of interference of medicine, bioethics, and law (unjustifiably, insufficient pain treatment is considered a poor medicine worldwide, unethical and infringement of basic human rights).

Finally, the author legitimately reminds of the fact that great changes occurring in medicine result in issues of particular basic terms in the interference of medicine and bioethics. Frković says that bioethics today is not and cannot be the same as it was in its beginnings. Lately, term *integrative bioethics* has been introduced into bioethical events, which consists of different approaches and perspectives and presents them in on a unique, spiritual horizon – different approaches to problems related to all levels of life are integrated, both scientific and non-scientific approaches, i.e. those based on religious, cultural, artistic and other particularities.

Why is reflection on mentioned medical and bioethical issues significant for us?

We believe that all mentioned issues are not relevant only for the interference of medicine, medical ethics and bioethics, but also for the *everyday life of each individual*. So, for example, the questions of health protection and health care concern each individual *personally* because in the contemporary world each individual find him or herself in the role of a patient from birth to death many times (let us mentioned that approximately 80% of the people in the world end their life in a hospital bed, as a patient).

Similarly, the issues of quality communication between a doctor and a patient are not the subject matter of only medical sociology, communication in medicine, bioethics and law but should also be the structure of reflection of different medical situations by individuals who, when patients, are the participants of that communication. In that sense, among other, we are interested in problems mentioned by the author regarding the *doctor-patient* relationship, which include, for example, empathy, which is defined in medical practice as the capability to understand the conditions and emotions of a patient, and looking at the perspective of a patient during a clear communication with a doctor, understandable to a patient. Frković states that medical bioethical education indicates that patients not only expect, but require their doctor's empathy. It is considered that this skill is a basis of engaged, quality communication between a doctor and a patient and that it alleviates patient's tension and directly increases the efficiency of the therapy.

Having this last in mind, let us mention one medical situation in which the author of this paper found herself as a parent of an underage patient. It is about visits to the

dentist in one Belgrade Public Care Center, about not being admitted because of the wrongly made appointment by the not overly pleasant, i.e. uncommunicative medical staff and a final intervention, successful, which ended within the frame of communication *dentist-nurse-patient-dentist's friend who sells summer dresses to him and a parent of the patient*. How to react in situations similar to this one, either as a patient or his or her parent? To forget the atmosphere of a market place because in a several months we will be forced to visit him again)? And/or immediately write a complaint to the Public Care Center (which may bring us into an awkward situation in the future, and the question is if anybody will even read the complaint; what happened to the latest scandals related to voluntary funds, pharmaceutical industry, cytostatics? Nothing?!)

At least we have shared this experience with the readers who, as we believe, are very well aware of these conditions, because they present one of the segments of everyday life of each individual in our surroundings.

This is why we are insisting on the value of all listed topics extensively dealt with by Aleksandra Frković in her study, not only from the point of view of professional and scientific discussions, but also on the level of public discussion and permanent reflection if each individual. Because many issues, more precisely our relation to numerous bioethical issues, reflect our relation to the life itself (opinions on euthanasia, organ donation, opinions on crimes made by others on our behalf... truly are important bioethical issues).

And all these issues do not concern us only professionally, but, in the first place, as *humans*.

Sandra Radenović