ISSN:2249-1236



INTERNATIONAL JOURNAL OF RESEARCH AND REVIEWS IN PHARMACY AND APPLIED SCIENCES

Review Article

Received: 13-09-2011 Accepted: 06-10-2011 Published: 29-11-2011

DIAGNOSIS AND TREATMENT OF DISEASES-A PSYCHO-PHILOSOPHICAL APPRAISAL

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ABSTRACT

We are living in a biological revolution where the incredible powers bestowed on us by the advancement of science and technology have made it clear that the major social problems in the century and the next will have significant scientific components associated with them. Thus in a very real sense these developments have and will continue to have enormous implications for ethics, as they force use to go back and reconsider our older concepts of life and death, and ultimately, What it means to be human? A century ago, the only challenge to medicine in general was to save life. The responsibilities of medicine is thus three- fold: 1. To generate scientific knowledge and teach it to others. 2. To use the knowledge for the health of an individual or a whole community. 3. And to judge the moral and ethical import of each medical act 'that directly affects another human being. The It raises the question in which manner will man survive? In response to this a last is very significant for us. specially called Bio-medical ethics has emerged, concerned exclusively with relating both science and philosophy to the fundamental problems of the purpose and meaning of life. In seeking to find solutions to the plethora of ethical problems in contemporary medicine-Abortion, eugenics, transplantation, human and genetic engineering, genetic screening, human experimentation, euthanasia and physical manipulation of the brain-pharmacological abuses etc. It deals with concepts of freedom and justice the nature of man and science human rights, political, and social ideology

Keywords: Diagnosis, Disease, Treatment, Bio-Medical Ethics

INTRODUCTION

We are living in a biological revolution where the incredible powers bestowed on us by the advancement of science and technology have made it clear that the major social problems in the century and the next will have significant scientific components associated with them. Thus in a very real sense these developments have and will continue to have enormous implications for ethics, as they force use to go back and reconsider our older concepts of life and death, and ultimately, What it means to be human? A century ago, the only challenge to medicine in general was to save life. The responsibilities of medicine is thus three-fold: 1. To generate scientific knowledge and teach it to others. 2. To use the knowledge for the health of an individual or a whole community. 3. And to judge the moral and ethical import of each medical act 'that directly affects another human being. The It raises the question in which manner will man survive? In response to this a last is very significant for us. specially called Bio-medical ethics has emerged, concerned exclusively with relating both science and philosophy to the fundamental problems of the purpose and meaning of life. In seeking to find solutions to the plethora of ethical problems in contemporary medicine-Abortion, eugenics, transplantation, human and genetic engineering, genetic screening, human experimentation, euthanasia and physical manipulation of the brain-pharmacological abuses etc. It deals with concepts of freedom and justice the nature of man and science, human rights, political, and social ideology.

HIPPOCRATIC OATH

The regimen I adopt shall be for the benefit of my patients according to my ability and judgment, and not for their hurt or for any wrong, I Will give no deadly drug to any, though it be asked of me, nor will I counsel such, and especially I will not aid a women to procure abortion-what so ever house I enter, there will I go for the benefit of the sick, refrain from all wrong doing or corruption, and especially from any act of seduction, of male or female, of bond or free. What so ever things I see or hear concerning the life of man in my attendance on the sick or even a part there from, which ought not to be noised abroad, I will keep silence there on, counting such things to be as sacred secrets.

Many of the precepts in the oath express noble ideals and yet such is the difficulty of laying down criteria to cover any eventuality that in practice exceptions have to be allowed. Few would insist that in no circumstances should a woman procure an abortion, and occasionally it may be justifiable to disclose a patient's secret to others. In the everyday practice of medicine physicians spend little time pondering over the ethical import of their judgment. They simply take for granted few moral principles whether they believe there are derived from Hippocrates, from the natural law from the Devine law or just from plain common sense. They do their best to benefit their patients by curative methods if possible, and otherwise by relieving symptoms and by kindness and reassurance they tell the truth (except when the truth is too wounding) and they do not reveal their patients confidences. Ethical problems are likely to arise in only a few special circumstances.

METHOD

In the present materialistic scenario a major element role in medicine is cost effectiveness of medical care. As the cost of medical care continues to rise it is becoming necessary to establish stringent priorities in the expenditure of money for health care. In some instances preventive measures offer the greatest return for the expenditure, outstanding examples include vaccination, immunization, reduction in accidents and occupational hazards, improved environmental control and biochemical and molecular biologic screening of new borns. For ex. The detection of phenylketonuria by new born screening may result in a net saving of many thousands of dollars.

The medical profession should provide leadership and guidance to the public in matters of cost control and physicians must take this responsibility seriously without being or seeming to be self-serving. The ethical implications are encompassed in the three major aspects viz. Disease, Diagnosis and Treatment.

Disease:

Disease commonly is considered to be a departure from the normal physiological state of a living organism sufficient to produce overt signs or symptoms. The initial cause of the diseased state may lie with in the individual organism itself, and the disease is then said to be idiopathic Innate primary, or "essential". Finally the disease may be caused by some agent external to the organism. This may be an inert but toxic agent, caused by human intentional action such exposure to dreadful chemicals. This comes under the head of ethical implications

Diagnosis: Diagnosis is a one of the major aspect in medicine. The term diagnosis refers either to an active process or to the conclusion reached by that process. Modern medical diagnosis in the active sense includes the process and art of using scientific methods to elucidate the whole compass of problems that influence a sick person. It includes the collections of all necessary facts and critical evaluation of every bit of evidence obtained from any and all sources by whatever method is useful. Diagnosis is the forerunner of treatment. It shall be classified, who should be committed, and what methods should be used as treatments. Therefore, ethical issues are associated with diagnosis. Diagnosis is a valid activity used only when we know enough about disorders, to be able to categorize them. It is categorized, not scientifically based, a humane and pragmatic way. In this connection there is a possibility of actual misapplication of diagnosis to people who do not need or deserve it.

Generally there are two types of misdiagnosis. Purposeful and Non-purposeful. Purposeful misdiagnosis being quite easy to detect as unethical and unjustifiable medical action based on humane intentions. Non-purposeful diagnosis discusses the medical action with a broad spectrum of philosophical and ethical considerations which deserve mention.

What are the causes for the possibility of misdiagnosis? Why the lack of uniformity in medical diagnosis? The answer is different orientations, different terms, different exposure to patients being diagnosed, are some reasons for diagnostic disagreement.

Social identity and values in diagnosis:

The relationship between the role and status of individual is after all governed by conventional definitions. Roles have become something like cognitive notions a set of expectations, we are required to fulfil or risk a diminishment of our status. We have on one hand, what can be called ascribed roles or status defined by biological characteristics like age, sex, kinship etc, - on the other hand achieved roles or status characterized by attainment or person. The range of potentional value is different for the performance and for the non-performance of roles at different points of the status dimension. While little or no positive value is declared for the performance of ascribed roles. (Mother, wife, adult etc), the non-performance of these roles entails strong negative value judgements. The Psychiatris should realize that in attaching value to what is or is not reasonable to re commend they are making moral choices and must be influenced by social norms.

Diagnosis As A Social Tranquilizer And Political Weapon

Dr. Reich referred to as non-purposeful misdiagnosis is the inherent beauty of diagnosis to solve or explain away human problems. Diagnosis is often used as a "humane transformation of deviance into illness". The danger is that despite the good intentions, it is not at all clear that such reclassification serves its purpose.

Newspapers and journals abound with political leaders "Psychiatric diagnosis" of their adversaries. Once we begin using diagnosis as a weapon or even as a "Social tranquilizer", the purpose of any social control is to stabilize the existing society and ultimately prevent a from changing, so this is very legitimate business for most communist countries which feel that their society is the best possible. But, "democratic societies" is not much different regarding the use of psychiatry as social control. So instead of supplying cognitive assertions which describe conduct, psychiatrists actually prescribe conduct via primitive's statements.

Treatment:

Diagnosis presents the causes for the disease which leads to treatment. Treatment must be based on an understanding of diagnosis and of prognosis, that is the outlook of a patient without treatment and with various kinds of treatment, including the accepted risks that certain treatments necessarily entail, whether the treatment be taking a pill, receiving an injection or undergoing a surgical operation. A successful diagnosis leads to a successful treatment. The physician role does not end with diagnosis and the prescribing of a treatment regimen. The importance of the physician in helping patients and their families to bear the burden of serious illness and death cannot be over emphasized

Results

Arriving at a correct diagnosis and ensuring the best treatment and outcome for every patient are the ultimate missions of medical care. The successful practitioner, however more than a receptacle for facts that makeup the body of knowledge called medicine. Success in diagnosis and treatment can only be achieved by considering all of the complex personal, familiar and economic circumstances of the patients and their families and by establishing and maintaining a supportive and open relationship with every patient.

Appropriate treatment involves more than merely deciding what drug, operation, or other treatment is called for. Successful treatment particularly for patients with chronic illnesses- must be tailored to the circumstances of individual patient and reinforced by a well established doctor-patient relationship. Fundamental ethical principles must also be ingrained for a successful approach to diagnosis and treatment: honesty, beneficence, justice, avoidance of conflict of interest, and the pledge to do no harm. Increasingly western medicine has involved patients in important decisions about medical care, including hows far to proceed with treatment of patients who have terminal illness.

CONCLUSION

Medical care addresses both the biological and psychological domains of man's life. The above analysis points to the importance of the social and ethical import on issues concerning medical care. The present question facing medical care is not merely the question of mans biological survival, but the purposeful meaning of such a living way practices: such as abortion, euthanasia. The study would go long way when the ethical implications are projected to the practioners, so that there would be wholesome medical care when in the emphasis would not be merely biological, but the psychological and other parameters are given due recognition and importance in medical care.

An empirical study by way of questionnaire would be helpful in substantiating the urgency to address the practioners towards these ethical issues. A questionnaire based on the values governing disease, diagnosis and treatment will be constructed and administered firstly to an expert group of medical practioners to standardized it. These standardized questionnaires will be administrated to a large cross section of medical practioners. Based on the response an analysis will be undertaken about the attitudes of the practioners on the ethical issues. Recommendation and suggestions will be formulated to rectify the shortcoming among the practioners regarding

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