

THE REAL CONFLICT: MEDICINE AND MONEY



Nour Shams



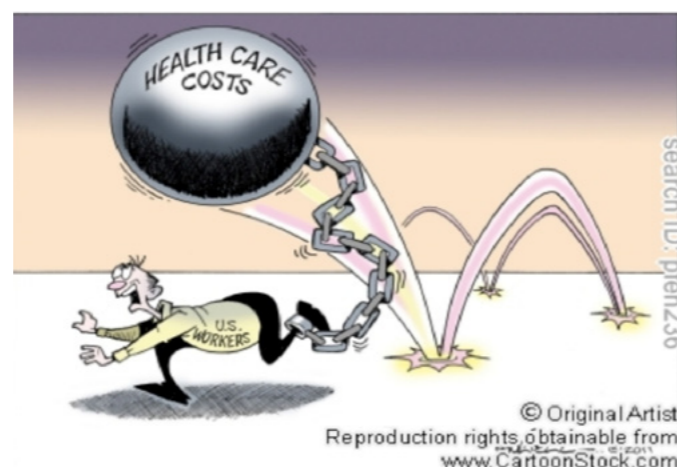
Human health is very precious aspect in every person's life. A healthy body means a healthy mind. In every country, the authority should take "health care" very seriously; it should be available and accessible to everyone. Nevertheless, medical fees are rising without control, and not all the citizens are able to access health care. This

change in the field of medicine and health care is of great importance because it will rapidly lead to serious crisis in this domain. In order to determine a good quality health care, which is reachable by everyone, the authority should monitor this field sector, to balance between medicine and money. The authority can play a role in regulating doctor's payment and also in setting a definite cost for some medical expenses as well as offering free annual check-up. Rudely, the basic needs for survival are becoming a luxury. Give man food, water and shelter and an appropriate health care and he will live cheerfully. To experience a happy and a peaceful life requires a person not to worry about sicknesses and diseases, something that is hard to avoid now. All this stands bearing in mind that one has a profession that can support him. But, if a nation is stroke with crisis about 30 or more jobless and the population salary drops while the health care cost remains high, then people would definitely suffer from inadequate health care.

"An ethics of care takes obligations to individual persons within relationships to be the cornerstone of its normative framework" (Nortvedt, Hem & Skirbekk, 2011, p. 193). Over thousands of years the medical profession was established to help and benefit mankind. Ethics and morals play a key role behind what the medical profession offers. When students are admitted into medical schools they are basically taught the medical ethics and morals that they should work accordingly. It is extremely essential that a medical student is driven and motivated by the right intentions, which is his love to care and cure patients. Great humanitarian doctors risked their lives and faced crucial danger to reach the sickest and poorest places of the World. Many lost their lives struggling and fighting for what they believed in. Doctors that became doctors based on their love to save and cure patients, devoted their lives to save people in need and struggled with them in their most sensitive times, something hard for anyone to believe unless seen.

The US government is controlling medical equipment's and examinations through what they called to be "governmental protocols". The governmental protocols are guidelines and policies that govern the health-giving decisions taken by health care specialist.

Obviously the government is putting such protocols to govern their own interest instead of patient's interest. For instance the US government banned breast cancer free ex-



aminations for women below the age of 50; by doing these they are cutting down from the money assigned for primary health care, and are saving them for other interests. To the government, such interests are more important than health issues. Moreover, governmental hospitals are failing to provide the latest equipment's that are more efficient in detecting diseases in order to help to poor and cut down the fees for the sake of patient's well-being. Doctors and surgeons are not receiving enough payment by the governmental hospitals to aid patients in a better way. Face-to-face examinations between patients and physicians have always been a necessary part of primary health care. However, doctors salaries and fee-for-service, failed to encounter such commitments. Robert A. Berenson (2010) affirmed in his critiques that: "Current US physician payment mechanisms have failed to adequately support basic primary care services" (p.1). This problem will soon lead to crisis in the primary health care provided to patients. Using the governmental rules and protocols had lead to some serious outcomes. According to Singer (2012), "One study showed post-op skin infections increased since the protocols were instituted".

These protocols and guidelines are not only affecting patient's health, but also the relation between doctors and patients and doctor's independent thinking. Doctors working at the governmental hospitals are required to obey the rules arranged by the government knowing that it doesn't fully fall under patient's rights. This is limiting doctor's individual and independent thinking, converting them into machines that work for the interest of the government instead of the patient. This will minor their enthusiasm and motivation to help patients. Similarly, if a patient realizes that the doctor is following rules set by the government and that these rules don't guide his own advantage, the patient will not be able to fully trust his physician, which can distress the patient health. Doctors should cooperate with patients through motivational talks to enhance the patient's trust and in return patient's health. According to Caldicott & Danis (2009) this can help patients overcome obstacles as well as participate in their own medical care.

The government holds the power and the rights to control the medical expenses so they can be reachable by all the classes of society. Because the government is the one regulating the prices, guidelines and protocols for physicians to follow, it will continue to be the only one with the ability to start a change in this field and build a health care system that is accessible by everyone in an acceptable and fair manner. The government can make special arrangements, so that the poor can be treated equally as the rich.



The moral of medicine holds that all patients have the right to be treated equally no matter to what social background they belong too. Caldicott & Danis indicated that: "...as rational beings who are capable of moral agency... each person is to be respected as an equal among equals... to respect others is to engage with them not as instruments or obstacles but as persons who are to be reasoned with" (Caldicott & Danis, 2009, p.3). Handling patients relying on how much they are willing to pay is like categorizing them as "objects" with no rights, instead of engaging with them as humans and offer them all they need.

Today's progressive medicine commands elevated levels of technology and along come high budgets. For this reason, the government should address national health main concerns bearing in mind the most central citizen right is getting the basic primary health care. This is an investment for the government since a healthy citizen with a healthy mind and body is the one that will be successful to sustain the various roles of society and be productive. In brief, Medicine is not like any other profession since it holds with it traditional morals, and ethics that shouldn't be lost in a money-oriented world.

References

- Nortvedt, P., Hem, M., & Skirbekk, H. (2011). The ethics of care: Role obligations and moderate partiality in health care. *Nursing Ethics*, 18(2), 192-200. doi:10.1177/0969733010388926
- Berenson, R. A., & Rich, E. C. (2010). US approach to physician payment: The deconstruction of primary care. *JGIM: Journal of General Internal Medicine*, 25(6), 613-618. Doi: 10.1007/s11606-010-1295-z
- Singer, J.A. (2012, January 5). A Physician's Take on the "Death Panel" Revelation. Reason Magazine. Retrieved from <http://reason.com/archives/2011/01/05/a-physicians-take-on-the-death-panel>
- Caldicott, C. V., & Danis, M. (2009). Medical ethics contributes to clinical management: teaching medical students to engage patients as moral agents. *Medical Education*, 43(3), 283-289. doi:10.1111/j.1365-2923.2008.03277.x