

## ARTICLE · CULTURA &amp; SAÚDE

# The Doctor-Patient Relationship

*A rereading that proposes duties for the patient too in the relationship with the physician*

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## ABSTRACT

The author proposes an original reading of the doctor-patient relationship, inverting the expression into the 'patient-doctor relationship.' After synthesizing the classic views of authors such as Kent, Hahnemann, Paracelsus, and Hippocrates on the moral, ethical, and scientific virtues demanded of the physician, he questions why so much responsibility falls on the professional while little or nothing is asked of the patient. He illustrates the argument with personal experiences of disregard, such as a father who refused to pay after the successful surgery of his stabbed son, and lists various situations of disrespect faced by physicians. The text advocates updating the Hippocratic Oath to contemporary ethical and socioeconomic conditions and creating norms of duties for the patient as well, arguing that the relationship will only be balanced when there is reciprocity of respect, affection, and obligations between both parties.

**KEYWORDS:** *doctor-patient relationship; medical ethics; patient duties; hippocrates; homeopathy; respect*

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On this theme there are numerous works scattered throughout libraries. Various authors have written about it, but I will try to escape the conventional and approach the subject from another angle. At first it may seem contradictory, even absurd, but I am absolutely convinced that little by little the message I intend to leave will become clear—one that will surely be the testimony of my own participation, a statement drawn from nearly twenty years of professional practice, time enough to accumulate a certain experience that grants me the disposition and the courage to be original. The theme is the Doctor-Patient Relationship: well then, I am going to call it the Patient-Doctor Relationship.

Why? Let us explain:

Many celebrated authors have bequeathed us their opinion on the subject; since it is necessary, I will offer a synthesis of the most famous, beginning with those closest to us and going back to the most distant.

Kent emphasized the physician's moral character and the knowledge of truth; as to morality, he anchors integrity as the basic condition for conducting oneself toward a purpose: to cure, to show respect and esteem, and to attain the most valuable condition of a completely pure conscience, free of remorse. He states that the physician must remain in a state of purity, humility, and innocence, and that in ceasing to be so he will certainly fail. He also stresses that the physician must have a deep knowledge of the human heart, prudence, and patience. He must be known as an honorable man in whom one can believe.

Hahnemann gave a detailed view of what he thought about the physician; one need only recall the countless paragraphs he devoted to this subject. But I wish to recall, in summary form, what he wrote on this specific point. He said: when you must choose a physician, let yourself be guided by the following—choose a physician who never shows himself to be coarse; who never grows angry, save at the sight of an injustice; who disdains no one, save flatterers; who never voices an opinion without prior

reflection; who does not conceal the merit of his colleagues and does not praise himself. In short, a friend of order, of tranquility, a man of love and charity.

Paracelsus, even more drastic, admits a true predestination, placing the physician before divine designs. He said: God will entrust the sick to the physician only when the hour of redemption draws near. For this reason, unskilled physicians would be the demons of purgatory. He defines the physician as a servant and minister of nature. God exercises His power through physicians, and so each physician must strive in constant, daily study to attain the utmost of science and experience. He must possess knowledge beyond that of strict medicine. In short, much was demanded of the physician.

Hippocrates, the father of medicine. For all the sick, the physician will always be the man who restores their health—first through scientific preparation, and second and above all through the faith he inspires by his understanding of the human heart. The ethical-scientific-philosophical hierarchy is the highest guideline in the exercise of his activity. The art of healing is personal, subjective, and non-transferable, and it is shown through vocation and the will to help the sick person to be cured or to die. The physician must make the patient's suffering his own—empathy—and cannot practice his profession effectively if he does not feel the passion to succor his neighbor with the aid of his wisdom and heart. The medical profession must be a privilege for superior spirits who combine intelligence, elevated feelings of solidarity, kindness, and sympathy, and who know how to understand the ethical dimension of the customs that exist as morality. Therefore there is no great difference between medicine and philosophy, because all the qualities of a good philosopher must be found in the physician. With this, Hippocrates set out the conditions a man must possess to have the honor of being a physician, unless he wishes to practice the art as a subordinate, vulgar trade; natural aptitude, inclination to study, love of work, and diligence were the premises, the postulates of Hippocrates.

With this brief retrospective we have noted what is classic. Hence our question: why is so much burden and responsibility attributed to the physician, and to the patient nothing, or almost nothing? At least I know of no work that has attempted to compose an oath that the patient should follow. In the old days there was a picture, once found on the walls of pharmacies, in which a dying patient lay in a corner of a small room, in the half-light, and when the physician entered he was depicted as a saint, with angel's wings, bringing hope in his countenance. Beside it, with the patient already recovered and the room lit up, the physician was shown leaving, represented as the figure of the devil with horn and trident (certainly because he had presented the bill).

At the start of my career, in the vigor of the enthusiasm proper to that stage of life, I attended a seventeen-year-old patient brought in by several people, all covered in blood, in shock. He had been stabbed in the chest; after about ten minutes, with blood in his vein and the other necessary measures in place, he was already being operated on.

At the time I practiced in a small hospital in the interior of Parana, with two colleagues (Jose Laercio do Egito and Matheus Marim). After a few days, the patient, completely recovered, was discharged, and the time came to settle the account with the father.

What a disappointment—he refused to pay, thought it expensive, and, as if that were not enough, added: the case wasn't so complicated; if it had been, you wouldn't have managed it.

That remark I have never forgotten; the disappointment was striking, not because I received absolutely nothing—even knowing he could pay—but because of the way he acted to justify his attitude, belittling all our effort to save the boy's life.

Well, with this story I only want to alert everyone that daily, somewhere, some colleague is surely going through the same thing.

I could enumerate so many other facts or circumstances in which the patient's disregard for the professional is evident, from failing to show up for an appointment without the slightest explanation, to the bad check, to the threat of legal action, to the malicious and so often unjustified haggling over the price of the consultation, to the one who wangles a free visit, to lateness born of scant respect, to the barefaced lie, to disrespect for the physician's premises, to the abuse of the telephone in number, hour, and duration—in short, so many attitudes undeserved by the physician.

In short, why all this? Why this lack of respect toward a figure who is merely trying to survive in this society in which the physician earns under the socialized system and spends in the capitalist one?

Might it not be because the physician was made the object of excessive responsibilities, having no right to err, or at least to err as much as other men?

Why is the physician assigned a mission that must be fulfilled with an almost superhuman infallibility?

Perhaps we ourselves are to blame. I do not advocate abandoning the Hippocratic Oath, which dates back 24 centuries. But I do wish to leave, in this article, a seed—so that it may be reformed, updated, and adapted to the ethical, social, and economic conditions of our time—because it is necessary that the physician be seen with different eyes, neither as an angel nor as a demon, but as a living entity in the cosmos in which we live, so that, being seen thus, he will be treated as such and will certainly have duties to fulfill, but will also receive from his patient, from

society, adequate and coherent treatment, without being required to have an infallibility that no one possesses.

I am fully convinced that the doctor-patient relationship will be enhanced when this premise of duties and obligations exists for the patient as well.

Therefore, following the middle path advocated by Buddha—neither too much toward heaven nor too much toward earth—I wish to bear witness here that the physician has, to a certain extent, been forgotten by the patient, passed over by society, and inadequately treated by the public authorities and, what is far worse, by the corporate physician himself.

An exemplary conduct was always demanded of the professional—dignity, honesty, and countless other

qualities and virtues. Upon the physician's shoulders everyone placed burdens and obligations; but no one remembered any recompense.

My message to the young colleagues who work in the professional bodies and in the faculties: fight for Medical Ethics to be taught properly to the physician, and for the establishment of a set of norms that emphasize the need for the patient, too, to follow rules.

Then, indeed, the doctor-patient relationship will be an equation of true exchange of energy, affection, and respect.

I hope this comes to pass as soon as possible, and I urge everyone to reflect on the Patient's Oath, which might be, for example: the patient should love the physician as much as he is loved by him.