The Role of Medical Ethics
In Comprehensive Healthcare System

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Abstract
Daily development of the human knowledge, promotion of biomedical technologies and improvement of physicians' ability in diagnosis and treatment of different types of diseases have always accompanied plenty of discussions and challengeable subjects, especially from the view point of ethical issues. Obtaining deep and accurate recognition of these subjects, the attention of the physicians and the scholars of different fields, especially of the ethics has been drawn to medical ethics as a new solution in the comprehensive Healthcare System. Despite the great changes in medical technologies, there are still some concerns about the physicians' abilities in decision makings that may directly or indirectly affect the health or life of the people. Therefore these concerns have leaded to the appearance of new movements all calling for the patients' rights and the rights of society to participate in medical decision-makings. On the other hand we should notice about some other cases that play effective roles in policy makings of the comprehensive healthcare system. Fore instance, the required resources will vary following the changes in technology; the population especially of the elderly is increasing; moreover the time needed for the new work forces to be entered into the labor market has typically increased. Consequently, a higher number of people are waiting to benefit from the recourses and lower number of them is involved in producing the recourses.
Thus, to work on the important topics like the requirements of human societies, ethical considerations of biotechnology and medical researches, Allocation of limited and immense resources, important ethical criteria of decision makings, representation of fundamental solutions and medical ethics trainings is considered as one of the most basic necessities of comprehensive healthcare system among others.

**Keywords:** Medical Ethics, Recourse Allocation, Policy Making, Comprehensive Healthcare System

**Introduction**
During the last recent decades we have seen extensive and remarkable advances in the field of biomedical researches and modern biotechnologies. Development of human knowledge and growth of human ability, some part of which was the result of technology development, especially in the field of biomedicine and industrializing the societies, has exposed the physicians and ethics' intellectuals to the challengeable topics and has somehow made impressions on all human being undoubtedly. Thereupon, all intellectuals from different fields decided to eliminate the existing problems or at least decrease them through representing appropriate ethical solutions. Thus medical ethics as an interdisciplinary specialty was formed mostly in developed countries that were confronting these subjects more than the others and has directed a lot of attention to itself nowadays. Though medical ethics has owned a long historical background among all human cultures, the modern form of it, which is focused mostly on consideration of the new medical issues,
ethical and legal subjects of that kind and representation of appropriate solutions, is still considered as a new field of study that tries to engage the morality into the practical aspect of the physicians and healthcare workers' work areas. Therefore this science will no more be considered as an absolute determinant of special professional rules and regulations for the physicians, but also will be considered as an analytic procedure through which the physician's thoughts, beliefs, behaviors and manner of decision-making in different situation is accurately and critically studied and proper notifications are represented, if necessary. In simple terms, medical ethics helps the physician to confront different situations and through representing organized and methodical solutions tries to keep the physician-patient relationship more trustfully and powerfully. Hence, considering the important role of medical ethics in policy making of the comprehensive Healthcare System and realizing justice in allocation and distribution of the resources are all taken as basis points of medical ethics that will be discussed in two parts:

**Part 1: Medical Ethics and Policy making for the Comprehensive Healthcare System**

1- Medical ethics background

Medical ethics has a long historical background in all human cultures. There have always been special trainings in all ancient customs about characteristics of an ideal physician and his manner of behavior with the patients; the physician-patient relationship and the physicians' necessary ethical virtues has been always considered as two major axes of traditional medical ethics. Traditional medical ethics has frequently been joined with
the ideas and thoughts of the great philosophers like Hippocrates, Socrates, Plato and Aristotle. Following the manner of these philosophers, the Greece intellectuals had placed the medical ethics at the top of their activities besides medicine. Hippocrates was the first person that merged the ethical bases with medicine in the framework of medical oath and represented it to the physicians as an ethical assurance. Then other different civilizations especially Islam and Iran civilization paid much attention to the ethics in medicine. “Pandnâmeh Ahvâzi” was also written in this regard. Ethics was considered as one of the prerequisites of the clinical medicine in the old civilizations, especially in the Islamic civilization, and medical alumnus had to study ethics and hikmat (that is the philosophy.)

2- Appearance of Modern Medical Ethics
Following the advances in technology and multiplicity of various treatment methods the physicians could apply, the traditional medical ethics could no more solve the existing problems and challenges. Therefore, the modern medical ethics was entered into the medicine as an interdisciplinary field of study since the 1960 decade.
Different elements made qualitative and fundamental changes in medical ethics. The domain and extension of these changes were to the extent that some other scholars and intellectuals terminologically considered “Medical Ethics” as an unexpressive phrase and so decided to replace it with “Bioethics.”
Passing of the time made the scientists try to find new solutions for the confronting ethical and legal challenges. The most important cases of these new challenges were, invention of
dialysis machine, ventilator system (artificial respiration), possibility of organ transplantation, Stem Cells, reproduction techniques, medical researches and etc that all were making the possibility of surviving or prolonging the life of those patients who had previously died in a short time.

To be afraid about the physicians’ exclusive power in making decisions that directly or indirectly affects the persons’ life and health is considered as another significant point. These concerns finally led to the appearance of movements all seeking for the patients’ rights and the right of society to participate in medical decision makings.

With regard to the point that the practical decision makings in the field of medical ethics necessarily needs high perception of the related philosophical discussions, through paying much attention and considering all aspects of the tasks, special basics and principles should be represented and then applied in a way that all people and specially ethicists could logically approve and emphasize them.

Four fundamental keys that are currently posed in ethical decision makings are mentioned as, the quadruplet principles of independence or (Autonomy), Beneficence, Nonmaleficence and Justice.

Western and Islamic societies have different viewpoints towards these principles and each follows special framework in accordance with its own cultural and religious values. For instance, about disconnecting the vital apparatuses from the patients using them, it has been a discussable question during the last decades that, whether the vital apparatuses should be disconnected from the patients who are not expected to be recovered from coma? This is an ethical decision not only to be
made by a physician alone, but also the patient, his/her family and the society should play their own role and their ideas are as important as the physician’s. Another example is the subject of organ transplantation and the long lists of the candidate patients waiting for it. Transplantations that do not guarantee any hope for the lives of the patients, but the physicians proceed to do them are considered as another example of these kinds. Anyway, with regard to diversity of the viewpoints, we should recognize and implement the reconcilable viewpoints that are justifiably acceptable. In this regard we should consider the points mentioned below:

I. Every patient has some emotions and sentiments or better to say some specific moral traits besides the physical problem he has. Therefore the physician should pay attention to these traits in addition to asking for the patient’s history in order to provide him with the best medical cares with regard to his limitations.

II. The patients depending on their physical conditions and the problems they involve are different. Thus the conditions of those who are hospitalized in the emergency section are far more critical than the others. So the physicians should prioritize the patients according to their conditions and problems. Moreover, all healthcare centers must provide their medical services to the patient upon the predefined guidelines and regulations.

III. Since the patient is a member of human society, physicians and healthcare centers should show their kindness and loyalty to the patient and should exercise justice in their decision makings. Considering these viewpoints will definitely be a way to control the conflict between the patient’s interests and making use of the
efficient resources of the society; however it may practically be faced with different difficulties and problems.

3- Bioethics; and Modern Approach of the World Society
The world today thinks about issues more important than medical ethics and studies all areas around medical sciences and the causes and factors affecting medicine in the framework of an interdisciplinary specialty named as Bioethics. One of the distinctive aspects of bioethics from medical ethics is the critical and thoughtful nature of it that considers the human ethical issues resulted from the weird growth of human’s implicit ability. This field does not aim to make any obligation towards a group of guidelines and principles, but tries mostly to clarify the nature and essence of many different issues.
Another distinctive aspect of medical ethics is the philosophical nature of its discussions as well as considering the subjects like the ethical nature of life’s value, the concept of personality and its realities and the position and superiority of human being in comparison with other creatures.
And finally one of the most important distinctive aspects of bioethics and medical ethics is to consider general policy makings and massive decision makings within different classes. This aspect of bioethics, which is discussed as "ethics in policy making" or in more limited definition "ethics in the healthcare system", will be explained in detail in the 2nd part.

4- Policymaking in the Comprehensive Healthcare System
Policymaking in the comprehensive healthcare system is very important. With regard to the population growth and specially population of the old persons and the patients and limitation of
the resources, decrease of the resources especially in the healthcare system is obviously observed. On the other hand the required resources vary following the changes made in technology and the achieved advances. It will also take a long time for the new generations to enter into the social interactions and be added to the current medical practitioners as new work forces. Therefore we see more people waiting for using the existing resources and less number of the whole population involve in producing recourses. Hence, the principle of justice and equitable distribution of the resources and beneficence should be taken into consideration. The healthcare systems in most countries emphasize mostly on realizing equity. Therefore a general integrated system is defined for all people so that the great value of the justice and equitable distribution of the resources could be respected.

Protection of the resources is also of a great importance. It is necessary for a society to put some restrictions on the person's activities so that they can not follow their personal benefits without being limited to any restrictions and without regarding the social interests.

**Part 2: Fair Resource Allocation and Distribution**

**1- Fair Resources Distribution**

Human societies have variety of requirements. Providing the biological requirements is considered as one of the most important necessities among others. On the other hand in order to provide the people with their requirements and requests, their mental growth and scientific advances should both be taken into consideration. But preparing all human needs and requirements
is not something to be achieved simultaneously. I.e. all people cannot have all things together with each other. Every civil and civilized society should pay enough attention to all of its various requirements simultaneously and try to fulfill all of them appropriately. Consequently, today insurance systems are considered as an ideal solution in the advanced societies to support qualified persons and solve their problems and especially in the health services when necessary. What is mostly advised to some of the civilized societies is to regard the principle of justice and freedom and to spend the expenses in an effective and practical manner. But the discussable question is whether the cliché conflicts among freedom, Optimum expenses and justice should be taken into consideration or not?

One of the quadruple principles of the comprehensive healthcare system is beneficence. It means that the maximum amount of benefits should be allocated to the largest number of people through spending the minimum amount of expenses. This principle has integrated with the principle of fair resource distribution that is to say the allocated resources must have the highest level of function and possible capability to provide service. More over each person should be provided with these resources in a way that all his/her human dignity is respected. The society should also make all basic healthcare services available for all people. The economists represent models that can give the maximum amount of benefits with the least amount of expenses to the people.

Patients’ triage is also considered as one of the other solution that can be effective in this regard. Analysis of the presented healthcare services and the moneys spent can be very useful directly in providing the society with more appropriate services.
and indirectly in increasing the lifetime of the people in a society. Therefore in all health care decision makings, with regard to the limited resources we have, we should try to increase the life quality and decrease the diseases and mortalities yet we should not forget about realizing equity in this task. It means that “how should we decide when we have to choose between a short life to be lived in good health or a long life to be lived in stress and disability?” In fact the quality of life should be chosen in this situation with regard to the priorities. While groups of the people may live in good health even for a century, some other people are involved in considerable levels of weaknesses and disability during their life. The health conditions of each person have some relations with his/her genetic characteristic to some extent. But some factors like nutrition, environment and etc may affect it after the birth.

Another question posed here that “is the quality of a patients’ life so unimportant that the use of medical services may seem to be unreasonable?” who shall make decision in such situations? Medical team, the patient or his family? Different studies showed that the physicians usually imagine a lower level of life for the patient than what he/she is willing to have in reality. Thus if the patient is in a good intelligence condition and is able to make contact with the people of around, he should be definitely consulted about the issue. But what kinds of criteria are acceptable for making judgments about the quality of one’s life?

This subject is rarely discussed appropriately and is usually influenced by the presuppositions and prejudgments. Therefore, discussions and exchange of the ideas about the issue by the
health care authorities can reduce some of the existing concerns to some extent. For example the personnel of a medical institute may be concerned about return of the alcoholic patients to the hospital and may state that the spent expenses can be spent for some more necessary services like prenatal cares or for some research projects; therefore they believe that the hospital authorities should refuse to receive such patients. Of course they may be right! But what kind of problems will such patients face, if they are left in such conditions? These are all questions that require the related authorities to discuss on and to make decision for. Evidently, the quality of people’s life and their potential energy will be reduced following the advances in technology and industrialization of the societies. Having good health condition is everyone’s first will and all efforts should be made for the health of the people. Within different periods of time, some people have represented useful ethical and legal doctrines about social welfare. For example Nozick assigned some taxes for the overtime work; that is to say that we have some rights towards our own body and we should pay tax if we try to put it under too much pressure.

In the more advanced countries, many different questions have been arisen about tax administration for the hygiene-care sector. But the tax priorities should be taken into consideration. In some countries there is a system in which the people are permitted to chose between the projects and select the one which is more adaptable to their financial ability and ideas. Governments usually consider some programs, but some of these plans may sometimes cause to waste or overuse the recourses. Not only none of the persons who complain about inefficiency or
inappropriateness of the executed programs disagree with providing the society and especially needy persons with the health cares, but also they believe that all these cares and services should be represented by means of private and social institutes so that all afforded and generous individuals can enter into the scene and represent their services better. In such conditions the inhuman act of organ transaction is vanished and the godly act of organ donation is coming into view. On the other hand some of the medical services are very expensive and not all of the people can afford to pay for them. Hence, through representing appropriate solutions, some suitable conditions should be prepared in order that all members of the society can at least make use of the restricted resources and have the chance of continuing their life.

2. Allocation of Limited and Immense Resources
To realize social justice in medical service and healthcare system and fair allocation of the resources in the society are some of the most significant subjects of the modern medical ethics. This issue is discussed both in prioritizing the resource allocations within the society, in the apportionments and in the selection of the individuals and groups to be provided with the services. In addition to realizing justice, respecting the human dignity and satisfaction of the public society are all of the important ethical principles that should be always considered.

Bioethics has not considered these cases and is fundamentally based on two issues: the relationship of the individuals with each other and the relationship of the individuals with the society. According to medical ethics the first relation includes "allocation
of limited resources" and the second includes "allocation of immense recourses". Healthcare resources are usually almost rare and should be somehow allocated, although we do not always consider them as rare or allocated resources especially when no one makes a deliberate decision for the manner of their distribution. But in some countries like USA an extensive domain of the healthcare services are dedicated to the citizens who are under coverage of medical insurances and therefore insurance systems make decision for the state of resource allocation for them. However this sort of decision should be undoubtedly made by a person or a group which is completely aware of the societies' requirements and try to make a fair distribution of the resources. As an example, the flue vaccine is usually produced in a limited amount, so the needed patients should be prioritized for using it. I.e. the olds and the children who are at more risk of infection with the transmissible and infectious diseases should receive the vaccine more and sooner than the others. Some patients sometimes request the medical cares and treating actions simultaneous with each other and so the medical personnel would not be able to provide all of them with the services simultaneously. An example for the case is a crowded emergency section or local a hospital that has too much number of patients that makes their available personnel unable to provide all patients with medical services in time; it is on such occasion that the subject of patients' triage is posed. It means that the patients who are in more critical conditions and need emergency actions must be managed and treated before the patients with less critical problems.
Bioethics intellectuals, criticizers of health policy making and health economists distinguish typically between limited and immense allocation of the resources. Limited allocation of the resources is performed just within special medical centers and with regard to the concentration of the population in the region. For example, there maybe a lot of dialysis beds installed in a hospital for the patients suffering from renal diseases, but the number of patients referred to this center is more than the current capacity of the dialysis section. In essence, immense allocation of dialysis beds is of the responsibilities of the provincial or regional coordinators. If an appropriate system is organized to support all patients with renal diseases, the number of beds will consequently be increased and none of the patients will face any problem. Other subjects like distribution of organs for transplantation and the ICU beds are also involved in the same conditions. Generally, immense allocation of the resources which have a close relationship with the allocation of the resources to the different institutes or groups is considered in three levels of importance:

A. Every society distributes its resources in immense sectors like education, welfare, health cares and etc. The amounts of resources to be allocated to each sector should be considered as an important point.

B. Allocation of resources inside each of the immense sectors of education, welfare, health and the necessary ethical criteria for decision-makings about these cases is considered as another field of discussion in respect of resource allocation.

C. Distribution of the resources among institutes and that to which extent the resources are used for ICU and pediatric
sections are regarded as the third important point in respect of immense allocation of the resource. But some points are of the great importance in this regard:

a. We should know that our decisions necessarily have some influences on a real person's life.

b. The decision-makings must be done equitably and the more powerful parties should not be allowed to make use of these resources more than the other parties.

c. We should be slightly flexible in our decision makings so that the future probable and necessary changes can practically have the possibility to be realized.

2. John Rawls Viewpoint and Deontologists

Another important point in immense resources allocation is justice and fair distribution of the resources. This subject has so a long history in the human thoughts and beliefs that Plato had defined the justice as "to regard the individual’s role and obligations" and Aristotle had defined it concisely in the phrase" (everyone gets his due or what he deserves). The viewpoints are different and sometimes contradictory in this field. John Rawls, the contemporary philosopher has defined the justice as:

A. To provide the maximum freedom for each person in the society

B. To make all existing grades and positions of the society accessible for all people who are professionally and technically capable.

C. Distribution of the resources in a manner that the most deprived levels of the society can also make the best use of the resources.
Rawls believes that justice must be realized in all stages of the healthcare services. Nobody can behave out of the framework of social cooperation rules. The economic and social injustices are not legally acceptable for the members of the society and it can just be accepted when the condition is similar for all levels of the society and is not just for a group of them to be imposed with injustice and making the least benefit while the other parties are making the best possible use of the resources. The opportunities and privileges should be equal for all people. Unfair allocation of the resources makes the poorer classes unable to access the resources and therefore they will face too may problems in using the healthcare services and treatments in general. According to the Rawls viewpoint, ethical decision makings are based on visualization of an imaginative condition in the mind of an agent which was named as "veil of ignorance" and represent the concept as "it is just through a fair and ethical choice that an individual forgets all sexual, racial, and traditional dependencies and thinks just about what is more beneficial for the society". Therefore with regard to limitation of the resources in the health services and hygienic cares sectors we have to apply some criteria when the decision makings are done for the resource distribution, to see if the ethical principles are respected completely. As mentioned before, one of the important theorizing branches of today's bioethics is to take such points into consideration. Since the requirements of the human being especially different patients and different age groups to the healthcare service, its types and scales are various, different and sometimes contradictory ethical considerations are posed in this area.
Bioethics must be able to answer the question that: which part of the health care resources should be dedicated to solve the health problems of the elderly people. Regarding the invaluable and loyal services they have represented during many years work, the society is indeed indebted to them and therefore a great deal of the resources should be dedicated to their problems. This vision is based on Deontology.

Some contradictory ethical considerations are also observed in distribution of the resources among various age groups. These considerations are like the quality of life at the ending years of one's life, general decrease of the old person’s hope for longer life and that there will be less possibility for the society to benefit from the longevity of the life of this age group. According to the Consequentialism, while there is no logical justification and reasoning to spend the heavy costs of the health services for this group of age, Proceeding to the health problems of the children and the youth age groups with regard to the longer period of time they can give service to the society in future or that they may be turned into the source of valuable services, seems far more logical.

With regard to the aforementioned subjects, the important role of ethics specialists in the comprehensive healthcare system becomes clearer than before. The ethics intellectuals and scholars should unravel the complications with respect to all social and religious values and norms. These cases are usually posed within different sections of treatment, drug, nutrition and education. Therefore, the related authorities must try to resolve the challenges through making equity among different considerations, realizing justice and fairness and taking all social classes and age groups into consideration.
It seems that through having limited and superficial look at the ethics issue we can not prevail over the existing problems and achieve the desirable goals. We should represent basic solutions through paying deep attention to the civilization history of Islam and Iran and make use of the latest scientific findings so that the important role of ethics in the comprehensive healthcare system can be completely observed in the light of those solutions. Because today not only the traditional ethical educations are no more applicable for the educated people, but also the new instructions besides modern educational methods can scientifically and practically be considered as fine solution for the current challenges. All discussions, exchange of ideas, analysis and study of the ethical cases arose from clinical cares which are done by the trained experts are some of the main necessities of the medical educations.

**Conclusion**

The growth of the human knowledge and development of modern biotechnologies has made the traditional medicine involve in big revolution in a way that new physicians will not be able to continue their professional job without applying the modern tools and methods. Therefore the modern medicine necessarily needs the modern medical ethics. To put the basis of medical ethics on the Islamic framework to prevent from penetration of western culture, secular medicine and secular bioethics in the Islamic countries are considered as an essential necessity. Therefore, the scholars of different fields can make effective steps to solve the existing problems through
representing fundamental solutions and specific guidelines for medical workers. Ethics in policymaking and comprehensive healthcare system is considered as one of the modern medicine’s ethical discussions. With regard to the significance of the ethical issues and the aftermaths of decision makings in this area that affect all society, it is necessary for the medical ethics intellectuals to develop a comprehensive theory in this area and specially in the challenging topics of allocation and distribution of the limited resource for the health sector, through deep concentration on philosophical basis and religious thoughts on one hand and the social needs and conditions of different social classes and respecting the principles of justice and equity on the other hand. We can indeed organize the strategic program of policy making for the comprehensive healthcare system in the light of medical ethics and this extensive vision toward the case.
References
1. Safavi, Bahare, Health in The Light of Ethical Values, a Report on the 2nd International Congress on Medical Ethics, Jame-Jam Newspaper,
2. Zali, Alireza, Abbasi,Mahmoud, Law and Ethics in Medical Researches, Orora Plumer, The Research Center for Ethics and Law in Medicine, Volume 4 of the Bioethics Series, 2008