

# Ethics in Psychiatry

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## **Abstract**

Regarding the principle "do no harm" in psychiatry the issue of applying physicians and medical personnel for hostile purposes is specifically acute. This issue can have number of aspects. From the ethical point of view it is necessary to distinguish between two groups of wrong medical diagnoses. First of them includes wrong diagnoses by the doctors, implying "honest errors" and the second group involves those diagnoses, which not only wrongly describe condition of psychiatric health, but also they are conditioned by non-medical factors, for purposes of politics. This can be said not only about the well known protectors on the human rights - the dissidents, but also about those citizens, who had some "local conflicts" with the government, what lead to compulsory hospitalization without any clinical necessity. The rights of the patients are also infringed, when the medicines are prescribed for the purposes of punishment and not for treatment needs. The author considers also the issues of confidentiality in medical sphere. To her opinion it is inadmissible to make diagnosis of psychical illness on the basis of non-compliance of the views and beliefs of the person with those of the society.

**Keywords:** *compulsory hospitalization, non-voluntary hospitalization, ethical code, euthanasia, confidentiality*

## **Applying of Psychiatry for Hostile Purposes**

Regarding the principle "do no harm" in psychiatry the issue of applying physicians and medical personnel for hostile purposes is specifically acute. Basic normative act in medical ethics associated with hostile application of psychiatry is "Hawaii Declaration" of World Association of Psychiatrists. Hostile application of psychiatry, applying of powers of this clinical discipline and skills of the doctor - psychiatrist, also personnel of psychiatric institutions for hostile purposes, to the detriment of the patient or his relatives - this is the fundamental position of Hawaii Declaration. Applying of psychiatry for hostile purposes is associated with political purposes, when wrong, non-adequate diagnosis is made with complete negligence of human rights.

Hostile application of psychiatry, as a knowledge may have various aspects. For example in sixties - eighties of the twentieth century in Moscow school of psychiatry (and not only there) number of schizophrenia cases usually was strongly overestimated. From the ethical point of view it is necessary to distinguish between two

groups of wrong medical diagnoses. First of them includes wrong diagnoses by the doctors, implying "honest errors" and the second group involves those diagnoses, which not only wrongly describe condition of psychiatric health, but also they are conditioned by non-medical factors. On the third Congress of the World Association of Psychiatrists (Athens, 1999) in "Declaration" of All Union Society of Psychiatrists it was officially recognized that "In Soviet psychiatry took place hostile applying of psychiatry for political purposes". It implied not only well known all over the world cases of the "dissidents" but also those cases, which were related to the citizens in so called "local conflicts" with the government. This usually led to compulsory hospitalization without any kinds of reasonable causes and clinical justification. In such situations moral responsibility of the psychiatrists was in controversy with professional ethical code of the Association of Psychiatrists, according to which "diagnosis of psychical disorder can not be based on beliefs and views of the person", which do not conform to generally accepted beliefs and views by the society.

There is quite large number of examples of "punishing psychiatry". In 1836, when emperor Nikolai I have read

the first "Philosophical Letter" by P. I. Chaadaev, he declared that the author was crazy. On this basis against the author there were applied "Police-medical supervision" measures - during the year doctors used to visit him. Only because of Czar's Special Pardon Chaadaev avoided the shelter for mentally sick people. In the twentieth century the German psychiatrists became participants of "Compulsory Sterilization and Euthanasia" programs of the Fascist programs. In 1936 - 1939 in Germany took place mass forced sterilization of the psychical patients and in 1939 - 1941 the hospitals were transformed into institutions where thousands of people, after assessing of their illness as critical, received as a "gift", easy death by the order of Hitler. Actually he has initiated actions of euthanasia and practices of mass assassination of people who are not useful for nazi regime. In sixties and eighties in Romania, when Chaushesku was a leader of the country, in connection with party sessions, President tours and ports actions great number of completely healthy people were placed in psychiatric hospitals. They were non-desirable people for the government.

Starting from "Hawaii Declaration of the World Association of Psychiatrists, as international, also national ethical-legal documents establish provisions and regulations, which strictly prohibit applying of psychiatric instruments for non-medical purposes (partly to punish people with psychical disorders and within the interests of some persons in soviet psychiatry took place prescribing sulfazine or neuroleptics not according to clinical signs, but for the purposes of punishment (e. g. for violation of the regime). Doses of these medicaments were determined by heaviness of violation. The same was with the facts of prescription of sedative preparations without any clinical causes, e. g. to provide easy night nursing etc. It should be noted that Hawaii Declaration was published in Soviet Union in 1992. In Georgia this process (providing of legal basis for the medical sphere) takes place now. Applying of psychotropic medicines and methods for non-medical purposes is prohibited by the law "On Psychiatric Aid" and is regarded as non-admissible for medical ethics.

Hostile applying of psychiatry, as knowledge is closely associated with hostile applying of the professional position by the psychiatrist. First contact of the psychiatrist and the patient implies possibility of unfair practice. It is not incidental that the law "On Psychiatric Aid" requires from the doctors to be a doctor-psychiatrist for the patient. This requirement does not cover the cases of involuntary hospitalization. Though, even in these cases, if the patient has maintained ability of self-assessment of the condition and his/her cognition is not destroyed, non-disclosure of doctor's identity (actually to lie to the patients) is not justified.

From the ethical point of view the psychiatrist has no right to apply the position of the doctor and make any property transactions with the patient and use his labor.

For example if the doctor desires to rent the dwelling house from the patient or hire him as an employee. Let us assume that the doctor observes all requirements of the law and attempts to make agreements, which correspond to the "financial fairness" requirements. Legally such transactions are acceptable (of course in the patient is not recognized as an ineffective person) but they are in controversy with the professional ethics of the psychiatrist.

In such cases the "wisdom" of ethical prohibition is based upon the requirement, according to which mentally ill people should be additionally protected from threatening to their interests and violation of their rights. In such cases ethical prohibition allows to avoid situations, when the doctor, hiring the dwelling of the patient would not attempt to discharge the patient from the hospital in time and if this argument in some case loses its effect (Common case: true doctor would never allow to determine the issue of discharging of the patients from the hospital on the basis of non-medical factors), ethical prohibition would continue to work only because of moral necessity, i. e. because assuming of property transactions of the doctor (and moreover, moral excuse) and the patient, or applying of his labor in the public cognition will cause devaluation of medical ideals and have an destroying impact on moral and ethical aspect of the relations patient - doctor. It would make dirty the moral atmosphere in medical institution.

As a basic factor, determining the ability of hostile application of psychiatry is regarded professional feature of doctor - psychiatrist - the issue of professional independence of the doctor has as moral-ethical, also social (including juridical) generalization. Well known "Lisbon Declaration on Patients Rights" (1981) state that: a) the patient has right not to receive help of the doctor, who is not free of external influence in making clinical and medical decisions; b) The patient has right to freely choose his doctor; c) The patient, after receiving adequate information, has right to accept or reject treatment.

In 1986 World Medical Association has adopted the "Declaration on Independence and Professional Freedom of the Doctor", which states: "Professional freedom of the doctor implies freedom from external interference into the treatment process". Everywhere and at all times independence of professional and ethical decisions by the doctor shall be protected". In Hawaii Declaration of the World Association this issue occupies significant place. "If the patient or some third party requires from the psychiatrists some actions, which are in controversy with the medical knowledge or ethical principles, the doctor shall refuse to co-operate". The Law on Psychiatric Aid states the following: "independence of the doctor - psychiatrist, in the course of providing psychiatric aid, according to which freedom of the independent decisions by the doctor is

guaranteed though it may not comply with the decision of the medical commission".

### **Confidentiality for Psychiatric Patients**

Application of the norms of confidentiality in psychiatry is characterized by number of features. In conditions of stigmatization of insane persons it is significant to ensure confidentiality of doctors and medical personnel and non-disclosure of medical information. Georgian Law on health Protection determines the object of medical secrecy. These include: data on applying for psychiatric aid, existing psychic disorders, psychiatric treatment and other data on mental health.

As the subjects of medical secrecy, or those, who are obliged to keep confidential information, are regarded: doctors, psychologists, medium medical personnel, hospital attendants and all employees in general (e.g. drivers of the emergency cars), also the students of medical institutions, who can receive medical secret data in the training process. Keeping of the medical secrecy is regarded by the law as an objective requirement, what does not depend on whether attempts the patient himself to keep the secrecy of his health condition or not.

Moral - ethical collisions associated with necessity to keep secrecy in the process of providing psychiatric aid are really dramatic. We shall provide only a single example of the recent publications. The psychiatrists did not inform the spouse of the patient that her husband had a heavy endogenous psychical illness. After ten years (in this period one more child was born in this family), when the progressing illness assured the woman that her husband was indeed a very heavily sick, she wrote a letter to a doctor whom she did not know (as a response to his popular book on psychiatry): "He was recently hospitalized once more. This time it was difficult to deceive me. The doctors only approved that it was not neurasthenia, but a psychical illness (they did not inform me about exact diagnosis). What results were obtained from the kind lies of the doctors? Now I even do not want to live. If they told me about it earlier, I should have chance to leave my husband and live my own life when I was 26 and now I know about your "kind" lie and I curse you for your lies".

This case is interesting, as we have a moral dilemma of actual life - on one hand any decision of the doctor may be conditioned by moral norms and on the other hand any choice may be painful from the moral - ethical point of view.

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## Этика в психиатрии

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### РЕЗЮМЕ

При рассмотрении принципов "не повреди" в психиатрии особенно остро стоит вопрос об использовании врачей и вспомогательного медицинского персонала с корыстной целью. Этот вопрос может иметь ряд аспектов. С этической точки зрения следует различать две группы неправильных врачебных диагнозов - врачебно-диагностические ошибки и ошибочные диагностические заключения, основанные на политических мотивах. Это касается не только известных во всем мире защитников прав человека - диссидентов, но и граждан, которые имели локальный конфликт с правительством, что заканчивалось насильственной госпитализацией без клинических показаний. Права пациента нарушались, также, когда медикаменты назначались с целью наказания а не по клиническим показаниям. Рассматривается вопрос о необходимости соблюдения врачебной тайны, Диагноз психического расстройства не должен быть основан на несоответствии взглядов и вероисповедования гражданина со взглядами и вероисповедованием, принятым в обществе.

**Ключевые слова:** *насильственная госпитализация, этический кодекс, эвтаназия, конфиденциальность*