

Fate of Medical Mal-Practice around Legally Defined Code of Conduct for Medical Professionals


Prof R K Sharma

Former Head , Deptt of Forensic Medicine , AIIMS New Delhi

Medico-legal consultant




What is medical malpractice

- ▶ when a medical professional deviates from standards in his or her profession, thereby causing injury to a patient.
 - ▶ Breach of ethics
 - ▶ wrongdoing
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Medicine was an art

- No cost was there in diagnosing initially
 - Slowly investigations started
 - Came ICU
 - Came CCU and ICU in all wards
 - Critical care became important
 - Cost factor of critical care
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Today Scenario

- Investigations are too much
- MRI cost Rs 5000
- Cost of machine 5 crore
- Cost of building hospital is 50-100 crores
- Cost of land is too high
- Staff requirement gone very high
- Compliance factor increased
- Latest machines / gadgets too costly



Cost of research

- ▶ Runs in billions of dollar
 - ▶ Vaccines making costly
 - ▶ Cancer markers / chemotherapy cost is high
 - ▶ High failure rate in research
 - ▶ Mostly investments are from pharma companies
 - ▶ No government subsidy in research
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From where all the money would come to run healthcare

- No Govt support
- Everyone wants free healthcare but does not want to pay
- Drugs prices are controlled
- Hue and cry when prices of healthcare increases




How to recover cost

- ▶ Limited time of patent
- ▶ Generic drug brings competition and price lowering
- ▶ Bribes doctors to prescribe branded drugs- free foreign air tickets , cash incentives
- ▶ Encourage longer duration of drugs
 - . Ask doctors to prescribe drugs when not needed.
 - Prescribe vaccines randomly
 - Prescribe longer regimes of chemotherapy
 - Vitamins and health products like Protienex are recommended irrationally.
 - Irrational use of cholesterol lowering drugs like statins
 - Misuse of drugs like Viagra




Investigative malpractice by doctors and hospitals

- ▶ Irrational and misuse of laboratory tests
 - ▶ X-ray , CT Scan and MRI recommendations without reasons
 - ▶ Irrational radiotherapy
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Malpractices in operations/ procedure

- ▶ Un-necessary bypass surgery
 - ▶ Angiography
 - ▶ Mis-use of cardiac stenting (Angioplasty)
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Referral practices- Unethical by doctors and hospitals

- Role of family physicians especially in Mumbai
- Cut demanded from specialist for referral
- Role of small nursing homes and hospitals
- Even rickshaw pullers / TSR drivers on pay roll
- Cuts offered by diagnostic labs and centres



End of life issues

- Allegation – kept on ventilator for long periods to make money
- Kept in ICU for long to make money.

- Problem is end of life issues are not clear.
- Law is not clear
- Medical law is not priority



Consent

- ▶ Big issue.
- ▶ Most of the time consent not take properly
- ▶ **Samira Kohli vs Dr. Prabha Manchanda & Anr on 16 January, 2008**

(A doctor has to seek and secure the consent of the patient before commencing a 'treatment' (the term 'treatment' includes surgery also). The consent so obtained should be real and valid, which means that : the patient should have the capacity and competence to consent; his consent should be voluntary; and his consent should be on the basis of adequate information concerning the nature of the treatment procedure, so that he knows what is consenting to.



Informed Consent

- Concept – not known to doctors
 - Not known to patients
 - Patients do not know rights
 - How to take high risk consent – doctors are not aware
 - Relatives problem in india
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➤ How to address this issue



Key parameters and role of NIPFP

- Education and awareness in medical community and patient education
- Ask Medical council of India to introduce medical law in curriculum
- Information in Public domain
- Legislation
- Ministry guidelines for hospitals , doctors and patients
- Separate Consumer information for medical profession.

Thanks

