



Ethics and Justice in Corona Pandemic: A Dark Cloud with Silver Lining

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I am not writing a didactic column but definitely an editorial that is disparate. The four pillars of medical ethics namely beneficence, non-maleficence, respect for person and justice do apply in pandemic with justice supervening all. The Corona virus, COVID 19 pandemic has affected entire world and shaken the health care delivery system globally. The accepted norms of health care delivery have been transformed to 'necessity'. It has affected all sectors of society across geopolitical boundaries virtually every individual being at risk irrespective of social economic status, ethnic origin and gender. The health care system is stretched beyond capacities and unless they are selectively protected they face threat of disproportionate suffering with enervation due to erosion of clinical care capacity. We all need to ensure that we don't denigrate the ethical principles of medicine. In the phases of pandemic the health care system passes through three phases: an initial preparatory phase, acute stage and the later crisis stage. In preparatory stage the health care force is intact and facilities like beds, equipment's (PPE, Ventilator etc.) are available whereas in acute stage the work force is in limited capacity although functional through strategic planning, this is later followed by crisis phase where the health care delivery system becomes overwhelmed and will have sparse capacity. Unfortunately, the current Corona crisis is not ephemeral and there is need for equanimity among health care professionals.

At some stage there will be bereft of drugs and other resources in a pandemic and therefore mandates prioritization of allocation of resources. While deciding how and to whom the resources be allocated the guiding principle is 'Preservation of the function of society'. This can only be achieved by giving priority to individuals who are essential and bestowed with responsibility of delivery of health care and other areas like maintaining law and order and many more key functionalities.

The golden rule for the allocation of resources is governed by principles of respect of individual, non-maleficence and justice. It is important to note that scarce goods are not to be distributed on the basis of purchasing power of individual or first come first basis or race or religion or any other discriminatory trait which is ethically irrelevant. They should be distributed so as to get maximum benefit, equitable justice and utility. I hope it dispels the decision process.

The pandemic planning has to make a balance between individual liberties and larger community interest when other discriminators are deemed ineffective and cannot be obdurate or conceived with ostracism. The planning is to be done by decision makers who are impartial and consistent in applying standards. The theory of utilitarianism advocates actions that promote overall happiness or pleasure and rejects actions that cause unhappiness or harm. It aims at greater sum of pleasures in a population to maximize human welfare.

Illustration

It is hypothesized that hydroxychloroquine is a prophylactic drug for COVID 19 infection. There is acute shortage of drug in the setting. Now decision to allocate hydroxyl chloroquine in CORONA pandemic is to make a choice between two set of groups:

- **Group A:** Hospitalized Patients, who are already sick before the epidemic break out, admitted in hospital for other medical ailments.
- **Group B:** People dwelling in their homes that are fit at the time of epidemic break.

In this scenario applying the deontology theory of ethics that emphasize that morality of the action should be based on whether the action itself is right or wrong under service of rules rather than

consequences of action. So, going by deontology it is physician's duty to help infected patient in hospitals and therefore allocate medicines to them.

Applying the utilitarianism theory, that promotes overall happiness the ultimate objective will be saving more lives by prescribing prophylactic medicine to healthy patients at their early stage of infection than co morbid seriously ill patients. If the utility is measured simply in terms of saving lives then limited resources will be used to treat largest number of patients even those with other advantages as it would cost the least per life saved. It is evident that a sole focusing on utilitarian approach will neglect poor, rural, female and deprived classes from health care. On the other hand if fairness prevails the question will arise for government treating healthiest individuals who have access to high paid health care. Now we need to emphasize that none of the above approach is wrong rather the best one pass muster of utilitarian approach and the one that is fairest of all.

Why doctors and health care professionals be protected in epidemic

The health care professionals are front line warriors in any epidemic. It is their privileged position that bestows certain obligations on them during need of hour and they have responded positively. They are governed by self-governing professional bodies to carry out their obligations in need of hour. Therefore, there is legitimate reason for providing them prophylaxis and treatment on preferential basis in scenario of limited resources. The risk taken by health care professionals are a matter of personal choice but any such obligation that departs from recognized obligation is liable for sanctions. They have obligations towards society and towards their own families.

Emergency verses routine surgeries

It is well established that emergency surgeries and medical emergencies are given top priority irrespective of stage of epidemic whether preparatory or acute or crisis phase.

The handling of non-emergency surgery is a gray area and the choice of decision does not mandate universal acceptance.

The classification of surgeries as elective and emergencies is not clear. According to one school of thought, elective surgery if not done on time could flare up as an emergency surgery in immediate future. In many surgical branches distinction between elective and emergency surgery is obscured which is further aggravated when the duration of epidemic is unpredictable like the one we are facing in Corona era. Then what should the surgeon or doctor do? It has been emphasized earlier that in a pandemic with limited resources

availability individual patient autonomy superseded by increasing the number of life saved or in other words protecting lives. In COVID 19 pandemic with no convincing treatment as on now, high rate of transformation and highly contagious virus affecting millions of people around the world, the suitability of operating elective surgery needs multifaceted deliberation by all stake holders. The goal of preparatory phase is to make provision for admission of expected Corona positive patient's staff. Now if elective surgery is undertaken it is clear that it would demean the purpose of preparations by hospitals with reduced bed availability in the near future for covid-19 infections, when those will be required by COVID positive patients. Moreover when dealing with a virus that is too unpredictable avoiding elective surgeries in the acute phase as well as a crisis phase where there is shortage of manpower and equipment's and therefore the top priority on the basis of rights should be given to COVID 19 positive patients rather than reserving beds for elective surgeries. This would affect revenues of hospitals but as lives are precious their loss is irreparable its preservation is paramount, the fact needs no justification and any obstacle in discharging this obligation on health care professional by law must give away.

Conclusion

It's not a sanctimonious as I am aware that it is impossible to bring everyone on the same platform of ethics as they are subjective and lack punitive action. The unifying principle has been which stress on the theory of Hippocratic Oath that follows 'first do no harm' (Latin- Primum Non Nocere), deontology consequentialism, virtue ethics and right based theories. The prudent approach therefore will be to go with ones inner consciousness while making decisions and policies in times of catastrophe like COVID 19 bearing in mind not to be ignorant towards ethics particularly justice.

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