Medicine and Morality

Michael Cheng-tek Tai

The preamble to the Constitution of the World Health Organization states that the purpose of medicine is to promote complete physical, mental and social wellbeing. Since medicine promotes health over ill and good over evil, it cannot be amoral, but moralistic. In other words, medicine and morality must go side by side. The purpose of this paper is to show that medicine without morality can be crippling and even blinding. Besides arguing why medical morality is needed, four case studies (two western and two Taiwanese) are also discussed. Health care is undergoing changes that are more rapid and more dramatic than ever before including advances in medical technologies and changes in governmental policies such as medical insurance. Never before has there been such a need for careful reflection of the impact of these changes upon health-care quality and medical ethics.

Introduction

Relating medicine to morality is nothing new. Since Hippocrates' time 2500 years ago, morality has been an integral part of medical consideration. Although its magnitude has been overlooked at times, the rapid development of medical technology in the twentieth century has motivated the rediscovery of the relevance of morality to medical practice. In the past few decades, biomedical ethics has become important in medicine. Today, more than two hundred articles examining the issues related to biomedical ethics, authored by physicians, ethicists, lawyers, theologians, philosophers, anthropologists, sociologists and many others, appear in learned journals each month. Such a rapid outburst of activity proves that biomedical ethics cannot be ignored. Medicine, without morality can be crippling, even blinding.

There are many reasons for this re-emphasis of biomedical ethics, the most basic being the rising conciousness of human dignity. Medicine is the art of healing. Moreover, the healing process occurs not within a machine, but within persons with feelings and rights. The more civilized a society is, the more it pays attention to the principles of medical ethics. The more democratic a country is, the more it promotes the discussion of biomedical ethics. The less respectful of human rights a country is, the less it talks about medical ethics. Biomedical ethics today are led by physicians and ethicists of the most civilized countries. Human dignity and rights are never the monopoly of any rulers or governments, but rather, the consecrated and inviolable gift of the Creator to mankind. Countries which ridicule medical ethics usually treat human life as a commodity, subject to the mercy of the ruler.

The discussion of medical ethics in Taiwan has been very recent and there are

many physicians there who are reluctant to confront and think critically about medico-moral issues. Three uncritical approaches are common: pontification, abstention and skepticism. Pontificators believe critical medical ethics are unnecessary because medicine operates in its own right. Abstainers find it too difficult. Skeptics find medical ethics either impossible in principle, useless and irrelevant in practice, or a private matter for the individual and his conscience. Despite different opinions, the weight of biomedical ethics and its importance will become only heavier in days to come.

Some, like abstainers, are confused by terms such as morality and ethics. Let us, therefore, clarify their differences: "ethics" and "morality", and "ethical" and "moral" are often used as synonymous pairs though the terms have different meanings. Ethics concerns itself with moral judgments regarding rights and good and the standards and theories implicit in such judgments. These judgments and our consequent behavior are referred to as morality. Thus, ethics is the study of morality which can be descriptive, normative, or analytical. Simply stated, ethics tries to identify, clarify, and evaluate our standards for judging right from wrong, good from bad.