

COMMENTS

The importance of patient privacy during a clinical examination

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I had an important professional matter to discuss with a senior surgeon who specialises in cancer care. The discussion lasted for about five minutes, after which I left the room. Being a physician myself, I was grateful that the busy surgeon was kind enough to answer the question that had kept me preoccupied. Only later did it occur to me that the surgeon was performing a rectal examination on a patient while talking to me. It did not bother the surgeon, nor did it bother me. My presence did not seem to bother the patient either. Or did it?

The notion of patient privacy is usually limited to the rights of individuals regarding their personal health information being used or disclosed without their consent. The few guidelines about patient privacy available on the Internet are essentially about maintaining the privacy of a patient's health information under the Health Insurance Portability and Accountability Act, which was passed in the US in 1996. It provides for the privacy of an individual's health information, especially when the information is transmitted electronically. With the increasing use of information technology in health care in India and the outsourcing of business processes to India, we need to reconsider the right to medical privacy and the protection of this right in terms of who can or cannot access sensitive health information.

However, the privacy I am referring to here is the personal privacy and dignity of an individual while being examined clinically by a health professional. How much importance is given to a patient's privacy in India? The Constitution of India does not confer, in express terms, any constitutional guarantee to the right to privacy. While the right to privacy has been enumerated by the courts as one of the rights available to persons under Article 21 of the Constitution, the courts have held that it is not absolute. The Supreme Court has stated that in the doctor-patient relationship, the most important aspect is the doctor's duty of maintaining secrecy. Doctors are morally and ethically bound to maintain confidentiality (1). Protecting a patient's privacy and dignity, as discussed in this article, are however not referred to in legal terms.

As medical professionals, we generally do not give much thought to patients' feelings, especially with regard to their personal privacy. What could be the reasons for this apparent lack of sensitivity? Medical students in India are not formally taught about doctor-patient interactions. Ignorance among both doctors and patients about patient rights, and the asymmetry of information between them has ensured

that patients do not have a voice of their own. A paucity of financial resources and infrastructure in public hospitals often preclude the separate examination of one patient at a time. An unmanageably high patient load is another driving force for cascading patient clinical examinations in the outpatient department, as a result of which patient privacy is inadvertently sacrificed. It is unfortunate that in many cases, privacy is also tied to the patient's financial status and is non-existent as one goes down the socio-economic ladder. Many times doctors adopt an authoritarian approach when interacting with patients. It would not be surprising to find that female patients in particular bear the brunt of the doctor's dominance.

Non-governmental agencies working on issues of patient privacy are active in some countries. The Coalition for Patient Privacy, for example, is a network of organisations in the US that tries to influence the government in protecting patient privacy. Such entities mainly focus on determining who can access sensitive medical information, and more such groups should be encouraged. Detailed information about what a patient can do if she/he thinks that privacy has been violated is publicly made available in some countries (2). In India, the Association for Consumers' Action on Safety and Health believes that patients are not merely consumers (3). The government should have a clear mandate about protecting patient privacy and increasing transparency in health care.

Good doctor-patient interactions and communication skills are as important as honing one's clinical skills. They should be taught to medical students in much the same way a dedicated teacher explains the technique of a complicated surgery to students. The responsibility for protecting a patient's privacy and dignity does not lie with one individual or group, but at every level of the health system. Being humane and sensitive to patients rather than grappling with revised definitions of the doctor-patient relationship will help. A patient-centric approach that focuses on the patient's experiences should be the norm. It is time we in India continually sensitised our medical graduates to this important aspect of patient care. Changes can slowly be brought about with a sincere effort.

References

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