

patient may be capable of consent for other civil contracts but not in a position to give a valid consent for a sexual relationship with the doctor, due to transference issues. (This is grey only from a legal viewpoint, not an ethical viewpoint).

As stated in our original paper we excluded sexual harassment, sexual molestation and rape from the purview of our paper as we felt that there is no need to generate an ethical debate on why it is unacceptable. Even though offenders who commit these crimes (if they do admit to them), tend to rationalise their behaviour and say, "The no meant yes," we all know and accept that these acts are crimes. We hope the results of our study will raise awareness on why, in the context of sexual contact in a doctor-patient relationship, a patient's "yes" should still mean a "no".

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References

1. Bhan A. Boundary violations in patient care: need for evolving professional practice standards and training. *Indian J Med Ethics*. 2010 Jul-Sep;7(3):192.
2. Simon Kurpad S, Machado T, Galgali RB. Is there an elephant in the room? Boundary violations in the doctor patient relationship in India. *Indian J Med Ethics*. 2010 Apr- Jun;7 (2),76-81.
3. Mahapatra D. Except adultery, consensual sex no offence, says SC. *The Times of India* [Internet]. 2010 Apr 30 [cited 2011 Mar 1];Collections: [about 2 screens]. Available from: http://articles.timesofindia.indiatimes.com/2010-04-30/india/28131106_1_adultery-offence-notions-of-social-morality
4. Nadelson C, Notman M T. Boundaries in the doctor patient relationship. *Theoretical Med Bioeth*. 2002; 23(3):191-201.
5. Galletly CA. Crossing professional boundaries in medicine: the slippery slope to patient sexual exploitation. *Med J Aust*. 2004 Oct 4;181(7):380-3.

Product endorsement by medical practitioners

The National Bioethics Conference felicitated Sunil Pandya, Vasantha Muthuswamy and Chandra Mohan Gulhati for their work in medical ethics (1). Such recognition to deserving mentors will infuse life into the field and project the nobility of medicine in the eyes of the local as well as the international medical community.

We are living in a world where incentives and kickbacks play an important role in the marketing strategy of corporates. Cricket players are sold in the market for their entertainment value, and they abandon the spirit of sport to play for the sake of money. Medical professionals are no different. Their life-saving skills and their medical eminence prompt companies to ask for their endorsement (2). Doctors appear in the media making false claims about medical products, toothpastes and skin creams. Some of them are office bearers of medical associations.

In this world, everything is sold, from medical seats to medical equipment. There are clever sellers and eager buyers in the market. In a world where money seems to laminate the values of life, ethical practitioners bring a ray of hope to us.

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References

1. NBC felicitations. Dr Vasantha Muthuswamy, Dr C M Gulhati, Dr Sunil Krishnalal Pandya. *Ind J Med Ethics*. 2011 Jan-Mar; 8(1):20-2.
2. Thomas G. Medical Council of India and the Indian Medical Association: uneasy relations. *Ind J Med Ethics*. 2011 Jan-Mar; 8(1):2

Iatrogenic STD inoculation study

Susan M Reverby has unearthed a glaring example of unethical research, carried out by the United States Public Health Service and co-sponsored by the National Institutes of Health, the Pan American Health Sanitary Bureau and the Guatemalan government in 1946-48 (1). In this study of the effectiveness of penicillin in syphilis and gonorrhoea, 700 Guatemalan nationals including prison inmates, mentally challenged people and military personnel were intentionally infected with various sexually transmitted diseases including syphilis and gonococcal infection. Prison inmates were allowed to have sex with syphilis-infected prostitutes paid by US health officials. There are no records on whether informed consent was obtained from the subjects participating in the trial.

Such studies are carried out very often in both developed and developing nations. The most widely discussed American research experiment that violated ethical codes was the Tuskegee study. This study consisted of observing the natural course of syphilis exclusively in African-Americans between 1932 and 1972, and continued even after penicillin was shown to be effective in treating this disease. The subjects of the study did not receive any treatment for their condition, were unaware of the nature of the experiment, and were misled about the nature and purpose of repeated painful and risky procedures, including lumbar punctures, for four long decades (2). The United States Public Health Service funded this research project, in part. Though the above study was never published, a few investigators have been able to get their papers published in indexed journals (3).

It would be interesting to know the future course of legal action against the investigators in the Guatemala trial. Perhaps such cases of gross unethical practice should be tried in the International Court of Law.

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References

1. McNeil DG Jr. US apologizes for syphilis tests in Guatemala. *The New York Times* [Internet]. 2010 Oct 1. [cited 2011 Feb 26]. Available from: <http://www.nytimes.com/2010/10/02/health/research/02infect.html>
2. Curran WJ. The Tuskegee syphilis study. *N Engl J Med*, 1973 Oct 4; 289(14):730-1
3. Rockwell DH, Yobs AR, Moore MB Jr. The Tuskegee study of untreated syphilis: the 30th year of observation. *Arch Intern Med*. 1964 Dec; 114:792-8.