

**Pakistan Journal of Medical Ethics**

Thank you very much for your wishes and I am sure, with the common problems and common struggle, we will manage to change the current state of affairs from bad to good.

We saw only one issue (December 1995) of *Issues in Medical Ethics*. Let me confess, we came up with the idea of our journal after seeing that issue. We do not have any of your previous issues and do not receive them too. We will be extremely delighted to be on the mailing list and request you to send copies of earlier issues.

I have sent some copies of our Journal. We have borrowed some ideas from your journal and I thank you for your offer to let us use material from it in future. We will certainly acknowledge it. You can also use any material from our Journal.

I once again reiterate our desire to share our expertise and hope that we can come up with a common goal for the region in the context of medical ethics.

With all the best wishes and looking forward to a fruitful cooperation and friendship,

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**Disregard for medical ethics despite protest**

Let me share two depressing experiences about the disregard for medical ethics shown by doctors despite my protest against unethical practices.

# VOX POPULI

**Disastrous 'electro-magneto-homeo-therapy'**

A pregnant woman was killed during an abortion in a make-shift clinic in Okhla's Harkesh Nagar in mid-May. Dr. Yashwant Kumar Jha, who runs Jagdamba Clinic in the colony, was arrested and released on bail by a city court. The 'doctor' holds a bachelor's degree in a quaint stream of medicine called electro-magneto-homeo-therapy in addition to being a Registered Medical Practitioner and BMS.

This is the third such reported case in recent months where innocent patients have fallen victims to quacks in various

(1) Ms. Medha Patkar was on indefinite fast three years back along with a local Adivasi activist, to oppose the Sardar Sarovar dam on the Narmada river. Volunteer-doctors were doing their duty in a relay to monitor the health of these two activists. I took over this task on 16th June, the 14<sup>th</sup> day of the fast. The health of both activists caused no alarm, yet the government decided to arrest them and forcibly give them intravenous glucose. The police swooped in past midnight on 16th June and forcibly arrested them and their followers. I was allowed to accompany them to the Bombay Hospital. In the hospital, I argued with the resident doctor that it is unethical to forcibly administer intravenous glucose to those on fast. The doctor did not seem to know this simple fact. He later defended his attempt at forcibly feeding Ms. Medha Patkar by saying that her life was in danger from increased concentration of serum potassium. I argued that the serum potassium must first be shown to be abnormally high. This was not done for 12 hours.

As per the guidelines of the World Medical Association, forceful feeding can be justified only when the person on fast is not in a state of consciousness to give consent or otherwise for medical intervention to save his / her life. Here, the persons on fast were fully conscious and there was no medical emergency. Yet the doctors chose to oblige the government by providing medical justification for forcibly injecting glucose into the protesters even though I pointed out that this act violated professional ethics.

(2) The Pune branch of the Indian Medical Association organises annual refresher programmes for its members.

localities. In earlier cases the womb of a woman was pulled out along with the placenta at Khera Khud village in north-west Delhi. In another case the intestines were removed during operation.

The latest victim is 35-year-old Gayatri Devi. She consulted the 'doctor' on May 13 to get rid of her unwanted one-and-a-half month old pregnancy, saying that she already had three children and could not afford to feed another mouth. The 'doctor' called her at 12 p.m. the next day, assuring her that she would be discharged immediately after the operation. Instead, her body was discovered in the clinic at around 1 p.m. The

In the course of such a programme in 1995, during the talk on obesity in childhood, a number of slides of fully naked children suffering from obesity, were shown by the lecturer, a renowned endocrinologist from Bombay, without masking the identity of these children. Some of them were grown-up, preadolescents. While it was necessary to show the naked physique to demonstrate obesity in these children, the identity of these unfortunate children should have been concealed by masking their faces. This was not done. None of the 300 or more doctors in the audience protested in any way, then or later. After the programme, I met one of the office-bearers and pointed out the violation of the elementary ethical principles by such a display of photographs of patients. The response was not encouraging. I wrote a letter of protest to the endocrinologist and also a similar letter for publication - to the monthly newsletter of the IMA, Pune. I asked: 'Would we have liked our own children to be shown on the screen thus without concealing their identities? . . . The organisers were of course, helpless in this case. But in future, can all researchers be requested to follow the basic ethical norms in the display of photographs of patients?'

The editor of the newsletter did not publish this letter. What disturbed me most was the unwillingness to improve, even when the unethical practice was pointed out.

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operation was yet to be performed. She died apparently due to the administration of a wrong medicine as fresh injection marks and blood spots were seen on both arms of the victim. The initial autopsy report indicated that she had died of shock.

(Readers are also advised to study Dr. Ramdas Ambulgekar's essay elsewhere in this issue. Editor)

**Striving officiously to keep alive <sup>2</sup>**

Gillon comments on the case of Thomas Creedon, aged three, severely brain damaged, who was kept alive by artificial feeding and hydration even after his