EDITORIAL

Doctors and violence

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Violence against doctors is in the news with increasing frequency. Many reports concern medical professionals being roughed up, even killed, by patients' disgruntled relatives. (1) A new dimension was added to such incidents recently.

On August 25, Shiv Sena leader Anand Dighe was admitted to Thane's Singhania Hospital following injury in a highway accident. Singhania is the biggest private sector hospital in this Mumbai suburb, with speciality services otherwise not available in the area. Mr Dighe was stable following an operation for a leg fracture but a few hours after the surgery he suffered cardio-respiratory arrest - believed to be a sudden cardiac event or a pulmonary embolus - and died. Following news of his death a mob of Sena followers went on a rampage, destroying all furniture and equipment. Staff and patients fled the premises while a small posse of policemen looked on. The damage to the hospital is estimated to be around Rs 10 crore. The management is considering shutting the hospital down permanently. (2)

The rampage went far beyond a spontaneous response to what may have been perceived as a sudden unexplained death - though even spontaneous violence cannot be condoned. The Shiv Sena has regularly flexed its muscles in this fashion - and got away with it. Many of its leaders derive their strength from such lumpen behaviour. The mob may have been incited by a section of the leadership to settle scores with the hospital's management, and also to assert the party's authority.

The medical community's reaction

Many medical organisations declared that medicine had become a 'dangerous' profession, and doctors should be provided 'security'. Some stated that 'doctors should stop treating politicians'. Interestingly, the event registered as an attack on doctors as much as it was on Singhania hospital, a corporate body. This is a reflection of the strong economic bond that has emerged in recent decade between corporate bodies and doctors.

Politicians regularly take to violence to demonstrate their clout, a trend which has reached grotesque forms with the increasing criminalisation of politics. While we must condemn such actions, is it a sufficient response?

The doctor-politician nexus

First, we should remember that many of our colleagues bend over backwards to please political bigwigs to maintain their positions, or for personal gain. Getting ICU admission for a cardiac problem has become such a standard ploy of politicians avoiding the law, it may soon be recognised as a medical syndrome. Surely this is done with doctors' collusion. When diamond merchant Bharat Shah - under arrest but in a Mumbai five-star hospital - threw a birthday party in the hospital, surely it was with the management's support. Some time ago, several doctors from the JJ Group of Hospitals in Mumbai were indicted for helping criminals escape the law. One can also see the broader doctor-politician nexus in the running of private medical colleges. There are many other examples. For all the talk of 'boycotting politicians', many of us are in fact colluding with them in illegal activity.

Such complicity can of course be dismissed as a part of a larger indifference by civil society towards the criminalisation of politics. But as members of a profession which is supposed to respond to human suffering, we have a special social responsibility. It has often been argued in the pages of this journal that our ethical responsibilities extend beyond the doctor-patient relationship. It is our ethical responsibility to fight such political violence. We must also be clear that in opposing the 'criminalisation of politics' we don't shun 'politics' in toto. Any meaningful change in the health care system can only come from political changes. The medical profession in many parts of the world has a glorious record of active resistance to corruption and oppression. It can serve as an example to the rest of society.

Starting small

It may be asking too much of doctors to be so active, given the present state of affairs. We can begin small, by promoting ethical and honest voices from our profession. We can also increase our credibility by condemning colleagues who collude with criminal politicians.

As this edit is being written comes the news of the terrorist bombings in the US. Things may snowball into a further vortex of violence. Violence dominates our lives as never before. Again it is our ethical responsibility to respond. A violent society is detrimental to the practice of humane medicine; it negates all the 'achievements' of modern medicine. Going back to the Singhania hospital incident, the medical profession must do more than just condemn such violence; it must reflect on the ethics of its own practice. For doctors, this means not perpetrating violence through their practice, through the medical system or through collusion with the perpetrators of violence. It also means practising an active social ethics, being at the forefront of preventing violence and caring for all victims of violence, irrespective of their crimes and ideological affiliations.

References

- 1. Bal Arun. A doctor's murder. Issues in Medical Ethics 2001: 39.
- 2. Anonymous. Police watch as Sena men go on rampage in Thane. Indian Express, August 28, 2001.

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