An insider's practical dream

GAYATHRI PRABHU

Kamal Kumar Mahawar, *The ethical doctor*, Harper Collins India, 2016, Paperback, 272 pages. Rs 234, ISBN-13:978-9352640096

The medical profession, more than any other, has had to constantly gaze at itself in the mirror of "ethics", whether in praxis or in the haloed (often antiquated) oaths taken, even as it grapples with being a sustainable industry and business. A constant, willful, collective neglect of realistically addressing this paradox has created deep fault-lines in the medical profession, and this becomes the discursive topography inhabited and explored by Dr Kamal Kumar Mahawar in *The ethical doctor*.

Written in straightforward journalistic prose, the book aims to address a general audience but is very aware of the diversity of opinions and perspectives within the medical profession that needs to be accounted for. In each of the 12 short chapters, the author takes up a pertinent issue in the daily practice of medicine in India – for instance, the system of referrals and "cut practice", unnecessary tests and treatment, system of touts,involvement of drug companies, quacks posing as doctors – and addresses the gap between expectations and actual practice.

Dr Mahawar, who studied medicine in India and is a bariatric surgeon in the United Kingdom, brackets off his personal choices and positioning at the beginning of the book; so that the debate can be entirely about the field. A co-founder of WebmedCentral, he brings his knowledge of medical practice and research in other countries for a comparative perspective. There is no doubt that being both an insider and outsider to the Indian medical industry gives Dr Mahawar the space and latitude to be sympathetic as well as critical, as he gives us "a snapshot of the healthcare system in India".

What does it mean to be "an ethical doctor" in India today? What does it mean to be a patient or caregiver who expects doctors to function entirely with the patient's best interest in mind? The only way to even begin to answer these questions

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is to rethink the nuances and baggage of the "ethical" and to bring the pragmatic to the discussion, which is what this author sets out to do.

The writing style reveals a clear thought process. Each time an issue is taken up, there is an assessment of the lay of the land, the practices currently in use; newspaper reports of various case studies and investigations are constantly referenced, at times even dramatised in a fictional mode. Dr Mahawar's approach to what ails and sustains the medical education, practice, and industry in India has a diagnostic tone. Within each sphere of his close scrutiny, as with the overall book, the intention is to be prescriptive. As much as the author tries to take into account the need for introspection and personal choices, the verdict for the profession is quite damming - the mapping of the last chapter "The way forward" would suffice as an example. The reforms that Dr Mahawar recommends are at every level – the Medical Council of India, the governmental policies, clinical and research regulations, drug regulatory bodies, private hospital practices. This is when one realises how arduous, almost impossible, it becomes to talk about what ethical medicine means at the level of the individual doctor or patient.

The author estimates that around 39 million families are pushed into poverty every year in India as a result of mounting healthcare expenses incurred. The reader is left in no doubt about the many vested interests, mainly financial, deeply entrenched in the medical system, and how herculean any measurable change is bound to be.

Dr Mahawar is right in insisting that many of these questions be tackled directly in the medical curriculum – the complete focus on science at the cost of the humanities has already precluded any conversation about a complex ethical schema for young doctors. Similarly, one agrees with the author that patients need to be introspective too about the choices they make when they "shop around" and decide on "famous" doctors without considering what goes into the making of this fame.

Considering that we are grappling with a plethora of dissenting voices and ethical choices, both institutional and individual, this book is a brave, prescient, and compelling argument for at least considering the idea of change, if not actually executing it. If, as patients, we have felt that everyone is out to make money at our expense when we fall ill, then the author confirms some of our fears, and thinks we pay 20% to 40% more than we should. And if, as doctors, we have felt pressurised to join the referral system and meet budgets given

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to us by institutions, this book gives us a way to think about personal ethics within professional bounds.

Even as the reader wants to agree with the author on the importance of all the recommended reforms, many of them concrete and specific, the real possibility of execution on such a large scale seems unlikely and gives a utopian tint to the project. Dr Mahawar anticipates and counters this by insisting "it is a practical dream that can be transformed into reality if we all worked towards it with a firm sense of purpose". For all of our sakes, let's hope this is true.

Towards a holistic understanding of pain

MANASA GOPAKUMAR

Siby K George and P G Jung, Editors, *Cultural ontology of the self in pain*, Springer India, 2016, 288 pages (Hardcover) | INR 6989.0 | ISBN 978-81-322-2600-0.

Cultural Ontology of the Self in Pain, an edited volume by Siby K George and P G Jung, seeks to release one of the most fundamental concepts of human existence—pain—from the clutches of its reductive, physicalist, and mechanistic understanding in modern medicine. This anthology consisting of fourteen papers follows squarely in the tradition of medical humanities, which aims to provide a holistic understanding of pain and suffering through narratives grounded in diverse cultural and social contexts, thereby fostering a more humane and compassionate attitude towards pain. The uniqueness of this volume lies in its contextualisation of this topic in the social and political history of India.

Heavily grounded in phenomenology and existentialism, this volume conceives of the self as being shaped by social, political, historical, religious, and cultural forces. As against the essentialist and substantivist notions of self that underlie modern medicine, this volume endorses an antiessentialist notion of self, one where the self is seen as the non-substantial way of being or relating meaningfully to the world. Drawing on the pioneering works of Mark Zborowski, Elaine Scarry, and David Morris, this anthology makes several crucial interventions in the emerging literature on pain. Firstly, unlike the previous literature, this volume does not reduce cultural ontology to mere cultural analysis, nor does it emphasise cultural differences in the experience of pain. Rather, the focus is on the non-substantial self which cannot be culturally neutral, and consequently, on pain experiences shaped by cultural and social forces outside of one's control. Secondly, the volume highlights the ambiguous nature of pain-while pain is traumatic, harrowing, and aversive in its

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extremes, it is also inescapable, fundamental, and necessary for being human. At once self-destructive and self-formative, pain is absolutely central to, and yet, disruptive of human existence. This line of thought, along with the emphasis on the positive role of pain in human life, has been pursued in a number of essays in this volume, including those by Siby George, John Russon, Shannon Hoff, Kirsten Jacobson, and Roman Meinhold. Thirdly, this volume is enriched by an interdisciplinary and multiparadigmatic approach as it draws from Buddhism (Russon), Gandhian philosophy (Douglas Allen), ancient and modern western philosophy (Jung), phenomenology (George, Jacobson, Hoff), analytic philosophy (Phil Hutchinson), literature (Daniel M Becker, David B Morris), mythology (Meinhold), feminism (Shefali Moitra), sociology (R Umamaheshwari) and politics (Malem Ningthouja, Parinitha Shetty). It features an eclectic collection of papers on subjects ranging from Buddhism to state sponsored torture. At times, the anthology is diverse to the point of lacking in consistency and continuity, which is understandable, given that this is an emerging field of study. However, the editors have beautifully woven these diverse strands into a narrative. The strength of this volume lies in the fact that it is both interdisciplinary and theoretically grounded, which is, in fact, essential in a volume seeking to diversify the narratives of pain while also cementing a new area of research in the process.

The distinctive feature of this volume is its focus on the sociopolitical context in India and the different kinds of pain that are experienced in a shared manner in such a context. However, this is also one of the major shortcomings of the volume. As the editors duly acknowledge, the question of caste is curiously missing in the volume. The omission is glaring, not only because there are other papers in the volume that discuss the structural silencing of certain kinds of pain in society (Umamaheshwari), but also because there is an existing and emergent body of Dalit literature and scholarship, bringing to light not just repressed narratives of pain, but also theoretical and philosophical insights on the phenomenology of pain among the Dalits. Caste, nevertheless, finds a shadow presence in Umamaheshwari's paper on marginalised communities and silenced narratives.

While the volume is a critique of modern medicine's understanding of pain, the tone is more or less amicable,