

Doctors and sexual assault

After seeing your story 'Sexual Assault: the role of the examining doctor', I have a suggestion to make. Would it be possible for your journal to also examine the issue of doctors who sexually violate their patients during physical examinations?

I speak from personal experience. My doctor misused his physical examination and completely destroyed my trust. He did this under the guise of an "examination technique" (I must make it clear that there was no sexual penetration), thereby confusing me further. I kept asking myself if I was being oversensitive / critical / paranoid.

I belong to a privileged and upperclass family. I developed tuberculosis some years ago and went to my family doctor who also happens to be my uncle.

On the second visit to my doctor I was assaulted in a manner which left me completely confused as to whether it was part of the examination or whether I was being sexually violated. On my third visit my initial reaction was just to get out of the clinic. My fears that I was being sexually assaulted were confirmed when I walked out of the examining room and found that I was the only one in the clinic and that the main door was locked.

In one respect your article did cover part of my experience. After the last assault I went immediately to a lady general practitioner in my neighbourhood to verify whether the 'method' chosen for examination by my doctor was really necessary. While telling her what happened I momentarily broke down. Her reaction was: "Far God's sake stop all this crying." At the time her only interest was to know the name of the doctor. After I told her, she said, "I don't know him," and dismissed me. I had the feeling that it was a piece of gossip as far as she was concerned.

In retrospect I thank her for her attitude. Her reaction toughened me for the coming months which as I'm sure you know are terrible as the victim invariably replays the scene and the sense of anger coupled with frustration is as fresh as it was the first time. I still do not know what action I could have taken since the onus of proof is invariably on the woman and this means revealing details which make the emotional recovery that much longer.

I believe it is essential to investigate this trauma that I am sure many women undergo. It is made all the more unfortunate by the fact that even after an assault the patient often goes back to the same doctor because of 'faith' in his healing abilities or the belief that a patient's accusation will not hold much water against the doctor's respectable position. Either way it is rare for the doctor to be exposed or for any action to be taken against him.

Is there some way in which your magazine could tackle a subject like this? Is there any way for a victim to approach medical authorities without the accompanying trauma that a police investigation ensures?

V K Ram, *via the internet*

Reference:

D' Souza Lalitha. Sexual assault: the role of the examining doctor. *Issues in Medical Ethics*. 1998; VI (4); 10-

Doctors and human rights: many issues

Your editorial on the medical profession and human rights took a narrow view of the question of medical ethics. It tended to stress instances in which a doctor has abetted

or been a party to human rights violations. It missed certain other ethical issues which deserve mention.

Euthanasia or mercy killing has long been the punching bag of ethicologists. The question of playing God to alleviate a patient's suffering

continues to spark off debate. The ethics involved in letting a seriously injured 'medico-legal case' lie in the hospital's casualty department till police formalities are completed needs a rethink. Is it ethical to allow legal interference in patient care?

No debate on medical ethics can be complete without a mention of prenatal gender determination. While some believe that reporting of foetal sex is unethical on the grounds that it promotes foeticide, others lay great store by the patient's 'right to know', perhaps even 'to choose'.

The aforementioned instances are commonly encountered by medical professionals. Decisions in their regard should come from the application of common sense and concern for the individual patient, not from formal study of the subject.

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Reference:

Pai, Sanjay. The medical profession and human rights. *Issues in Medical Ethics*, 1998; (VI) 4: 105

Fighting medical negligence

I am writing this for the information of those who plan to file or who have just filed medical negligence cases. You have a chance of winning if there is direct evidence in your favour: if a forceps was left inside the operated patient, the wrong part removed, the wrong blood group given, and so on. In the absence of such direct evidence, you have to prove the doctors' negligence. This will be an uphill task with almost no chance of winning.

I filed a complaint with a medical council, the so-called body of medical experts. During the hearing of my case they did not allow me to have an advocate. They did not examine a single medical paper before deciding the case. Professional sympathy and contacts go against the complainant, here. Facts have no value. How will an ordinary man to argue a medical case