

pregnancy. It would defeat the purpose of conveying a foetus' DMD carrier status to the expecting parents if they are legally prohibited from terminating the pregnancy by the provisions of the MTP Act.

We would like to assert that we do not support discrimination against any person due to disability. We are only pointing out that the MTP Act permits medical termination if the foetus is found to be suffering from various disabilities, including DMD. This permission should be extended to the foetus with carrier status of such conditions.

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There are no submissions of similar work or references to a previous submission.

'Note

Even otherwise, the PC-PNDT Act has not been able to check the declining child sex ratio. According to the last three census reports, the child sex ratio (females/1000 males) was 945 in 1991, 927 in 2001, and 919 in 2011 (11, 12). Therefore, the suggested change will not affect the effectiveness of the PC-PNDT Act.

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Can doctors advise beyond the purely professional?

HIMMATRAO SALUBA BAWASKAR

Abstract

A 25-year-old woman, six-months pregnant, came to me in great distress. She said she had been happily married for five years. Unexpectedly, a minor accidental injury to her husband had revealed that he had been suffering from a brain tumour since 2012. He had been operated on at the time but the tumour had subsequently metastasised and had required further surgery. His condition had not been revealed to the wife either at the time of the marriage or later. The husband and his family were unapologetic about the non-disclosure. When the wife confronted her husband's regular attending neurosurgeon, asking why he

had not counselled the patient against marriage, he had argued that it was not his responsibility to do so. The issue this case raises is: Is it not the duty of a responsible treating doctor towards a patient with a life-threatening condition and his parents, to counsel them regarding marriage? A doctor occupies the position of a respected adviser and his counsel would surely be considered seriously.

A 25-year-old woman, six-months pregnant, came to me in great distress. She told me she had married a mechanical engineer in 2014 and been very happy with her husband and his family, until four days earlier. Her husband had an accidental fall from his scooter and became semiconscious. He was admitted to a tertiary care hospital and had undergone perfusion MRI, suspecting a big haematoma. His regular doctor being on leave, he was seen by another available neurologist. During history taking by a resident doctor, her husband asked her to stay outside the room, but she could hear the history. The patient informed the resident doctor that he had been detected with grade IV Glioblastoma multiforme in the year

Author: **Himmatrao Saluba Bawaskar** (himmatbawaskar@rediffmail.com), Bawaskar Hospital and Clinical Research Centre, Mahad, Raigad, Maharashtra 402 301 INDIA.

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2012. He had undergone a craniotomy for removal of the tumour, followed by chemotherapy and radiation. He had undergone perfusion MRI every year, at the same hospital, under the care of a senior neurosurgeon. In 2018, his MRI showed a metastatic brain tumour with big cystic changes, with deviation of midline and brain oedema, and he was operated on to remove part of the tumour.

The patient's wife and her family had deliberately not been informed about his condition by the husband and his relatives. His wife was shocked and heartbroken at not being informed about such a life-threatening disease. Her husband refused my invitation to meet him and discuss the situation.

After the operation, the wife and her relatives asked the surgeon why he had not advised the patient against marriage after the initial diagnosis, saying her life would have been very different had he counselled the patient and his parents regarding marriage, as a socially responsible and ethical doctor. He retorted that he knew his social responsibility well. The matter concerned only the patient and his parents, not himself. He said he had performed more than 20,000 brain surgeries with no scientific publications found in Medline, and it was impossible to counsel every patient. He asked how she had not noticed such a large scar on her husband's cranium and inquired about it. She said she had asked, but her

husband said he had sustained an injury to the scalp in a road accident. The husband and his family were unrepentant. His highly educated sister asked why a patient with malignant cancer should not marry and have a little happiness. When I requested the surgeon to discuss this ethical issue with me, he had no reply.

Out of professional curiosity, I asked another neurosurgeon from the same institution whether he believed in counselling young patients with life-threatening conditions on the issue of marriage. He replied that he always counsels his young patients regarding marriage. To my astonishment, when I confronted the patient's neurosurgeon with this, he confided that though they both belonged to the same institution, they never discuss their cases with each other due to professional rivalry!

My appeal to *IJME* readers is this: Is it not the duty of a treating doctor towards a patient with a malignant tumour, and his parents, to counsel them regarding marriage? This patient had been in this neurosurgeon's care for several years and he was regarded by the family as an esteemed adviser. Had he not had such a mechanical, commercial approach, they would surely have respected his advice not to marry, or not to marry without disclosing his condition to a possible partner.

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