

## Encompassing medical ethics within the medical humanities?

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As medicine becomes ever more technologically advanced, “human skills” are becoming increasingly important. Medical ethics or bioethics and medical humanities may have been formally introduced into the curriculum about the same time around the 1970s in certain developed nations. However, in many developing nations, medical/health humanities is much more recent and only came into prominence during the first two decades of the twenty-first century. The term “bioethics” was coined by Potter in 1970 [1]. During the ensuing five decades, however, medical ethics has become the dominant discipline of the two, globally. Medical ethics is more well-known and has greater resources allotted. Medical ethics may be a less radical and more comfortable concept and the study of ethical issues in medical practice may not challenge the traditional knowledge and power structures inherent in medicine. While we have a Centre for Bioethics and Humanities at my present university, I feel a more logical and correct name would be Centre for Humanities and Bioethics, emphasising the greater scope of the humanities.

In the year 2000, in an editorial in *Medical Humanities*, the authors mentioned that the first issue of the journal was launched as a special edition of the *Journal of Medical Ethics*, conveying the impression that the humanities are a subject of or a component of medical ethics [2]. Medical ethics may only be one of a variety of disciplines that constitute the medical/health humanities. Medical humanities deals with different interactions between humans including that between the patient and the healthcare practitioner, and ethical issues may be explicit in some interactions. Ethical values are a part of but do not exhaustively cover the value system in medicine. A wider understanding of life and of values and concerns is important to approach ethical issues and concerns properly.

The humanities are an integral part of medicine along with the sciences. For thousands of years, the doctor's armamentarium was noted to consist of the herb, the knife, and the word [3]. The word has, however, received less attention than the other two. Chronic lifestyle diseases are becoming common and the ability to respond to the emotional needs of patients is becoming important for practitioners. Doctors should be able to respond to a variety of emotions and offer support to patients. Health humanities is expected to help practitioners engage with the different perspectives available within the discipline and improve the quality of relationships between patients and health practitioners [4]. Increasingly students and practitioners may have to interact with artificial intelligence (AI) and work together with AI systems to provide patient care. Ethical issues may also arise from these interactions. Medical humanities

should be deeply integrated within the medical consultation and form and transform it.

Recently attempts have been made to use some of the methods from the humanities to explore biomedical ethics and aspects of the patient-practitioner relationship. While this may be a useful first step, it may not be enough. Students and practitioners should be familiar with different aspects of the human condition, respond to the emotional correlates of being sick, and not merely treat biological illnesses. Medical ethics is important but should be approached through the medical/health humanities lens. Otherwise, a narrow mechanistic view of an ethical problem being correctable through specific narrowly focused measures may be created. The problem and the solution may not be linked to the richness of human experience and the multiple perspectives involved may not be sufficiently explored.

Considering medical ethics in isolation without examining the human condition and the health humanities; and considering ethical problems as merely a problem to be addressed may not provide a holistic perspective nor a comprehensive solution. Encompassing medical ethics within the medical humanities may be a logical way forward.

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## Do Ayurveda students need a course in Medical Astrology?

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Ayurveda is based largely upon two classics — *Charaka-Samhita*, representing the school of medicine, and *Sushruta-Samhita* representing that of surgery. These two texts mark the historic switch in the Indian medical tradition, from faith-based therapeutics to its reason-based variant [1]. The *Charaka-Samhita*, which acquired its present form in circa 1st century CE, uses two remarkable terms to designate the distinctness of these approaches: *daiva-vyapashraya* (literally, dependence on the unobservable) and *yukti-vyapashraya* (dependence on reason) [2].