

LETTER

From solidarity to isolation: Why do doctors distance themselves from colleagues accused of an offence?

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A doctor in Madhya Pradesh was arrested when several children died, after consuming a toxin-contaminated cough syrup he had prescribed. The Indian Medical Association condemned the arrest, stating that the prescribing doctor could not have known about the contamination [1]. Social media posts poured in from all quarters, including doctors, condemning the government for making the doctor a scapegoat to cover up their own inefficiency. But, when the police report filed in court, — opposing the doctor's bail application — charged him with taking a 10% commission from the manufacturer, the attitude of the doctors changed completely [2]. The medical fraternity disowned him overnight and declared him guilty before he was even tried on the charges. Imagine that he had been a politician or an individual belonging to an organisation. There would have been a plethora of statements like, "He is a victim of political vendetta," "We shall fight it to the end," and "We have full faith in the judiciary" ... etc. This incident gives us an insight into the attitude of doctors as a group, which makes them take the moral high ground and judge their own colleague as an offender long before the person has been tried, rather than lend him support.

Medical professionals are supposed to act with compassion, empathy, and humanity. But, when one of their own colleagues is accused of medical negligence or misconduct, these inherent virtues go missing, long before a trial. Instead of expressing solidarity and empathy with their professional colleague in difficult times, they simply remain silent or judgmental, and some join the public in condemning the act without even verifying the facts. Is this the self-preservation instinct taking over wisdom and empathy and all the other noble virtues we talk about, day in and day out? Distancing themselves from controversy and preserving their own reputations becomes more important than seeking justice for their colleague. Though there may be no real negative feeling against the colleague, the fear of public backlash or damage to their own image — by aligning with the accused colleague — seems to force them to behave this way.

Another closely linked attitude known as "moral superiority bias" could be the stimulus. Here, the doctor feels that he/she would never have acted like the accused colleague, and this mental posture is quite comforting and helps the individual to believe in his own integrity, though it is an illusion. Unfortunately, the judgmental stance taken against the colleague is baseless and exposes a lack of understanding of the facts and the full context. A doctor is taught in the course of medical education to be "error free". As a result, every

medical professional aspires to be an "error free doctor"; hence mistakes are stigmatised and not analysed transparently. This is connected to distancing oneself from a colleague accused of an offence, reflecting moral cowardice and disregard of the principle of "innocent until proven guilty". Offering support is consistent with justice and humanity. Sociologically, this "group moral distancing" allows the profession to protect its image by isolating the accused as an "exception", restoring public confidence at the cost of ethics, solidarity, and professional unity.

Consequences

Such distancing from peers has wide ranging implications for the medical profession and its practitioners. When doctors realise that their peers will abandon them in moments of crisis, they become guarded, defensive, and fearful. A climate of mistrust replaces collegial cooperation. Younger doctors internalise the message that vulnerability is dangerous, and empathy cannot be expected.

The way forward

The antidote to this problem lies in strengthening professional fraternity and cultivating moral courage. Medicine must rediscover its human core. Doctors must remember that empathy is not only for patients but also for their colleagues. Supporting a colleague does not mean defending malpractice. It means upholding dignity and justice until the truth is known. It means standing against mob judgment — whether by the media, patients, or peers — and affirming that every doctor deserves a fair hearing. The true test of professional integrity is not in celebrating the success of peers but in standing beside them when they stumble. A medical community that chooses empathy over judgment, fairness over fear, and solidarity over silence will not only protect its members but also strengthen the trust society places in it. For in the end, the nobility of medicine lies not merely in curing diseases but in embodying humanity — even towards its own.

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