

# Factors Affecting Awareness Regarding Medical Ethics in Health Care Practice among the Resident Doctors in a Tertiary Care Hospital of Central India: A Cross Sectional Study

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**Abstract:** ***Introduction:** Ethics is defined as moral code of conduct that defines right and wrong. At the core of health care ethics is our beliefs about rights we possess, duties we owe to others and our sense of right and wrong. So, it becomes important to study about factors that affect awareness about medical ethics and to use this knowledge to enhance the ethical conduct among the health professional. **Methodology:** A Cross - sectional study was carried out among the PG Residents of a medical college of Central India using google forms. Data was collected and analysed using appropriate statistical tests. **Observation:** There were total 147 study participants. 28.08% responded that they received formal teaching on ethics in UG/Internship. 46.57% correctly knew Hippocratic oath. Only 16.44% knew correctly about the Helsinki declaration. Previous attainment of classes on medical ethics, work experience and residency in non - clinical departments were found to be significant with knowledge regarding medical ethics. **Conclusion:** Incorporation of a formal structured teaching on medical ethics in the undergraduate curriculum is the need of the hour. Besides research work, the medical ethics committee in the institution should also act as the guiding hands to address the grievances faced by the doctors during medical practice.*

**Keywords:** Medical Ethics, Resident Doctors

## 1. Introduction

Health care ethics (aka “medical ethics” or “bioethics”), at its simplest, is a set of moral principles, beliefs and values that guide us in making choices about medical care. At the core of health care ethics is our sense of right and wrong and our beliefs about rights we possess and duties we owe others. Thinking carefully about the ethical aspects of health care decisions helps us make choices that are right, good, fair and just. [1]

Globally, health care institutions are facing challenges in issues regarding ethics while organising for delivering services. Many universities and medical colleges are making efforts to introduce it in the curriculum. The doctor - patient relationship is hampered due to inadequate management of the cases, that lead to sub - optimal service delivery and potentially trigger incidences of violence and abuse. These all are intensified due to non - adherence to healthcare ethics. Evidence of unethical conduct observed by medical professionals have also been reported. [2 - 4]

Hippocratic oath forms the moral ground of clinical practice and is currently viewed dialectically. But with the relentless progress in medicine, the basis of ethical aspects of clinical practice has been redefined in major documents like Nuremberg code and Helsinki declaration. Autonomy, justice, beneficence and non - maleficence, these four basic principles of medical ethics form the foundation for health professionals to decide what practices are ethical in clinical settings. [5 - 6] Appropriate education of such principles of

ethics are, therefore, of utmost importance during early clinical practice for medical students. [7]

Health personnel are the key pillars of healthcare delivery, so there is an urgent need of standardization and uniformity in medical ethics among all health care professionals. [8–10] In the Indian context, where health indicators are poor, the issue of ethics becomes more complex and requires a better understanding and appreciation of the context. [11] So, it becomes important to encourage medical universities to establish chairs and departments of medical ethics to develop the subject in the country.

This novel study was carried out with an objective of assessing factors affecting awareness regarding the medical ethics among the resident doctors of a tertiary care hospital in central India.

## 2. Methods

Study setting - Tertiary care teaching hospital of central India

Study design - Cross sectional study design

Study duration - June 2021 to July 2021

Ethical approval - The study was approved by the Institutional Ethics Committee

Inclusion criteria - PG Residents working and studying in the given tertiary care teaching hospital

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Exclusion criteria - All those who didn't give consent for the study.

No. of PG Residents at the time of study (N=362)

All the names were listed and every 2<sup>nd</sup> subject was contacted and counselled regarding the study for consent. (Systematic sampling)

This was done till desired count was achieved (Sample size= 151)

5 residents didn't complete the form. (Final data was analysed taking n=146)

Study done by Parashar A et al. found that 40.9% of residents had knowledge regarding Hippocratic oath. [12] Taking this as p and taking 6% absolute precision, the sample size of 151 was arrived.

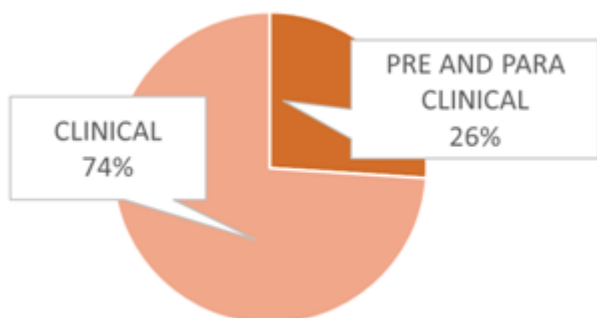
Data was collected using a predesigned, structured, self-administered anonymous close-ended questionnaire for our study.

**Statistical analysis**

Data was entered and cleaned in Microsoft excel spreadsheet. The quantitative variables were described as mean and standard deviation, whereas the qualitative variables were described as proportions and frequencies. The data was analysed using SPSS software version 26.

**3. Results**

Total 146 study subjects were included in the final analysis. . The mean age of the respondents was 26.5years, and 83 (56.8%) were male.74% were from clinical departments. (fig.1) Most (60.3%) of the residents had no or <6 months' work experience before joining as resident (Table 1). Table 2 shows the distribution according to knowledge of Hippocratic oath, Helsinki code and Nuremberg code.52.1%, 86.3%, 82.9 % of residents don't know or have wrong knowledge of Hippocratic oath, Nuremberg code and Helsinki code. Only 28.1% residents received formal teaching on ethics during their MBBS/ Internship. (Table 3) Work experience and department of residency were found to associated with knowledge regarding medical ethics. (Table 4 & 5)



**Figure 1:** Distribution of study subjects according to department of residency

**Table 1:** Distribution of study subjects based on work experience post UG

Work Experience	Frequency	Percentage
No or <6 Months Experience	88	60.30%
6 Months - 1 Year	22	15.10%
1 - 2 Years of Experience	24	16.40%
2 - 3 Years of Experience	7	4.80%
3 - 5 Years of Experience	2	1.40%
>5 Years of Experience	3	2.10%
Total	146	100.00%

**Table 2:** Distribution of subjects according to knowledge about Hippocratic oath, Nuremberg code and Helsinki code

Knowledge about (in %)	Hippocratic Oath	Nuremberg code	Helsinki code
Correctly Know	46.6	13	16.40%
Don't Know or Incorrect	52.1	86.3	82.90%
Total	100	100	100%

**Table 3:** Distribution of subjects on the basis of whether they have attended formal teaching in medical ethics or not

Formal teaching in medical ethics during MBBS / Internship	Frequency	Percentage
Yes	41	28.1
No	105	71.9
Total	146	100

**Table 4:** Cross Tabs for department of residency with knowledge of Hippocratic oath

Department	Knowledge about Hippocratic oath	
	Correctly know	Don't know or Incorrect
Non & Para clinical	31	7
Clinical	39	69
Total	70	76

Chi sq= 23.284, p= 0.000

**Table 5:** Cross Tabs for work experience with knowledge about Nuremberg code

Work Experience	Knowledge about Nuremberg code		Total
	Correctly know	Don't know or Incorrect	
No experience or less than 6 months	8	80	88
6 months - 1 year	5	17	22
1 - 2 years	3	21	24
2 - 3 years	0	7	7
3 - 5 years	1	1	2
>5 years	2	1	3
Total	19	127	146

Chi sq= 14.129, p=0.015

**4. Conclusion**

The role of ethics is inevitable in day-to-day health care practice, not only in tertiary medical colleges but also for the health professionals who are providing services in primary as well as secondary health care institutions. [12] Our study found out that department of residency and work experience are some factors that affect the knowledge regarding medical ethics.

Further studies should be done on a larger context including residents from all over the country to get an appropriate idea

regarding what needs to be done to increase their knowledge on medical ethics.

## 5. Limitations

The study is limited to only one medical college hence the results of this study should be interpreted within the context of study limitations.

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