

The failures of medicine

Alberto Lifshitz*

Editor

We are used to take stock of the achievements and successes of medicine, which are, with no doubt, countless and impressive, but every once in a while it is convenient to reflect on its failures. And I don't refer to diseases it hasn't been able to cure –which are of course many– because it is a road repeatedly travelled through and that sooner or later will culminate. I rather propose here some negative consequences for health –if not real failures– that cast serious doubts on the beneficial nature of the profession.

Medicalization. This means that, as society, we have gotten used to the idea that everything can be solved with medications or with the intervention of doctors: moods, appetite, cosmetics, mild discomforts, laziness, sleep. Of course, drug manufacturers and distributors have contributed to this (and for them this is by no means a failure), but also society and many doctors who are commercially favored by patients depending on them. The expectation for all of them is that every encounter between doctors and patients should end up in a drug prescription, and if this doesn't happen, there is a certain frustration. Even in social security medicine, patients expect for their contributions to be returned at least with medications, even if these are vitamins or placebos.

Negligence of people with their own health. This is clearly linked with the previous point, when trust is generated on the idea that if they fall ill, they will be healed with medications. People have adopted the idea that staying healthy largely depends on themselves, and that the care of diseases implies a minimum of compliance or adherence and an opportune

search for solutions. In health care, rather than doctors or health personnel, patients are important.

Failures in prevention. There is no doubt about the highly important achievements that have been attained in the prevention of many diseases, and the philosophical and practical supremacy of prevention over late intervention. But it is also true that many interventions that have proven to be useful in controlled groups and especially disciplined individuals have not reached a critical mass, and therefore we are living an epidemic of chronic diseases and we keep on suffering from theoretically preventable diseases because we haven't been able to convince and educate. Almost everybody knows that hand washing should be a common practice, and the convenience of this is emphasized, but shadowing and monitoring studies show that it isn't done with due frequency or adequate technique. The famous healthy lifestyles, which with no doubt have proven impacts, are not adopted by people largely because of the sacrifice they impose or the need to modify preferences and habits. It is easier saying what has to be done to prevent than effectively doing it. The communication and educational strategies we have used have modest efficacy, as they involve giving up liberties.

Failures imposed by costs. Many of the achievements in contemporary medicine have been attained to a very high cost, which often is transferred to the patients, the healthcare systems or the insurance companies, and sometimes it renders unaffordable. Consequently, many individuals are left excluded from the benefits entailed by certain treatments or procedures, simply due to the fact of being poor or not having enough insurance coverage. Of course, it is understandable that health financing has its limits, but not being able to solve many health problems only for economic reasons cannot stop being considered as a failure.

Failures in comfort. Hospitals and healthcare units in general often infringe upon the patients' comfort. Hospitalized patients have their sleep interrupted

Correspondence:

*Alberto Lifshitz

Unidad de Congresos del Centro Médico Nacional Siglo XXI

Bloque B, Avda. Cuauhtémoc, 330

Col. Doctores, C.P. 06725, Ciudad de México, México

E-mail: alifshitzg@yahoo.com

because they have to have their medication administered (sometimes a sleeping pill) at scheduled hours; we don't let them rest, recover; at hospital discharge they are often more disabled than at their admission. They have their visits, leisure activities and telephone calls restricted. They are forced to eat unappetizing foods due to a not always efficacious diet. They are separated from their daily duties, which keeps them continuously worried, not to mention the number of aggressive and painful procedures they have to undergo.

Failure to recognize limitations. The successful achievements of medical science have generated expectations that can be excessive, and although hope dies last, we have failed to make society understand the limitations of the profession. For patients, resorting to a doctor for the relief of discomfort or to be able to prolong their life always represents hope, and there have been those who profit out of this. Physicians explore the expectations and, to the extent possible, satisfy them, but doctors, patients and relatives have to be aware that science has its limits. The fight for lost causes is more exhausting, although nobody can be denied reassurance and hope for a miracle, as long as this is acknowledged. Acceptance of death as a natural process and not as an expression of failure of the profession should also be included in this item. Doctors have avoided facing death because it reminds us of our limitations and our own vulnerability. The thanatology movement has favored a confrontation with death under a more mature perspective than the one we have created based on false hopes.

Hubris. Contemporary physicians have become ill with hubris. The historical, traditional role of doctors has been one of enormous social elevation, and we have not always been able to live up to this great consideration. It is reasonable that we are aware of the role our profession plays in health and wellbeing, but at the same time we should recognize that we are the heirs of a tradition of hundreds of years that goes beyond our own merits. But the most inconvenient –and this is

why it is listed among the failures of medicine– is when this egomania, this megalomania translates into disdain and lack of solidarity and understanding for those who suffer. We physicians have to step off the pedestal of hubris or else run the risk of turning our profession into a dehumanized, technical, mechanical, commercial, indifferent, selfish and ungrateful activity.

Business. Currently, healthcare is with no doubt one of the most profitable industries. Medications, instruments, equipment, organizations, insurances are all productive businesses. Of course, all this requires financing, which is attained by investments that have to be recovered. We already mentioned that health financing is expensive, and more so is disease. That which allows including this in the list of failures is the preponderance of profit over human values, when many colleagues make their beneficial care dependant on the economic compensation it entails. Certainly, doctors have to make a living and support their families, but their primary commitment is to the patients. In fact, conflict of interests in medicine occurs when this primary commitment engages in combat with secondary commitments. It should be admitted that this attitude is the consequence of the values that prevail in the entire contemporary society, and whose influence on doctors is unavoidable.

Others. In our profession, we have fostered a dependant society, we have limited its ability to autonomously make its own decisions, we have generated a society enslaved by industrialized drugs, we have assumed our role as workers or providers of services with the rights of any laborer, we have allowed ourselves to be dominated by pseudo-scientific appearances, we have favored intolerance and do not recognize stoicism, we have contributed to the epidemics of suicide, iatrogenic diseases, unnecessary surgeries, and disproportionate anxiety, and we are at risk of losing the trust of society if we don't rescue the values and principles that have historically characterized this service-driven profession.