Introduction

During the last years we witness in a daily basis the outstanding development that takes place in the technical sector and how this influences the various sciences. Obviously, also medicine does not remain uninfluenced from the new prospects that appear. However, equally important are the challenges with which the latter are accompanied during their application, as these need to be fully aligned with the fundamental rules of medical practice. In order to foresee unpleasant situations or even to overcome any potential problems that will arise, as a result of the application of pioneering methods during the practice of medicine, the so called Committees of Bioethics have been established. Main concern of the latter is to supervise the full harmonization of any scientific progress in the field of medicine to the moral rules that govern it and as these have been included within the Hippocratic Oath. The latter, because of its timeless value and its incomparable validity, constitutes until today the most important text of medical deontology and morality of all centuries.

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Hippocratic Oath and extracted ethical values

In the previous paragraph, a special mention was made to the Hippocratic Oath, as this constitutes the benchmark for the creation of the various ethical codes, concerning either medicine or relevant with it professions. Moreover, due to its important humanistic value, Hippocratic Oath was a basic text for the acquisition of those virtues that have been inextricably linked to medicine, and as these have been included and widely emerged within world-wide declarations of modern times. In order to comprehend the uncontradictable value of Hippocratic Oath we have to examine, with the proper care, the different individual aspects that constitute it. The particular text, despite the fact that is short - its extension does not exceed a page-, nevertheless, it is so comprehensive in moral lessons that has been the subject of meticulous study and thorough analysis over the centuries. Essentially, within it we can distinguish four units, in which could also be attributed the following names: 1. Invocation, 2. Obligations of the doctor in relation to his profession, 3. Duties of the doctor towards his patients and 4. Wish. Let us now deal with the content of these units and examine in every detail the total of nine articles and which of them are included within these units.

Particularly, inside the preface, which is also the starting point for the text and refers to the first article, there is invocation to the gods but also engagement of the doctor under Oath towards them, to comply with ethical rules and values, as these are mentioned within the Oath. In addition, it is stressed that the doctor will implement his obligations with his own power and judgment «επιτελεά ποιήσειν κατά δύναμιν και κρίσιν εμήν ορκον τόνδε». As we can conclude from the above mentioned, the god as the supervisor of moral order in the world constitutes simultaneously also the guarantor of sincerity of the human promises. Furthermore, so much the self knowledge as well as the awareness of doctor’s responsibilities constitute for him the essential conditions of a successful career.

Afterwards, it follows the second part of the Oath that refers to the obligation of the doctor towards his teacher.
The former must honor and respect both the latter and his own parents, but also, and in case that is required, to be willing to dispose his property and his assets for the care of his teacher, whereas to consider the descendants of the latter equal to his own biological brothers. At this point, it comes into sight the outstanding honor of the teacher. In addition, in this section is demonstrated also the importance of the transmission of the medical knowledge, from the doctor both to his own children and to the children of his teacher, but also to any other that wishes to be taught as a medical student. The deeper meanings that can be unconditionally exported from the specific paragraph are, on the one side the selfless offer of knowledge that constitutes fundamental duty of the teacher, and on the other side the importance of education as essential element of life. But, a substantial prerequisite for someone to begin with medicine is the written agreement with the teacher, and the acceptance from the former of the medical law and nothing else except of this, «και μαθηταίσι συγγεγραμμένοις τε και ωρ- κισμένοις νόμω ιητρικώ αλλώ δε ουδένι».

In the third section, which occupies the largest part of Hippocratic Oath, are mentioned the individual duties of the doctor towards his patients. This particular unit begins with the statement of the doctor that he will cure the patients, according to his power and personal judgment and in such a way that he will not harm or misbehave deliberately. It can easily be understood by everyone the importance of morality and scientific training of the doctor for the benefit of his patients. Afterwards, the doctor promises that he will abstain from any energy that would lead to abridgement of his patient’s life, either by giving him any lethal medicine or any advice on how the latter could accelerate his death. Similarly, he ensures in the most unequivocal way that he will not proceed with any surgical intervention, in cases of lithiasis but he will leave this medical act to be carried out by specialists. This particular sentence renders the conscientiousness as a basic virtue of doctor during the practice of medicine, as he keeps as an inviolate principle, before any action the Hippocratic motto «ωφελέειν ή μη βλάπτειν». In the following phrase the doctor mentions that he will not proceed with any surgical intervention, in cases of lithiasis but he will leave this medical act to be carried out by specialists. This particular sentence renders the conscientiousness as a basic virtue of doctor during the practice of medicine, as he shall know what he is capable to do and what not, according to his knowledge, keeping as an inviolate principle, before any action the Hippocratic motto «ωφελέειν ή μη βλάπτειν». In the seventh article, it is mentioned that when the doctor enters the houses of his patients owes to have in mind the benefit of the latter and to avoid any voluntary injustice and harm, but also any sexual act with women or men, free or slaves. In the same paragraph, both justice and humanism but also self-control are propounded as fundamental virtues, which should characterize the right doctor. The eighth article is basically the known “medical confidentiality”, according to which the doctor should be discrete and keep as a sealed secret anything he will see or hear, both during his medical practice but also during his personal life.

The epilogue includes at the same time a wish and a curse; the doctor wishes on the one hand to have the respect of all people both for his life and his profession in case he will keep his Oath and on the other hand, in case of violation of it, to suffer the worst.

The “variants” of Hippocratic Oath

In the previous pages, we analyzed the Hippocratic Oath and presented the deeper meanings and moral teachings included in it. Despite the fact that the importance of Oath is not disputed, a tendency has been observed the past few years, some of its sections to be adapted and modified in such a way that the altered oath to be compatible and completely harmonized with the needs of modern era. In the same way there is a coordinated effort of presentation of the Oath as something outdated and anachronistic. However, it is remarkable that the majority of the most known medical faculties in the USA glorify the importance of the authentic Hippocratic Oath. These schools believe that the latter does not address medicine as an exclusive practical methodology for dealing with the disease; rather it aims in the doctor’s soul, as this is related with the eminently altruistic side of medical profession. It is query worthy that in the country where Hippocrates lived and achieved great things, his Oath has been replaced by others and it is not given anymore by the new doctors at the end of their studies and before undertaking their duties.

Code of Medical Ethics

The current Code of Medical Ethics (law 3418), which was placed in force in November 2005, sets the strict framework of the rules that the doctor has to apply in the exercise of his profession. Already in the second chapter, article 2, paragraph 1 of the certain law is underlined the important value of medicine; it is specifically mentioned that exercise of medicine constitutes vocation that its main aim and
concern is the maintenance and -when it is needed- the reintroduction of the three basic components of individual's health, namely his physical, intellectual and mental condition in a harmonious and well-functioning. In the immediately next paragraph of the same article is highlighted the high sense of responsibility that should characterize the doctor, if he decides to live his life and perform his duty according to the principles of the Hippocratic Oath. The whole behavior of the doctor must promote the prestige of medicine and simultaneously establish his profession's reliability within the society. The third paragraph of the same article refers to the respect for human life and dignity, which must be protected regardless of sex, nationality, religion and social status. Finally, in the fourth paragraph there is particular reference in the protection of human life from the side of the doctor even if he is threatened, but also his abstention from every form of inhuman behavior that humiliates the individual's dignity.

In the first lines of the third article (of the second chapter), which is named "Moral and Scientific Independence of Doctor", is emphasized the importance of both scientific freedom and freedom of conscience. These two freedoms should be provided to the doctor, in order to practice properly and uninfluenced his profession. The remainder of the third article deals with the practical application of medicine and more concretely with the continuous and uninterrupted learning of the doctor. The latter owes to follow and implement the new achievements of scientific research, always having as his ultimate purpose, the benefit of his patients.

In the same wavelength with the two previous articles is also the content of the fourth. Specifically, in this certain article is highlighted the significant position of the doctor within the community as well as the enormous responsibility that accompanies his profession. As it is mentioned in the first paragraph of the same article, the doctor must promote the equal access in the health services and as a legitimate judge to look after and to decide for the equal distribution of resources, avoiding however any form of discrimination, because of social, financial, and legal differentiations between his patients. Moreover, in the next paragraphs of the same article is pointed out doctor's important role as guarantor of quality, safety and effectiveness of the provided sanitary care and treatment.

The entire third chapter is dedicated to the relationship of the doctor with his patients. The article eight refers in detail with the attitude of doctor towards his patients, in a way that his behavior builds a connection of mutual respect and trust between them. In order to achieve this goal, the doctor must i) appreciate and respect the privacy and the dignity of his patients (paragraph 2), ii) not interfere with the personal and family life of his patients, but only in case and as long as it is deemed necessary for the proper diagnosis and treatment of his patients (paragraph 3), iii) respect the political, religious, philosophical and ethical beliefs of his patients and not be influenced by them when practicing his medical profession (paragraph 4) and iv) not take advantage of his position, in order to make inappropriate relationships with patients or their relatives or even to exert any form of "pressure" on them (paragraph 5). The title of the ninth article is "Obligations of the Doctor towards his Patients". Within it are contained and analyzed the duties of the doctor, who must provide his services even under harsh conditions, always aiming to the good his patients, thorough the proper practice of medicine. However, he is exempted from the obligation to perform his tasks only in particularly serious cases and under special circumstances. The awareness of high responsibility he has is inextricably interwoven with his constant informing on the current developments of his science. Nevertheless, he has to be able to recognize the limits of his professional capabilities and skills and to look for the help of his colleagues or even to refer his patients to them; if he considers that on the basis of his specialty he will not handle successfully their diseases. Equally important are the subjects analyzed in the articles 11 and 12 of the same (third) chapter. The first one refers to the obligation of the doctor to inform his patient, whereas the second underlines the need of obtaining an informed consent prior to any medical act, which could be related to the choice of the appropriate diagnostic method or the application of the suitable therapeutic approach. The patient has the right to know everything about his health condition, the possible progression and prognosis of his illness, the consequences and the risks posed by the use of the treatment indicated by his doctor, so that the former will be fully informed and able to decide for his own life. On the other hand, it is expressly forbidden for the doctor to proceed in the implementation of any medical act or apply any form of treatment, in case that he has not received previously the consent of his patient, which in certain occasions should be declared also in writing. However, in the article 12 is recognized the high responsibility of the doctor to protect by all means the "good of life", and in this sense he is provided with the possibility to proceed in the decision-making as he own judges and without the prior consent of the patient; as this is the case in urgent situations and in suicide attempts. It would be an omission not to include in the present Code of Medical Deontology the widely known "medical confidentiality", the importance of which had already conceived Hippocrates and placed it (as we have already seen above) in the articles of his Oath. However, in the Code are included and specified in detail the particular situations,
where the doctor is given the opportunity to resign this obligation. Carefully studying subparagraphs of the article 13, we realize that the defense of the public interest overcomes the individual and when there is such a matter of choice between them, the doctor can breach the medical confidentiality, in order to ensure the common good.

The fourth chapter of Code of Medical Deontology deals with the various aspects of the relation between doctor and society. The doctor is due to care on issues related to public health and to continually strive for improvement of the quality of the provided medical services. On the other hand, and without jeopardizing the community, must also protect the individual patient from the social exclusion and the stigmatization. The doctor is called indiscriminately to offer his services to anyone who needs them, including those in prisons but also in the less “privileged” groups of people, among which are included the immigrants and the refugees. In the article 19 of the same chapter, doctor’s reward is regulated. This should be done in a very fine and discrete manner and in such a way that does not impair the dignity and the prominent humanitarian nature of the medical profession, as it is typically emphasized in the paragraph one of the same article. Moreover, the doctor can reduce the amount of his payment or even not receive it in cases involving financially weak patients. However, he is obliged to offer his services without being paid by his colleagues, the close relatives of the latter as well as the medical students.

In the sixth chapter, it is reminded the particular role that the doctor has to fulfill as teacher, a fact that is the result of his obligations towards medicine, as he owes to deliver further his knowledge to his students and future colleagues, in complete agreement with what was pointed out previously, when we were analyzing the Hippocratic Oath.

The next (seventh) chapter makes extensive reference to the doctor’s relationship with the research and the way this should be carried out. Essential conditions constitute the protection of life, health and dignity of individual that participates in the research, and as it is specifically clarified in the article 26, paragraph 1b, the protection of the aforementioned goods precedes the interest of science or society. At this point we should mention that the Code and particularly the ninth chapter, in an attempt to prevent the serious moral dilemmas that may arise during medical practice, given also the continuous scientific progress and knowledge, makes clear provisions for all possible cases. In particular, the article 29 deals with the doctor’s decisions at the end of the patient’s life and emphasizes the need for the former to support and care for the relief of the psychopathic pains of the latter, but without speeding up in any way his and the relation of the profession to the social division of labor. In this way, the analysis of economic relations is dissociated from the analysis of class relations. As a result, class appears as an economic category (economic class), instead of a social relation (social class). This, in turn, prevents the designation of social class and class identity in historical terms. On the other hand, however, since the relational character attributed to social class does not refer to a signified which is objectively defined outside the signifiers (relational moments), it can lead us to relativism and to a decentralized subject that is lost in a game of differences and meanings, being hence unable to determine their identity, as is the case with Ernesto Laclau [see deconstructionism (Laclau & Mouffe 1985)].

The patient’s death. The article 30 refers to the artificial interruption of pregnancy and gives the doctor the opportunity to invoke medical ethics in order to refrain from proceeding with such an act. Only in those cases, where there is a serious risk for the life of pregnant woman or even the possibility of permanent harm to her, the doctor has the permission to intervene, provided that there is a justified judge. It is easy to understand that both in the Code of Medical Deontology, as well as in the Hippocratic Oath, the doctor must defend by every means the supreme good of life. Finally, equally to Hippocratic Oath, where its epilogue (as we have already mentioned before) is simultaneously a wish and a curse for the doctor with a pure moral aspect, the Code of Medical Deontology regulates in the article 36 the legal sanctions imposed on the doctor by the breach of his duties..

In conclusion, and despite the fact that the Code of Medical Deontology deals in detail with all the individual issues and the possible difficult situations that can arise during medical practice, the Hippocratic Oath continues to have a long-lasting value, constituting undoubtedly even in our days the reference point on medical ethics.
References


Hippocratic Oath (link: http://users.uoa.gr/~nektar/history/1antiquity/hippocrates.htm).
