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PATERNALISTIC MODEL OF MEDICAL PRACTICE

Waris Qidwai

The modern era of medical practice encourages respect for patient autonomy, and places a greater emphasis on the development of patient responsibility in managing their health. In the west, such a "Patient-focused" model of practice has emerged from a more traditional "Physician-focused" model, over the last three decades.

In the "Physician-focused" model, a physician is a fatherly figure who decides what is in the best interest of the patient, that is why it is also called the "paternalistic model of practice". In such a model of practice, patient is just a passive recipient of all the decisions of the physician. We have, on the other hand, a "patient-focused" model of practice, in which patient is involved in the decisions made in his/her interest during medical care. In such a model of practice, patient's autonomy is considered of paramount importance. Debate is ongoing as to which is the best model of practice? It is recommended that physicians adopt a more flexible approach in decision-making, keeping patient's preferences in mind.

In Chinese society, a "Physician-focused" model of practice is adopted, which is different from that practiced in the west. Such a "paternalistic model" of practice is also reported from Japan, where withholding of information and concealing diagnosis from patients have been reported.

What is the situation in Pakistan? A general feeling exists that a "paternalistic model" of practice may be prevalent in the country, but there is a lack of evidence to support such a view so far.

In order to find out the model of practice that exists in Pakistan we conducted a questionnaire-based survey of 420 adult patients visiting the Family Practice Clinic of a Teaching Hospital in Karachi, Pakistan.

The majority was young, married men and in private service. The responses of the participants are given in Table I.

The responses listed support the existence of a predominantly paternalistic model of practice in Pakistan but with some features of a patient focus model as well.

The belief that a "doctor is next to God", forgiving doctor if a relative dies due to negligence, concealing diagnosis from cancer patients and not maintaining patient confidentiality are features of a paternalistic model of practice.

Patients believe that a doctor is next to God and thereby they submit to the physician's decisions without asking any questions.

If one considers a physician to be a father-like figure, than forgiveness is a valid option in the event of the death of a close relative. Such a response would be highly unlikely under a patient autonomy based model of practice.

Concealing diagnosis from a cancer patient is a "hallmark" of paternalistic model of medical practice. The physician and the family feel that the patient is not strong enough to face an unfavorable diagnosis. They forget that it is the patient who has the right to know, as well as not to know, the diagnosis of his/her illness.

It is another feature of paternalistic practice of medicine that a physician fails to maintain confidentiality and discloses information about patient to his/her relatives and employers. Such a move will be considered unethical.

A majority of patients would want to know the details of their treatment, indicating that there is a move towards a more patient-focus model of practice. It may be an indication that our patients would like to be involved in their treatment decisions. As physicians, we must encourage our patients to assume more responsibility in the management of their medical problems and health.

The results of our study provide support to the existence of a "Paternalistic model" of medical practice in Pakistan. Will the model of practice in Pakistan move towards more patient autonomy as it has in the west? Only time will tell but as modern-day medical practitioners, it is our responsibility to provide best medical care to our patients in the light of latest advances. In addition, patients should be involved in the decisions concerning their care, since they are equal partners in their own medical care.

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REFERENCES


