Medical deontology, meetings, journals, candidacy for higher posts and how to better enjoy life

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Abstract

Unfortunately, today few physicians care about medical deontology and medical ethics, that is how to behave and respect others when exercising our medical profession. Some of us may not show the care and kindness we should show towards our students or the due respect to our senior colleagues. Occasionally, when examining our patients we may not pay the proper attention to their problems, being tired from work overload. Another issue of deontology is medical meetings. Do they offer us enough knowledge or mainly pleasure? Is our curriculum vitae comprised by useful to society and to medicine original or confirmatory research work? Few examples to illustrate what the situation is at present are included in this paper. Our financial success in practice should not compete with the "old" Hippocratic oath and ideals. The pursuit of happiness in our life is not achieved through untruthfulness, dishonesty or only high financial status. "The Lancet" mentioned long ago (1969; September 27; 681-4) a phrase by John Keats: "Truth is beauty... this only exists on Earth and this is what we need to know".

Introduction

ome of us may consider medical deontology as a trivial or unnecessary issue in our medical practice. The word "deontology" is a Greek word meaning: "to speak about what we should do". The use of this word was first suggested by the English judge and philosopher Jeremy Bentham (1748-1832) who believed that what is moral is also useful and brings happiness [1]. Four thousand years ago Hamurabi's Code and other ancient codes, like the Ayr Veda code from India, the Egyptian code and Aristotle's philosophy (Aristotle was the son of a physician) referred to medical deontology. In 1803 in USA Thomas Percival published the book "Medical Ethics" and since then the oath of Hippocrates was used for the junior medical physicians graduating from Medical Schools.

The application of deontology

As for our students, I recall the case of a very brilliant teacher who was teaching an elective course to 413 students; after he left for a Sabbatical, only 17 students remained interested in attending this course.

I always believed that teachers are the spiritual parents of their students and, thus, partly responsible both for their students' behavior and success in medicine. Having this in mind, it seems to me reasonable that students should also evaluate their teachers.

Recently some graduates of medical schools do not give the Hippocratic oath. Others do not show the proper care and respect, as the Hippocratic oath would suggest, when they treat as patients other medical colleagues. A medical colleague is equivalent to a brother. We all need one another in our large medical family. Kind behavior is rewarding ourselves and the opposite: mean behavior is usually punishing ourselves.

The most important issue is of course our patients. If we show kindness and friendliness to our patients we shall receive from them the most accurate information about their present and past medical history. This information can often lead to the correct diagnosis! Furthermore, in case we unwillingly make mistakes in our medical treatment, these patients appreciating our kindness and friendliness will cooperate with us in order to face the consequences of our mistakes. The above are very important issues in medical practice.

If another colleague has previously examined our patients, we must show due respect to him, even if we disagree with his diagnosis. We must try to be as non-judgmental and polite as possible. Otherwise, our patients shall develop a negative psychology towards both the previous practitioner and ourselves and shall try to seek for a third medical opinion.

In 1982 Professor Nicolas Louros wrote: "In the Greek medical congresses ... some papers are submitted in order just to be included in the authors' curriculum vitae...Where is true medical research, where is originality of the papers, where is critical discussion of every paper that will make the authors respectable? May I remind you that the first report about the discovery of Roentgen's rays was written on only one page. We must eliminate the loads of papers that undermine knowledge and destroy quality..." [2].

As for the numerous international etc. medical congresses, they sometimes combine an overload of papers, luxurious accommodation in hotels, having free meals, free welcome receptions, sightseeing and useful personal acquaintances and discussions. There is also the financial parameter of these meetings. For example: 100-150 participants paying a registration fee of 300 euros each, will make the sum of 30.000-45.000 euros. Of course, there are exceptions to the above.

Medical journals increase in number day after day. There are open access journals (OAJ), journals publishing current opinions and journals having very little assessment by reviewers. Last month the present journal, Hell J Nucl Med, rejected three totally untrue papers, one from Asia and two from Europe. Professor Nicolas Louros wrote in 1982: "While research is the main purpose of medicine, some write papers in order to advertise their names, others add their names in papers written by others, others consider the weight of their paperwork as their brilliant CV and finally other authors divide a paper into smaller parts for reasons well understood. Citation index should be more strictly specified as to its content when a candidate applies for a position" [2].

An OAJ has no annual expenses to run. These expenses for a printed journal amount to about 50.000 euros or much more. Additionally, such an OAJ may ask for a submission fee. Reviewing is a difficult procedure which some journals may wish "to simplify". A very impressive and unfortunate example showing that some journals may publish fraud papers is the following: J Bohannon in 2013 as mentioned in the distinguished journal "Science" and in other journals, sent during a period of eight months to 304 electronic journals the same but each time slightly modified fraud paper. A hundred and sixty of these papers were published. The name of the author and his institute were also unreal [3].

Of course electronic journals have the advantage of fast spreading knowledge and offering high impact factors [4, 5].

In order to face the above problem it has been suggested, among other measures, to also publish in the journals the actual raw findings of some of the submitted papers [6, 7].

In favor of publishing quality papers are Dr R. Sekman, Nobel prize 2013 and Dr. L.P.Higgs, Nobel prize 2013. Dr Higgs mentioned that considering his very few original papers, he would not be able to obtain an academic post [8]. Doctors I. Chalmers and P. Glaszion have underlined in 2002 that 85% of what is invested to research is actually lost [9].

We may note at this point that the Hell J Nucl Med, being a university journal, has two levels of assessment of the papers submitted. The first level is run by the editor and his team as in-house assessment and the second is run by 2-3 reviewers each time.

About impact factor (IF): Some have called IF "the poison of IF". Others have said that IF is problematic and idiotic [4].

May I point out that it came to my knowledge the case of a young candidate for a university post, who submitted more than 600 papers which as calculated were produced one every 4-9 days! Another candidate submitted an original paper that had been performed at the time he was not working with the team that produced this paper. It is unfortunate that the Board of the Electors finally voted in favor of the above candidates.

A solution to the above is for the Universities and Clinics, to describe in detail the qualifications that the candidates need to have. The University of Pennsylvania recently described in detail, in a total of six pages, all qualifications that a candidate for a university position should have. Of course an interview is absolutely necessary.

Closing, I must say that the Greek word "professor" (kathigetis, i.e. kath-igetis) means: "one who is the leader in all aspects". Without truth and kindness, without deontology, we may cause great harm to Medicine. Without true medicine, we cannot be happy as medical physicians. Not to forget that life is the pursuit of happiness.

Bibliography

- Nuclear Medicine and Radiology. (Editorial) Nucl Med Commun 1983: 4: 321-2.
- Louros NC. Considerations and thoughts concerning the medical literature. Materia Medica Greca 1982; 10 (4): 421-3.
- Samkange-Zeeb F, Zeeb H. Open access under scrutiny. J Radiol Prot 2013; 33(4): 885-6.
- Rabesandratana T. The Seer of Science Publishing. Science 2013; 342(6154): 66-7.
- Biomed Central Medicine (open access Journal) 2012; 10(73): 1-10.
- Glasziou P, Altman DG, Bossuyt P et al. Reducing waste from incomplete or unusable reports of biomedical research. Lancet 2014; 383(9913):
- Chan AW, Song F, Vickers A et al. Increasing value and reducing waste: addressing inaccessible research. Lancet 2014; 383(9913): 257-66.
- Kleinert S, Horton R. How should medical science change? Lancet 2014; 383; 197-8.
- Chalmers I, Glasziou P. Avoidable waste in the production and reporting of research evidence. Lancet 2009; 374(9683): 86-9.