

Can the doctor still know better?

In the presence of so much information that can influence a course of treatment the question arises, can the doctor still know better? When compelled to give results of a treatment modality the answers are usually biased. Outcomes of various other well published medical personnel are quoted either favourably or unfavourably depending on the context in which it is mentioned. Is this ethical?

The bald answer is no. But when looked at in a wider context it is impossible for any physician at any given time to know precisely results of a treatment in either a short term or long term basis.

For example, if a patient with advanced cancer of the larynx presents and the best treatment for survival is a total laryngectomy and the patient declines treatment. Should we nudge the patient towards accepting total laryngectomy by getting him to interact with a laryngectomee patient so that the outcome of total laryngectomy is perceived as 'not as horrific as I thought' and thus influence the once reluctant patient into accepting the treatment that was once declined. There is definite bias because we expose the reluctant patient to a favourable outcome with the unsaid implication that such a result could be theirs if they agree to undergo surgery. What would happen if we were to also expose the reluctant patient to another whose outcome was less than acceptable? Thaler and Sunstein (2003) discuss the concept of "Libertarian Paternalism" and say it is not an oxymoron. They state that patient choices are strongly influenced by details of the context in which they make their choices. For example patients are far more likely to accept treatment if it carries a 90% chance of success. They would be less likely to agree to the same procedure by the same person if they only told that it carries a 10% chance of failure.

Ultimately the crux of the matter lies in determining what is best for the patient within a context of the physician's sphere of expertise without either coercing, persuading or manipulating the context thereby giving the patient a physician's bias for a particular form of treatment.

REFERENCE

Thaler R, Sunstein C: Libertarian paternalism is not an oxymoron> University of Chicago Law Review 2003; 70:1159-1202

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