‘First Do No Harm’ is a series of 12 brief monthly articles with internet footnotes about harming and healing in general practice. Each instalment is based on one of the 12 RCGP competency domains, this month’s being:

11. Maintaining an ethical approach to practice: practising ethically with integrity

2. McClelland LG. The true aim of medicine is not to make men virtuous; it is to safeguard and rescue them from the consequences of their vices. The physician does not preach repentance; he offers absolution. 
7. Treasure W. Diagnosis and risk management, examining before judging. 

INTRODUCTION

Every consultation, however straightforward, superficially contains ethical dilemmas. Autonomy, equity, beneficence, non-maleficence, and confidentiality are incommensurable and often mutually exclusive. Shared decision-making may be the ethical norm but is hampered by the asymmetry between the doctor for whom knowledge is power and the patient in whom illness creates a state of temporary dependency. Evidence sometimes shows the self-evident to be wrong. Where evidence isn’t available, compassion justifies pragmatism but not quackery.

HARMING

Confusing autonomy with consumerism, equity with indifference, beneficence with proselytism, non-maleficence with passivity, confidentiality with insularity. Over-riding proselytism, non-maleficence with passivity, equity with indifference, beneficence with unproven; it’s unclear whether antipyretics for up to 3 months is less than the relief produced by placebo and after 3 months is unproven; it’s unclear whether antipyretics in children with fever are beneficial or harmful; and wheat treatment is probably no more effective than time.

SKILLS

Identifying the ethical dilemmas in the apparently most straightforward of consultations. Using rules ‘as ballast rather than as compass’. Observing before evaluating before judging. Communicating non-violently. Using the Quality and Outcomes Framework to optimise not only profit but also patient care. Being a vocal contributor to research, guidelines, peer-reviews, professional organisations, and the AllTrials petition. First doing no harm: beginning with a therapeutic consultation without the dangers of tests and drugs.

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DOI: 10.3399/bjgp13X665314

Supplementary information

The internet footnotes accompanying this article can be found at: http://www.darmipc.net/first-do-no-harm-footnotes.html

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REFERENCES