Medical professionalism is difficult to define and is poorly understood.¹ The Royal College of Physicians (RCP) defines medical professionalism as: ‘A set of values, behaviours, and relationships that underpins the trust the public has in doctors’, which includes ‘integrity, compassion, altruism, continuous improvement, excellence and working in partnership with members of the wider healthcare team.’²

A QMUL primary care seminar in 2015 about educating clinicians for medical professionalism gave the example of dedicating appropriate time to the parents of children undergoing major surgery. There is evidence that professionalism can be developed via role modelling and personal reflections.³ Traditionally, doctors have taught their trainees professionalism by role modelling — but might we learn anything new from older models of professionalism?

The RCP’s concept of medical professionalism and its relation with public trust has similarities with the concept of ‘virtue’, debated in Socrates’ dialogue with Protagoras, as recorded by Plato in 380 BCE. Protagoras, a Greek philosopher, claims to be able to teach virtue (the Greek word could be translated as ‘human excellence’) so that his students will become good citizens. Virtue is described as including wisdom, temperance, respect, courage, justice, and purity. This parallels many of the RCP’s professional values, behaviours, and relationships.

Socrates examines the concept of virtue itself: is it one thing, or many things? He asks Protagoras whether the various aspects of virtue as described above are parts of virtue as the nose, eyes, and mouth are parts of the face. Or are they like the identical fragments of gold in a whole gold bar? So, in medical professionalism, are integrity, compassion, altruism, continuous improvement, excellence, and teamwork all separate attributes, or are they all aspects of one central character trait?

Protagoras answers that the parts of virtue are analogous to the parts of a face and ‘Just as, in the parts of the face, the eye is not like the ears, nor is its function the same; nor is any of the other parts like another, in its function or in any other respect: in the same way, are the parts of virtue unlike each other.’³

Socrates gets Protagoras to agree first that justice and respect, and then temperance and wisdom, are not dissimilar in the way he originally claimed; that they are in fact ‘one thing’. What are commonly thought of as separate aspects of virtue are simply different aspects of the same central quality. Socrates then argues that the only evil is lack of knowledge, because it is impossible to behave badly knowing what is good. All action is determined by one’s judgement as to what is good or valuable, so that no one ever consciously chooses anything they know to be bad. Thus wrongdoing is the result of ignorance.

If being virtuous is simply a matter of possessing knowledge of what is good, then the reason people act harmfully to others or themselves is because they only see the short-term gains while ignoring long-term losses that might outweigh them. Socrates compares this with the errors one might make in judging the size of distant objects: ‘the same objects appear to sight [to be] bigger when closer and smaller when far away’. If we were taught the art of calculating these things correctly, to have a more exact knowledge of their relative sizes, we would not act harmfully: ‘it is from defect of knowledge that men err, when they do err; in their choice of pleasures and pains — that is, in the choice of good and evil; and from defect not merely of knowledge but of the knowledge which you have now admitted also to be that of measurement.’³

CAN PROFESSIONALISM BE TAUGHT?

Medical professionalism can similarly be defined in terms of a doctor who knows what is good and acts accordingly. Teaching medical professionalism might be helped by Socrates’ visual metaphor. Can we teach the art of identifying relevant factors in the consultation and calculating their relative ‘size’ (importance) correctly, weighing and adjusting them for nearness or distance, finding out which truly count for more and acting accordingly? As Socrates says: ‘Like a practised weigher, put pleasant things and painful in the scales, and with them the nearness and the remoteness, and tell me which count for more.’³

Doctors who act most professionally are the ones who make right judgements about the importance of factors that are distant and not obvious, not only the immediate healthcare needs of the patient in front of them. In the example of the needs of parents, if trainee doctors were taught the art of calculating things correctly, for example, judging the ‘size’ of parental distress in the context of their child’s major surgery, they would have paid them appropriate time and attention. There are many possible distant factors that may relate to the patient, to their family, to the healthcare professionals, and to the wider healthcare team.

Socrates teaches us to extend our gaze, and to judge that gaze wisely.

Anna De Simoni
Clinical Lecturer in Primary Care, NIHR, QMUL, and a GP.

Acknowledgements
With special thanks to David Misselbrook for valuable help and assistance with this article.

DOI: https://doi.org/10.3399/bjgp17X689665

REFERENCES

“In one’s judgement as to what is good or valuable, so that no one ever consciously chooses anything they know to be bad. Thus wrongdoing is the result of ignorance.”

“Doctors who act most professionally are the ones who make right judgements about the importance of factors that are distant and not obvious ...”