

Ethical Guidelines For Treating AIDS Patients

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AIDS is a [global health issue](#) and a leading cause of medical death. It is the responsibility of doctors to follow the guidelines based on ethical principles to treat such terminal diseases. This disease spread around the world from Sub-Saharan Africa; 70 per cent of the total people with AIDS belong to African countries. The current treatment of AIDS is unable to cure but is slowing the progress of the disease. It is, therefore, necessary to follow the ethical guidelines for vulnerable patients. HIV patients require more care and attention from their families and society. Basic bioethical principles applied to clinical and research ethics are autonomy of the patient, non-maleficence, justice, and beneficence (Stahl & Emanuel, 2017). The autonomy of the patient refers to respecting the independence of the patient in making decisions and protecting those patients who cannot make their decisions. It refers to the commitment to treating patients with respect and confidentiality. Non-maleficence is a principle to assert an obligation to not harm your patient, where painness cannot be avoided than you need to reduce the level of painness. Beneficence means to act in the best interest of your patients. Justice in health means treating your patients fairly, and in research recruitment, you need to select and distribute participants fairly.

Personal ethics are the set of principles that a person identifies within himself or herself with respect to other people and circumstances to deal with in their life routine. Conversely, professional ethics are the set of ethical principles that a person adopts with respect to their business dealings and interactions in their professional life. It has been observed that sometimes professional and personal ethics have clashed with each other, which causes a moral conflict. For example, a doctor might not agree or consider that a course of treatment which is selected by the patient is correct, but according to the professional code of conduct, doctors must admire the freedom and rights of choice of a patient. The clashes between personal and professional ethics are higher in terminally ill patients when life-saving treatments are highly expensive, and patients are more vulnerable. In such cases, it has been observed that some medical staff refuse to carry out the given medical orders or request to change their assigned bed to avoid their personal dilemma. Another example is the issues related to [physician-assisted suicide](#) (PAD) in which a doctor helps a terminally ill patient to assist in dying. It has been declared legal in some states like Oregon and California; it may be against personal ethics for many health professionals.

The conflict in personal and professional ethics is sometimes very intense and causes mental distress to the medical staff. Personal ethics is actually the perception of a person in particular situations, every person perceives differently, and it is not necessary that right and wrong for one person will be the same for all (Joe, 2018). Being a health professional I have experienced these situations much time in my career.

I prefer to change the assigned patient to request my seniors to avoid my personal stress. When I feel

that a certain medical order is violating the laws, I refuse to provide my services. In case the medical order doesn't violate laws, but it is against my personal ethical values so I try to change my bed. In the case of illegal or highly immoral treatment decisions, I try to talk against it and stop such practices in my workplace.

As my personal ethical and moral feelings are concerned, I have set a parameter to act as a medical professional; these ethical issues in the healthcare system can cover both personal and professional responsibilities to deliver compassionate patient care. Here, I will discuss them briefly:

Patient Confidentiality: The history of a patient must be kept private and confidential; this information should not be disclosed to others. Disclosing patient's secrets, medical reports, disease, treatment or other information can hurt the patient, and they have the right to take legal action against the physician, it also has some ethical consequences. In the case of AIDS, health professionals need to be more strict and keep their records more confidential. If the information is disseminated to other parties, so make ensure that it is kept confidential (Baer & Nagy, 2017).

Patient Relationships:

Patients and healthcare providers are not supposed to enter into personal relationships in the course of providing treatment. However, there within certain boundaries, they can have a professional relationship based on trust, sympathy, and morality. Knowing about your patients, their lifestyle, gathering and routine activities can help a doctor in treatment because the patient is considered vulnerable and is unable to protect themselves from the intention of healthcare providers. I personally try to treat my patients with a good and positive gesture because I consider them very vulnerable, especially palliative ill patients.

Malpractice And Negligence:

I consider it my personal and professional obligation to treat all patients equally and provide the best services regardless of any discrimination or favouritism. Malpractice and negligence are always a risk for healthcare providers and patients in terms of their losses. It is my top priority to provide my best services to every patient and take every case seriously, I avoid my personal matters like using phone calls, meeting my friends, etc during my duty time.

Informed Consent:

It is the right of every patient to be informed and knowledgeable about their consent. For any procedure, patients must provide informed consent, which means that the patient is freely agreed to treatment with full information of risks, benefits and possible consequences.

Bioethics was first introduced in 1971, it is a multidisciplinary field including medical humanity, law, health policy, theology, and medicines. Its applications are broader including clinical decision-making, emerging technology, controversial new research, and global concerns. It has played a central role in legislation and influencing policy in recent years. Ledda et al., (2017) argued that to foster a positive culture of ethics in organization employees are more likely to follow these standards. Ethical consideration in the healthcare sector is essential to build trust and confidence in patients. We are moving to the era of increasing medical care options. There are certain diseases like AIDS in which patients are more vulnerable, and these diseases are less likely curable, so healthcare providers need to provide special care to such patients.

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