First, Do No Harm by Lisa Belkin

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Introduction

In this paper, I will clarify the manner in which patient autonomy was taken care of in various cases displayed in the book “First, Do No Harm” by Lisa Belkin. Lisa Belkin spent three years in Hermann Hospital, located in Houston, Texas, to write this book by observing different patients and getting their relevant data. During this period, she observed the ethics committee meetings held at Hermann Hospital. She talked to the doctors, patients, their parents or caretakers, and the committee that was liable to control and make decisions about the ethical practices in the hospital. It is a very tough task to determine what the appropriate medical care treatments for patients are and how they should be handled. According to the research, it is very significant as well as a tough task to handle patient autonomy appropriately and to take decisions in accordance with the ethics in professional medical treatments. It is a very sensitive issue for medical professionals to make decisions about the treatment of patients while respecting patient autonomy (Choi et al., 2024).

The book “First, Do No Harm” focuses mainly on the real-time stories of some patients, their problems and the way they were treated in the Hermann hospital. The author collected all the data about the cases the committee granted permission for, from the observation or through the hospital records. In this review paper, I will discuss some patients’ cases and the way they were treated, according to the author. I will discuss three patients’ stories and their autonomy, as well as the paternalistic methods used, if any.

Discussion

A 15-year-old patient named Patrick was suffering from an intestinal disorder. To get nutrients, he had many surgeries to insert a feeding tube in his heart. His feeding tube continued to get infected, and then many surgeries were conducted to replace the infected feeding tube. This process was not easy for Patrick to bear such pain, and everyone who was in charge of this case knew that these surgeries would not provide a permanent solution for the patient. These surgeries could only increase the life of the patient but not the quality of life. Patrick’s mother left the decision whether or not to make Patrick a DNR (Do not resuscitate) up to his doctor Javier. Javier consulted the hospital’s Ethics committee with this difficult decision. The ethics committee suggested making Patrick a DNR and said he should not be operated on again. The mother of the patient and the doctor decided for Patrick without even asking him about it. Her mother thought he was too young to decide, and it would be more painful for Patrick to know about such things. In my opinion, here, they used a paternalistic method in deciding without discussing it with the patient. At the end of the story, when his feeding tube got infected, he

was operated on again with his consent, but the committee should have considered the fact that Javier made decisions about Patrick based on the emotions and attachment he felt for the patient. This shows that decisions were made with the paternalistic approach. I think it is not justified as the patient, at some point, would have known about the decision. They should have talked with the patient to understand his consent before making any decision rather than hiding it from him, even if he was too young to decide (American Academy of Pediatrics [AAP], 2023).

There was a Latino patient named Armando, who was twenty-four years old. He was admitted to the emergency ward as he was just shot by a bullet in the neck right beneath the brain a few moments ago. His brain got a little damaged due to the bullet. Armando Dimas was paralyzed as the bullet damaged his spinal cord. There were very few, or zero, chances of his recovery and the cost of caretaking Armando was very high for the Hermann Hospital. The patient was admitted as he was supposed to be a potential donor. This was the unethical behaviour of the hospital to think about a patient as a potential donor without even asking the patient. The job of the doctors for this patient was to keep him alive and provide occupational therapy to provide him with the quality of life, as the quantity of life was doubtful. The hospital had to provide him with a special wheelchair. One of the things the hospital did to ensure the autonomy of Armando's family was to let them consult with another surgeon to know better about the condition of the patient. Initially, they left his autonomy with his mother as he was not aware of his situation. But the good thing they did with this case was they asked him about taking off the ventilator or DNR decision. His Prognosis was serious, and they called a meeting of doctors, social workers, and his family. Armando was also there as he was autonomous at that time, which was a good strategy, but they didn't tell Armando that his prognosis was permanent. This is not a good approach for the doctors to keep secrets from the patient (American Medical Association [AMA], 2024).

Another case discussed in this book was of a patient named Landon, who was just born and suffering from spina bifida. The doctors left the autonomy with the parents by asking them about having surgery or not. They discussed everything about the prognosis of the patient, what the surgery could do, and what it could not. I think this is a good approach to treating a patient and telling the parents about the condition of their son before making any decision. But the bad thing they did with this case was that they refused the decision of the parents of not having Landon's surgery and forced them to have surgery for the backbone problem of the baby. This is a selfish way to treat the patient and a paternalistic approach of forced decisions for the parents. The hospital didn't want to get sued and refused the decision of Landon's parent about surgery. This was the unethical behaviour of the hospital staff. They did what they felt was right for themselves and the hospital rather than thinking about the parents of the newborn. Landon's physicians did not want him to die because of this problem and forced the surgery decision on his parents, but actually, that was not just about the care they felt for the patient. That was about the name of the hospital as well as the legal issues that the hospital might face, as they already knew that even after the surgery, Landon would have to be in bed for most of his life. In my opinion, they should have respected the decision of the parents, who hold the autonomy of the patient, rather than enforcing their own decision, which shows their paternalistic method of treating the patient (AAP, 2023).

Conclusion

In conclusion, I would like to discuss the revolution in healthcare and medicine. The book was written a few years back, and the way these patients were handled and treated has been changed. Now, the doctors and the physicians have less power to govern decisions on behalf of the patients. The paternalistic approach to treating the patients is now discouraged and ethical culture is supported by the hospital management (Mordue et al., 2024). Overall book was interesting to read, and it provides the readers an insight into treating the patients in a better way.

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