Dear editor

Revival of ethics is now becoming a universal phenomenon in every field of life. The realm of bioethics within the public health community is actually a prompt to handle the various apprehensions. More and more institutions and hospitals have been introducing a new or extended curriculum on this subject.1

In a population of an estimated 180 million Pakistanis, the literacy rate in Pakistan is only 57%. As a consequence of deprived and pitiable investment in human development and improvement, our country has trailed behind, in contrast to neighboring countries, for instance, the People’s Republic of China and India. Nonetheless, Pakistan is entering the domain of technology,2 and new technologies lengthen lifespans. This has prompted us to inquire about the value and worth of human life when the quality of life is uncertain. In addition, we are confronted with queries of whether some unborn lives ought to be cut short. Our novel versus novice technologies nurture questions about the significance of human life both in the initial and advanced junctures.3 As a result of the exponential growth of information and increased community awareness, it is now established that clinicians must, in addition to being competent and proficient in skills, provide relevant scientific knowledge. Health care providers make decisions within the framework of their own moral basis; this is learnt by the residents and becomes deeply rooted in the process of clinical decision making.4–6 Traditional medical training provides limited guidance to residents and medical students regarding ethical problems and difficulties in the “real world” encountered by health care leaders and health care professionals.

There are only two graduate level bioethics programs being offered in the country aimed at sensitizing the students and professionals to bioethical issues. One of them is from the Sindh Institute of Urology and Transplantation, Karachi with a Centre of Biomedical Ethics and Culture, which initiated a postgraduate diploma in bioethics in 2006 and a Master’s program in 2009. The Aga Khan University Karachi started a Master’s degree program in bioethics (MBE) in 2008.7

In bioethics education, students are deliberately sensitized to learn about ethical dilemmas covering autonomy, privacy, confidentiality, equity, justice, no harm, non-maleficence, beneficence, non-discrimination, futility, informed consent, ascent, organ donation, legalization of illicit drugs, human rights, suicide, euthanasia, self-medication, medical and clinical errors, and others.8 But until recently, medical schools did not teach
ethics formally. Bioethics did not seem to have a place amidst instruction in anatomy, physiology, and clinical medicine. When moral issues did arise, medical students were supposed to learn by observing the behavior of the seniors, who had developed wisdom and good judgment due to years of experience.9 Because investigating bioethical issues is complex, we need to consider what knowledge needs to be developed in order for students to make sense of these issues, to be able to critically evaluate them, and to possibly take action based on this knowledge.10 From the 1970s to the present, a steady stream of literature has insisted on the importance of ethics education and the need to establish an adequate ethics curriculum within medical schools, especially in Pakistan.11 Hence, a formal course on bioethics in all medical and dental institutions in Pakistan is highly recommended to start bridging the gap in this unique field.

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References