

Benefiting and Harming

Concepts and Principles: Beneficence

Beneficence, Principle of: Doing or producing good, primarily with the thought of helping another person; commonly paired with nonmaleficence.

- “We should act in ways that promote the welfare of other people.”
- “We should foster the interests and happiness of other persons and of society at large.”

Concepts and Principles: Nonmaleficence

Nonmaleficence, Principle of: One must not cause harm, primarily with the thought of not harming another person; this is commonly paired with Beneficence.

- *Primum non nocere* (“first of all, do no harm”)
- “Avoid causing needless harm to others.”

We can violate this principle in either of two ways:

- (1) **intentionally doing something** either to harm another or to place them at unnecessary risk,
- (2) **carelessness** (e.g., in dispensing medications) or **avoidable ignorance**.

Although typically understood as a recommendation not to act (“better to do nothing, than to cause harm”), this principle is sometimes used to indicate a requirement to act in order to protect a patient from some harm.

Concepts and Principles: Utility

Utility, Principle of: “We should act so as to bring about the greatest good and the least harm”.

Utility is similar to **Beneficence** and **Nonmaleficence**, but is distinguished by its concern with the sum-total of well being in the world, while beneficence and nonmaleficence are always focused on the person in front of you (e.g., one’s patient).

Concepts and Principles: Hippocratic Ethics

Hippocratic Ethics: A kind of consequentialist moral theory based on the Oath of Hippocrates.

- Similar to utilitarianism, except that the health-care provider following this ethic is concerned solely with the well-being of the patient currently being treated
- Rather than relying on the principle of utility, the Hippocratic ethicist relies on the principles of nonmaleficence and beneficence.

Declaration of Geneva (1948)

This professional oath, taken by medical students upon receiving their degrees, is a modernized version of the Oath of Hippocrates, and was adopted by the 2nd General Assembly of the WMA in Geneva, Switzerland, in 1948.

AT THE TIME OF BEING ADMITTED AS A MEMBER OF THE MEDICAL PROFESSION:

I SOLEMNLY PLEDGE to consecrate my life to the service of humanity;

I WILL GIVE to my teachers the respect and gratitude that is their due;

I WILL PRACTISE my profession with conscience and dignity;

THE HEALTH OF MY PATIENT will be my first consideration;

I WILL RESPECT the secrets that are confided in me, even after the patient has died;

I WILL MAINTAIN by all the means in my power, the honour and the noble traditions of the
medical profession;

MY COLLEAGUES will be my sisters and brothers;

I WILL NOT PERMIT considerations of age, disease or disability, creed, ethnic origin, gender,
nationality, political affiliation, race, sexual orientation, social standing or any other factor
to intervene between my duty and my patient;

I WILL MAINTAIN the utmost respect for human life;

I WILL NOT USE my medical knowledge to violate human rights and civil liberties, even under
threat;

I MAKE THESE PROMISES solemnly, freely and upon my honour.

Concepts and Principles: QALY

QALY: Quality-adjusted life year (QALY, pronounced *qwah-lee*) is the unit of measurement for comparing the overall benefits of different healthcare expenditures, e.g., if you have \$10 million to spend each year, will there be more benefits by spending it on kidney transplants to otherwise healthy individuals or on insulin-management of Type 2 diabetes (assuming more demand than supply with each of these)?

The assumption with QALY is that we are interested not just in maximizing the number of lives saved (with our medical resources), but life-years (so, if forced to choose, a 15-yr-old should be saved instead of an 85-yr-old, since doing the former will win more life-years. Similarly, it assumes that we are interested in maximizing not just life-years, but also the quality of those years (for instance, 10 extra years living in full health is worth more than 10 extra years living as a bed-ridden invalid).