

### CAN ALTRUISM SURVIVE?

Medicine is rediscovering professionalism. Increasing numbers of medical organisations are posting their professional principles in the public domain, a steady stream of journal articles define and debate medical professionalism, and medical schools are including professionalism in their curricula.

Despite this, one constant remains. At the core of medical professionalism is the social contract granting a privilege to provide services, underpinned by expert knowledge and skills, ethical conduct and self-regulation. However, professionalism is also a personal thing, and nothing tests a doctor's professionalism more than the tension between self-interest and the patient's best interests — in short, altruism.

But there are rumours that altruism in medicine is all but dead. Surveys show that, while patients respect their individual doctors, the perception of a self-serving profession, preoccupied with protecting its patch and income, persists.

Furthermore, the notion of professionalism is distorted when anyone claiming skills and providing consumerist-type services is a "professional", and medicine's intellectual capital and skills are advertised for a price. Indeed, mercantile medicine and altruism are like oil and water.

Eminent US ethicist, Edmund Pellegrino, argues that medicine has unique attributes that oblige doctors to eschew self-interest. The nature of illness forces patients to trust doctors in an unequal relationship — one in which a doctor's knowledge and skills are not proprietary, but have been acquired through the privilege of a medical education. This knowledge is not individually owned to be used for personal gain, but is held in trust by the profession for the good of society.

Ultimately, the survival of altruism depends on individual choice and collective commitment.



Martin B Van Der Weyden

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