

Medical Care is a Sacred Profession

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The COVID-19 pandemic has ravaged the world for two years, which evokes a lot of emotions in me as a doctor. Without a strong sense of mission and willpower, medical and healthcare personnel wouldn't bravely don several layers of protective gear and combat the virus at the frontline around the clock with no regard for their personal health and safety. They are deeply devoted to saving and curing their patients and don't dare to return home for fear of infecting their loved ones. They stay in hospital dorms and don't reunite with their family members as long as they are on rotational duty in the dedicated wards. Whenever I think of their resolution and determination to save patients with no regard for their own lives, I am filled with awe. Being a doctor is a sacred profession and our patients are our sole purpose of existence.

In the Merriam-Webster Dictionary, "profession" is defined as follows: The act of taking the vows of a religious



community; an act of openly declaring or publicly claiming a belief, faith, or opinion; a calling requiring specialized knowledge and often long and intensive academic preparation. According to this definition, professionalism requires sentiments comparable to religious feelings in addition to a willingness to contribute to society. It also requires a certain level of dignity, high moral ground, and a sense of propriety, and a clear understanding of what is

appropriate and what not.

Doctor-patient relationships are characterized by sincere concern. The value of the lives of healthcare personnel is unlimited and cannot be measured in monetary terms. This preciousness is perfectly demonstrated in every medical practitioner who boldly faces the challenges posed by the COVID-19 pandemic worldwide.

This has been the essence of the healthcare profession for thousands of years. The ubiquitous patient-centered philosophy entails the following two tasks: alleviation of pain and prolongment of life. Since ancient times, our medical predecessors have espoused the following five pillars of medical ethics (ABCDE):

- 1. Autonomy**, which means that a patient has the ultimate decision-making responsibility for his/her own treatment and is not subordinate to his/her doctor but must follow the doctor's instructions.
- 2. Beneficence**, which implies a moral duty to promote the course of action that is in the best interest of the patient.
- 3. Confidentiality**, which requires medical practitioners to maintain strict confidentiality of the secrets disclosed

by patients who bare their souls and entrust their lives to them.

4. Do not Harm (Non-maleficence), which states that a medical practitioner has a duty to do no harm or allow harm to be caused to a patient through neglect.

5. Equality-Justice, which implies equal access to health care irrespective of age, skin color, ethnicity, and wealth; medical care should not be a privilege of the rich but a right enjoyed by all citizens regardless of their financial ability.

This clearly shows that medical care is a sacred profession whose true value lies in genuine concern between humans.

However, modern health care has lost its way in the jungle of rapid technological advances such as Computer Tomography, Nuclear Magnetic Resonance, Da Vinci Surgical System, and AI-based health care. Despite the fact that these technologies are capable of targeting and solving health issues in a precise manner, they are getting more and more expensive and cannot replace fundamental doctor-patient relationships. Since both doctors and patients are humans, their relations

belong in the category of interhuman relationships which can be divided into the following three dimensions: cause no harm, respect, and assistance. For healthcare professionals, the lowest tier is the bare minimum required by law. The second tier consists of maintenance of ethics and morality, respect, and doing no harm to the patient. The most important dimension is the third tier, which requires offering a helping hand to patients. There are no legal provisions in any country that require medical practitioners to help other people, but this is indeed the essence of medical care.

In the earliest days, medical care was a simple one-on-one interaction since there were no advanced examination instruments. The American proverb “One ill, one pill, one bill” describes this simple process which consists of the doctor treating one kind of disease, prescribing one kind of drug, and issuing one bill. The golden days of medicine were characterized by this purest form of doctor-patient relationships. This concept underwent significant changes after the establishment of hospitals for admission and treatment of patients. Since running a hospital is associated with

considerable costs, economic benefits are a key prerequisite for sustained operations. For instance, technical or administrative personnel can schedule patient examinations in 15-minute intervals for each X-ray machine in the Department of Medical Imaging, which represents the most beneficial arrangement and optimal usage of these devices. Medical apparatuses and instruments are not only pricey but also subject to depreciation and maintenance and must therefore be deployed in a cost-effective manner. The patient-centered care concept can be illustrated with the following example: A disadvantaged patient residing in Ruisui Township in Hualien County has to spend 3,000 NTD on the taxi fare for the round trip. The aforementioned concept is clearly violated if he is told to come back for his examination the following day for the reason that the hospital is fully booked on that particular day. Under the premise of optimal usage rates, hospitals should still leave room for flexible adjustments for the benefit of patients.

Due to the current trend of increasing fragmentation and over-specialization of medical care, physicians tend to place too much focus on diseases and forget

that the patient is the core of medical care. The term “White Tower” was coined to stress the phenomenon of self-isolation and neglect of core values in the healthcare industry. Dharma Master Cheng Yen therefore constantly exhorts all physicians to focus on the patient in the treatment process. Frankly speaking, it is much easier to treat diseases than provide genuine care for patients encompassing the physical, mental, and spiritual dimensions, which is a daunting challenge. The Sutra of Infinite Meanings describes how “a ferryman, despite his own illness still delivers others in his solid boat to the other shore” and stresses that “after removing suffering, Bodhisattvas preach the Dharma.” This is the spirit of holistic physical, mental, and spiritual care. The Tzu Chi volunteers serve as our role models, and we strive to emulate their achievements in turning help seekers with their palms up into helpers with their palms down.

Catholicism, Christianity, Islam, and Buddhism all preach that “giving is a greater blessing than receiving”. This message embodies the spirit of religion. I sincerely hope that all Tzu Chi medical practitioners fully realize that helping

others is a blessing rather than merely a link of the industry chain. If our sole purpose is to make a living, the true meaning of health care provision is lost, and our careers become unsustainable.

It is often said that “the smile of a patient is the most beautiful in the world.” Medical practitioners should bring happiness, joy, and bliss to their patients and bear all their problems and difficulties. This is the credo of the medical vocation. It is further of paramount importance that we gain peace of mind and spiritual ease in this process. I firmly believe that this is the essence of medical care. The Taiwanese health insurance system which relies on allocated tax revenues to benefit all citizens is our greatest blessing. If we visit other countries that lack national health insurance systems such as the Philippines, Indonesia, Malaysia, Sri Lanka, Vietnam, and Cambodia, we fully realize what a boon our system is to our country. Our great success in the field of epidemic prevention must also be attributed to government policies, the National Health Insurance system, and our healthcare professionals who are driven by their strong sense of mission and willpower.