EDITORIAL

DO WE NEGLECT PATIENTS?

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When a patient walks into a consultant's room, he/she has a specific symptom/set of symptoms to tell the physician, based on which the story kicks off; differentials are considered, certain tests are ordered, and a treatment/management plan is devised. In due course of time, the whole scenario becomes monotonous, mechanical, and robotic. Something gets forgotten in this process- the patient himself, as an entity, a living being, an individual possessing a body, mind, emotions, fears, and anxieties. The human mind is so complex, layer upon layer that a mere one to two minutes fails to make evident what is going on within him.

The question arises "Do we neglect patients"?

The critics of the medical profession, who every now and then come up with a scandalous piece of information, may be dismissed as ill-informed or biased, yet patient neglect is an issue of increasing public concern from around the globe. The WHO has recognized deficiencies in patient safety as a global healthcare issue that needs to be addressed. Medical negligence is an act or omission by a health care provider, where the care provided deviates from accepted standards of practice and causes injury or death to the patient. It is due to such errors that patient deaths in the US range between 44,000 to 98,000 per year. The WHO report says that around 1 in every 10 patients is "harmed" in health care and more than 3 million deaths occur annually due to unsafe care. This happens in the developed world as well as in resourceconstrained countries like ours.³ Further elaborating, the report informs us that above 50% of harm (1 in every 20 patients) is preventable; half of this is attributed to medications. 1,3

"First, do no harm" is the most fundamental principle of any health care service. No one should be harmed in a health care facility; however, the available evidence points to a huge burden of avoidable patient harm across the developed and developing world health care systems. This has major ethical and financial implications.

Whose responsibility is patient safety and prevention of patient harm, then?

Patient neglect is an issue of increasing public concern worldwide despite the technological advancement of healthcare systems. It is difficult to measure in specific terms or in clinical outcomes due to the complex nature of interactions involved in the whole process. The responsibility for this neglect is equally shared by the practitioners, the healthcare staff, the institution, the government, and the patient.

Institutional factors contributing to patient neglect include the work environment (enabling or otherwise), resources, management, and leadership.

At the individual level, high workloads, stress, and poor work environment create demotivation in the staff, who resultantly are unable to perform to their full ability to provide optimal care.⁴

One of the most important aspects of the failure of health care is at the governmental level; governments in underdeveloped regions have not made health a priority. The process of neglect that starts at the primary healthcare level eventually leads to the overburdening of the tertiary care system. The part the government should play is to enhance its spending on healthcare, improve the infrastructure, and exercise control on the medical practices/curb rampant quackery; thereby ensuring patient safety.

And at our level...?

"Treat the whole patient, not just a particular disease" used to be the guiding principle for most clinicians. The medical fraternity is moving away from their core skill of history taking and general physical examination, which is indispensable. This time-tested, centuries-old tradition will have to be revived, and we know it already, nothing gives a better clue to the disease than a detailed interview of the patient, coupled with a good examination. The time thus invested is not wasted as we might think. In fact, it goes a long way in determining

appropriate treatment strategy, helping not only the patient but the physician as well, if only we give it a deep thought!

Understanding the physical and emotional needs of the patients can help in providing optimal care and thus improve outcomes. The patient-centered care approach helps in building trust between patients and their healthcare providers.⁵ A holistic approach focuses on a person's wellness and not just the illness that drives proper decisions.

Although we do not have a true unbiased picture of the patient neglect in our population, it can be said with certainty that the situation must be worrisome!

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