



**PANDÉMIES, ÉTHIQUE, SOCIÉTÉ**



***Ethics in action : GPs facing flu pandemic***

**Jacques de Haller, FMH (Fédération des Médecins Suisses)**

Pandemic preparedness could be depicted as meddling viruses, governments' plans, boards of experts, patients and doctors. The patient/doctor relationship is the subject of a growing interest. The therapeutic intervention of a doctor is basically rooted in verbal contract, free of any constraint, wanted and accepted by both sides. This is fundamental whatever medical expertise is involved. Something very specific happens between these two persons and it must be considered before deciding measures. In order to take relevant ones, the patient/doctor relationship should never be put aside.

Respect of medical secret is part of the contract. When infectious diseases are mentioned, compliance with the obligation of secret has a huge importance. Medicine has been practiced for thousands of years under such rules. To some extent, medicine is conversations. Patients tell doctors about pains, fevers, feelings and much more.

**Drawing the consequences of what the patient/doctor relationship really is**

A lot of things are heard by doctors. Sometimes patients shouldn't want to tell them but once they are told, they have to remain secret. A general practitioner's office is a place full of small compromises. Many things that belong to life have to be taken into account, not only scientific ones. A lot of little problems going beyond medicine are exposed during conversations. A GP's job is to defend "his" patient. No procedure can rule the way doctors have to treat the huge amount of small human problems they face in their day to day practice. It referred there to the "real life", not to any abstract plan supposed to depict reality. No general protocol is applicable but maybe GP's offices are regulated by a lot "micro-protocols".

Thus, the daily life of GPs is full of conversations, compromises, mitigations... It is quite the same for most other specialties. Our plans have to reflect what this daily life is. In Europe, a major shift has been brought by the progressive fading of paternalism in patient/doctor relationship. GPs have become less and less paternalistic. Personal responsibility is (or should be) prevalent. Patients are much better informed. They resort to the Internet. They often discuss treatment and they are actively involved in prevention. A deep change has occurred. But doctors keep an incredible experience of humanity and of society. In the field of pandemic preparedness, they are able to provide a specific view on what is going on, of what should and shouldn't be done.

### **The need for consistent information**

What can get motivate doctors is something keeping pace with real life. They are not so interested in abstract procedures or in administrative planning.

A flu pandemic won't be managed by a simple switch of procedures, the fundamental reality of Doctors doesn't permit that switch so easily. Doctors will definitely need effective support. Clear rules can be part of such a support and therefore lend the basis for sustained trust in patient/doctor relationship. Rules must be really binding, to be effective, to avoid remaining mere "orientations". Only real implications matter, not wishes in extreme situations.

To cope with a major health crisis, doctors will tend to become "agents of state". And they will need checklists. This is probably not required in normal times. But a pandemic flu would bring extreme situations. That's why what we would have and what we would not have to do must be made clear. Information released by authorities in crisis time has to convince doctors. Otherwise they will never be able to convince patients. To explain what has to be done to face flu pandemic, doctors must support the grounds of decided measures.

A time in which many more deaths than usual will be reported daily won't be easy to manage. In such a time, doctors are expected to communicate, to be sympathetic and to be transparent. This means that hidden agendas, false hopes and help to compromisers or mitigations have to be banned. As has been said, to reach this transparency goal, doctors will count on help, support, consideration, and clear rules.