

Editor's Desk



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Chief Editor

FIRST DO NO HARM,

Among the many pillars of Medical Ethics ' Do No Harm ' stands tall and is deeply rooted in our contemporaneous medical practice. .It is unethical to inflict more harm than good on patients. The primary focus has always been Harm Avoidance both direct and unintended. ' Your life in my hands' holds true and well seeded in our medical profession and endows us with giant responsibility. . Wellbeing of patients must be the focus of our efforts. Doctors are also human beings and prone to blind spots. In recent years we are exposed to complex diagnostic and therapeutic procedures. The harm which potentially can be linked to be inflicted on patients include physical, psychological, emotional, cultural and economic aspects. Dissecting out the spheres of activities of potential harm Diagnostic, investigations, medication errors, surgical procedures and the like play a major role. Treatment of illnesses patients don't have, inadequately applying drug interactions and sensitivities, fouled up operative procedures and investigations, phantom illnesses, use of unproven medications and of poor value, delayed diagnosis and treatment are a few scenarios we can count towards causes of harm. Diagnostic errors are not uncommon in Emergency rooms, General Practice and internal medicine. Apparently one in ten are incorrectly diagnosed. By the time patients get to specialists much of uncertainty about diagnosis is resolved. Harm inflicting, stems from inadequate history taking, ineffective clinical examination or none at all, misinterpreting Lab results, poorly coordinated medical systems, equipment failure and cognitive errors. Vulnerable times for harm induction are physician fatigue, sleeplessness, stress, crowding of work, physician's burnout issues, bad habits.. As part of harm reduction and avoidance ,we all should have Sherlock Holmes model of diagnostic thought, analytically intuitive and think of patients holistically. Trust but verify philosophy, minding our language, not to involve in areas beyond our expertise, guarding against thinking errors, tailoring management to individual needs and be a stickler to moral principles. Medical knowledge has grown so vast, no single human can know it all. As a duty of candour open admittance should be the norm in case harm occurs. Finally unintended medical consequences are acceptable if intended consequences are legitimate and harm is proportionately smaller than benefit. Always weigh harm benefit ratio in every individual.

**HAPPY HOLI
TAKE CARE!**

Best wishes

**DR. A. MURUGANATHAN
CHIEF EDITOR**