

THE HIPPOCRATIC OATH IN MODERN MEDICINE: A CRITICAL EXAMINATION OF ITS HISTORICAL TRAJECTORY, INTERPRETATIONS, AND APPLICABILITY

Onyegbule Kelechi G, Onyegbule Ezinmadu G¹

Abstract

Almost all medical schools include some type of professional medical oath in their graduation ceremonies. The Hippocratic Oath, which was written over 2,400 years ago, is the oldest and most widely known of these oaths. The Hippocratic Oath's content has altered over time, particularly in the twentieth century, and its authorship has been disputed. This article explores the history of the Hippocratic Oath, from its traditional form to its current variations. While adopting the analytical method, this article aims to explain the Hippocratic Oath's durability in the face of these obstacles, drawing on Hippocrates' historical significance and the Hippocratic tradition in Western medicine. The findings reveal that, since its inception, the Hippocratic Oath has undergone significant evolution and reinterpretation. In conclusion, the article maintains that the Hippocratic Oath remains a foundational ethical framework in modern medicine. In recommendation, medical practitioners should reflect on the Oath's principles, adapting them in order to address medical ethical challenges in our modern time.

Introduction

The father of medicine is regarded as Hippocrates due to his profound contribution to the field. His students had to take an oath to the Greek pantheon's healing gods, Apollo, Asclepius, Hygeia, and Panacea, before they could learn medicine. This was done to let them realise how serious their position was and what was required of them as healers. Since 400 BC, the oath has been in use². In addition to being a doctor, Hippocrates was also a philosopher. He believed in the scientific art of healing. At a time when there were no laws or legal proceedings and healers were regarded as almost divine, the oath establishes the standards of behaviour. It wasn't until the early 19th century that the oath became universal. Various cultures, however, have their own oaths prior to that. The Charaka Samhita was sworn by doctors in India. It gives doctors the right to turn away patients who the king did not approve of³. This demonstrates how the sociocultural context of the era in which they were made influenced oaths. Following the same pledge without staying up to date with the times seems challenging.

Based on the above highlights, this paper will look at the Hippocratic Oath as a foundation of modern medicine, it will go deeper in elucidating the Hippocratic Oath. In the lens of the evolution and adaptation of the Oath, the modern interpretations of the Hippocratic Oath will also be examined. The historical trajectory of the Hippocratic Oath will also be traced, and the Oath will be critiqued on the basis of its relevance and applicability in our today's modern world, and finally, the conclusion will be drawn.

Hippocratic Paradigms: Foundations of Modern Medicine

Hippocrates was born in 460 BC on the island of Cos, near what was then known as Asia Minor. He is believed to be a direct descendant of Aesculapius, the Greek God of Healing. Hippocrates travelled much during his lifetime and died in Larissa in 355 BC, capping an excellent professional career. He is said to have taught his students and operated an open-air clinic beneath a massive oriental plane tree

¹ Onyegbule Kelechi Goodluck, LL.B, BL, LL.M(Oil and Gas), Ph.D(Medical Law), Head of Department of Public and Private Law, Alex Ekwueme Federal University, Ebonyi State, Founder; Leeds Legal, Fellow, Institute of Medical and Health Law, Nigeria and Medical Law Consultant. onyegbule.kelechi@funai.edu.ng, +2347034275817;

Onyegbule Ezinmadu G, MB.BS, Resident Doctor, Federal University Teaching Hospital, Owerri; chigodiva2@gmail.com.

² J Romankow, 'Hippocrates and Schweitzer – Comparison of their Concepts of Medical Ethics'. *Arch Hist Filoz Med*. [1999] 62: 245-50.

³ IA Menon, HF Haberman, 'The Medical Students' Oath of Ancient India'. *Med Hist*. [1970] 14: 295-9.

(*Platanus orientalis*). The tallest plane tree in Europe still stands tall in the town of Cos. However, some academics argue that this tree is just 500 years old and thus unlikely to be the one associated with Hippocrates. The tree's derivatives have been taken to prestigious academic institutions throughout the world, including Yale University, the University of Glasgow, and the National Library of Medicine in the United States⁴.

The majority of his fame as a doctor is derived from his study of the more than 100-book corpus known as *Corpus Hippocraticum*; very little is known about the man himself. Given their differences in tone, style, and medical doctrine, it is highly probable that multiple authors contributed to this book. The teaching concepts discussed are surprisingly contemporary, despite the fact that a large portion of it is out of date. First published in 1526, this colossal work was later translated into English. Hippocrates must be given credit for separating philosophy and medicine, despite the fact that most of his writings are irrelevant and his expertise is insufficient. He had a key role in introducing scientific techniques of rigorous observation and reasoned analysis. He denied that God's retribution was the cause of the illness. Rather, he thought that the human body was made up of four humours: blood, phlegm, yellow bile, and black bile. He also thought that the body had four basic qualities: hot and cold, dry and moist. Furthermore, he believed that disease was produced by a disruption in the relative preponderance of the humours, and that it is the responsibility of the doctor to restore this equilibrium in a sick patient. He discussed how diet, occupation, and climate might contribute to disease in one of his publications. In order to determine whether diseases are more common or likely to become so in their area of practice, he recommended doctors to monitor the dominant winds, the water supply, the soil type, and the customs of the populace. He introduced epidemiology for the first time by pointing out these elements of illness causation⁵.

He was a keen observer of clinical signals and believed in systematic evaluation. He advised the inspection should begin with the patient's face. "Hippocratic facies" to describe a patient with "nose sharp, eye hollow, temples shrunken, ears cold and with their lobes turned outward, the skin of the parched face and tense, the colour yellow or very dusky" to describe impending death is a testament to his wisdom in providing a vivid description of what we now know as a "low cardiac output state." Similarly, his description of "the breathing was rare and large" is a good fit for Cheyne-Stokes respiration. Hippocrates was known for the vividness of his depictions. Additionally, he was able to predict the course of symptoms and the likelihood of a deadly problem. 'Prognostic,' a passage from one of his best-known works, perfectly captures it. It states, "I believe that practicing forecasting is a great thing for the doctor. If he is aware of what will happen later based on the current symptoms, he will administer treatment more effectively⁶."

Hippocrates made limited use of medications in his treatments. He was presumably aware that most diseases have a natural remedy and believed that 'the natures are the physicians of our diseases.' Nonetheless, he did not hesitate to seek surgical treatment when necessary. His descriptions of surgical methods ranged from the use of tar to treat wounds as an antiseptic to directions for trainee surgeons. In his brief book 'In the surgery,' he said that the nails should not surpass or fall short of the finger tips. Fingers are finely formed, with thumbs opposing forefingers, and practise all of the operations with each hand separately and together. While he had a distinguished career as a physician and surgeon, he was brave enough to share both his accomplishments and failures with equal ease. He did not stop from citing a high fatality rate of 60% in 42 of the incidents covered in his book "epidemics", and by so doing, he provided an example of record keeping⁷.

⁴Saurabh Kumar Gupta, 'Hippocrates and the Hippocratic Oath'. *Journal of the Practice of Cardiovascular Sciences* [2015] 1(1): 81-86. DOI: 10.4103/2395-5414.157583.

⁵*Ibid*

⁶*Ibid*

⁷*Ibid*

Hippocrates is credited with the usage of aphorisms (Greek *aphorismos*), which are original ideas expressed in a clear and memorable way, in addition to many other firsts in the area of medicine. "Do not disturb a patient during or shortly after a crisis, and try no experiments, neither with purges nor with other irritants, but leave him alone" is one such proverb that is worth highlighting. In a similar vein, he said, "it is better to give no treatment in cases of hidden cancer; treatment causes speedy death, but to omit treatment is to prolong life." These aphorisms may not be accurate in today's world of emergency medicine and advanced oncology, but they were probably appropriate for physicians back then. He instructed the doctor to be prepared to do the right thing at the appropriate moment, which required cooperation from the patient, attendants, and external circumstances. Thus, while he was worried about physicians' behaviour towards their patients, he was cautious enough to emphasise his expectations of patients and their relatives. In summation, he made significant contributions to all disciplines of medicine and provided the groundwork for their continued evolution throughout generations. He has been dubbed the "father of medicine" because of his proficiency in the preclinical, clinical, and surgical areas of medicine⁸.

Elucidating the Hippocratic Oath

According to Webster's dictionary, an oath is a noun that literally meaning "a formal and serious promise to tell the truth or do something." According to the Oxford Dictionary, this term means "a solemn promise, often invoking a divine witness, regarding one's future action or behaviour." The Oath has received so much attention in recent years that it appears to have become a representation of the gold standards of any profession. And why not? In an era where moral and ethical norms are quickly disappearing, this hallowed set of pledges is expected to be accepted equally by all stakeholders. Almost all medical professionals enjoy the moment of their oath ceremony and are delighted to be part of such a tradition. Unfortunately, while there are great expectations and enthusiasm for oaths, the applicability of the much-celebrated Hippocratic Oath in the modern period is being questioned. As previously stated, contrary to expectations, historians do not know who penned it. The belief that this was not authored by Hippocrates derives from the fact that parts of its contents contradict concepts found in other texts thought to be written by Hippocrates. Given how little is known about the original Oath, it is unclear what significance it had in the Greek age. In fact, some researchers believe that there were numerous Oaths at the time, of which the Hippocratic Oath is the only survivor. The Oath is hardly mentioned in the first 1500 years after it was written. The Oath was used for the first time in history in 1508 at the University of Wittenberg in Germany⁹. The inclusion of some pledges that appear to represent Christian doctrine may be explained by the literary stillness that lasted for over a century and a half and its return in the Middle Ages. Although in a modified version, the Hippocratic Oath, which was translated into English in the 18th century, is becoming more and more common in medical schools across Europe and Africa¹⁰.

The Hippocratic Oath is in conflict with both ancient Greek customs and other Hippocratic writings. According to Plato, life began at birth, and both he and Aristotle supported infanticide and abortion for a number of reasons, including medical ones. In this way, the Oath may really represent Pythagorean thought, which supported the idea that life begins at conception. Furthermore, if Edelstein is to be accepted, Pythagorean influence also contributed to the Oath's suggestion that the medical and surgical specialities be separated. When Edelstein asserted that the Oath was a Pythagorean manifesto rather than the statement of an unwavering code of conduct for medical professionals, he came to a very firm conclusion¹¹. However, some historians disagree with this reading, arguing that the Oath

⁸*Ibid*

⁹L Smith, 'A Brief History of Medicine's Hippocratic Oath, or How Times have Changed'. *Otolaryngol Head Neck Surg.* [2008] 139: 1-4.

¹⁰SH Miles, *The Hippocratic Oath and the Ethics of Medicine* (New York: Oxford University Press, 2004).

¹¹L Edelstein, *The Hippocratic Oath: Text, Translation and Interpretation* (Bull Hist Med Suppl 1943). [Reprinted by Ares Publishes, Chicago].

generally aligns with the Greek philosophy of the time. It's interesting to note that the well-known phrase "first do no harm," which comes from the Latin "*primum nonnocere*," is not included in the Oath, despite popular perception. Hippocrates wrote in Greek rather than Latin, and Thomas Inman probably started this trend in 1860¹².

The tenacity of this oath is remarkable, regardless of the truth about its composition, authorship, and precise chronology. The Hippocratic Oath, which is ceremonial and optional, is comparable to the oath taken by a judge, president, or other public official upon assuming office.

Evolution and Adaptation: Modern Interpretations of the Hippocratic Oath

The Oath is available in a variety of contemporary forms. The most well-known of them is the 1948 Geneva Declaration, which was draughted by the World Medical Association following World War II. Later, this was changed in 1968, 1984, and 1994. In 2005 and 2006, it was also subject to two editorial modifications. In contrast to the Oath, the Geneva Declaration is merely a pledge and does not call for the presence of gods. It is not, however, an agreement to follow institutional regulations or a bargain between people. Louis Lasgna, the dean of Tufts University, wrote another widely used version in 1964¹³. A modified version of the Oath has also been proposed by the British Medical Association¹⁴. Many medical colleges and universities have created their own oaths or declarations, often allowing student bodies to participate in the document preparation process or even ordering each student to write his or her own personal oath¹⁵.

Three of the United Kingdom's 27 medical schools utilised the Hippocratic Oath in 1994, four used the Geneva Declaration, and seven used other oaths or declarations. The United States exhibits a similar trend. Only 24% of US medical schools administered an oath in 1928; by 1958, that number had increased to 72%, and by 1989, it had risen to an astounding 98%. A quarter of these medical schools utilise the Geneva Declaration, while over half adopt some form of the Hippocratic Oath¹⁶. The Oath is not standard in many developing countries of the world, which is why in most countries, it is not in line with the global trend. Charak is credited with writing the oath that is currently in use at the All India Institute of Medical Sciences in New Delhi.

However, even if the Hippocratic Oath's original content has changed more and more over the twentieth century, the number of schools that use it has increased steadily. To put it briefly, a growing number of medical students were promising to do less and less as the focus of the oath ceremony changed from the conduct of physicians to the need to honour patients' expressed rights.

Tracing the Historical Trajectory of the Hippocratic Oath

Medical schools are replete with ritualistic ceremonies. There are white-coat ceremonies, stethoscope ceremonies, and convocations using cadavers. Perhaps the oldest rite of passage is the reading of the Hippocratic Oath, which has been included into graduation ceremonies at many medical schools across the world for the past 500 years¹⁷. Hippocrates is considered the father of medicine. Before being taught medicine, his followers were had to make an oath to the Greek pantheon's healing Gods: Apollo, Asclepius, Hygeia, and Panacea. This was to assist them grasp the gravity of their predicament and what is required of them as healers¹⁸.

¹²DK Sokol, 'First Do No Harm Revisited'. *Br Med J* [2013] 347: f6426.

¹³L Lasgna, 'Modern Hippocratic Oath'. *Med Econ*. [1995] 11: 197-202.

¹⁴ED Robin, 'The Hippocratic Oath Updated'. *BMJ* [1994] 309: 96.

¹⁵*Ibid* (n 8).

¹⁶S Finfer, N Theaker, R Raper and M Fisher, 'The Hippocratic Oath Updated. Surrogates' Decisions in Resuscitation are of Limited Value'. *BMJ* [1994] 309: 953.

¹⁷*Ibid* (n 9).

¹⁸*Ibid* (n 1).

The modern Hippocratic Oath is an oath or declaration taken by many graduating medical students or physicians, proclaiming their commitment to practicing medicine justly and ethically. The Hippocratic Oath is ceremonial and non-obligatory, similar to the one given by a judge, president, or other politician when sworn into office. Nonetheless, many institutions consider it a rite of passage for physicians, and the vast majority of medical schools in the United States, for instance, include some form of swearing in their graduation ceremonies, with almost half of them using a variation of the Hippocratic swearing¹⁹.

Where did this ancient custom come from? What is the Hippocratic Oath's history? The oldest and most well-known medical oath is the original Hippocratic Oath, which was written in ancient Greek and was simply named "Oath." Twelve things make up the classic Hippocratic Oath's content, according to Orr and other researchers²⁰, the covenant with the deity, the covenant with the teachers, the commitment to the students, the covenant with the patients, Justice, chastity, confidentiality, accountability, appropriate means, appropriate purposes, and limits on means and ends.

The identity of the author of the Oath is unknown to historians. And although its exact age is unknown, it is generally believed to have been written in the fourth century BCE by the famous Greek physician Hippocrates, who is frequently referred to as the 'father of Western medicine.' Because so little is known about the original Oath, it is still unknown how common it was or how much weight it held in its day. Indeed, some academics hypothesise that the Hippocratic Oath is the only surviving document of numerous oaths that may have existed during that period²¹.

It took some time for the Oath to develop into contemporary medical ethics. For the first 1,500 years following its creation, the Oath is hardly mentioned in any way. In the middle ages, church scholars rediscovered the Oath and started interpreting or changing it to fit with Christian teachings of the time. In 1508, the Oath was used for the first time outside of Greece at the University of Wittenberg in Germany²². Ultimately, the Oath was first translated into English in the eighteenth century, and medical schools in the US and Europe started using different versions of the Oath in their commencement exercises²³.

One of the main reasons for the Oath's delayed success could have been the pagan religious nature at its inception. Even if they agreed with the following statements, Western monotheists were unlikely to find the swearing by Apollo and Asclepius appealing. The part of the Oath that has seen the most change over the years is actually the first sentence. For over a millennium, there have been variations of the Oath that substitute the Christian God for Apollo. More pluralistic variants of the Oath have recently been developed, allowing one to swear by 'whatever I hold sacred'²⁴.

Judging from the foregoing, numerous institutions have altered the remainder of the Hippocratic Oath. The most common amendments include the removal of the prohibition on sexual contact with patients, the prohibition on the use of abortion drugs, the prohibition on euthanasia, and the agreement to be held accountable for upholding the Oath. While nearly half of schools have decided to continue using the Hippocratic Oath with some modifications or modernisation to make it more aligned with their own principles, some institutions have elected to administer a different medical oath. Other professional medical oaths in use include the Declaration of Geneva, which was written in 1948 and revised in 1983 in response to medical crimes committed during the Nazi regime in

¹⁹RD Orr, N Pang, ED Pellegrino and M Siegler, 'Use of the Hippocratic Oath: A Review of Twentieth Century Practice and a Content Analysis of Oaths Administered in Medical Schools in the U.S. and Canada in 1993'. *J Clin Ethics* [1997] 8: 377-88.

²⁰*Ibid*

²¹*Ibid* (n 16).

²²*Ibid* (n 14).

²³*Ibid* (n 20).

Germany, and the oath written in 1964 by Louis Lasagna, academic dean of Tufts University's School of Medicine. Other schools have created their own oaths, sometimes enabling the student body to arrange the wording and even ordering each student to write his or her own personal pledge²⁵.

Despite a sharp rise in medical oaths given at graduation during the 20th century, the conventional Hippocratic Oath has come under intense scrutiny and reform. Given the numerous changes schools have made, some contend that its material is out of date. According to others, the Oath leaves out a number of contemporary principles that are essential to medical practice, including accountability in collaborative patient-care models, research ethics, and social or legal obligations²⁶. Last but not least, the validity of the Oath itself was called into question when Ludwig Edelstein (1902–1965), a professor of medicine at Johns Hopkins University, conducted research suggesting that the Hippocratic Oath as we know it might have been draughted by Pythagoras of Samos's followers, who lived a generation before Hippocrates²⁷.

The Hippocratic Oath: A Critique of its Relevance and Applicability

If the Hippocratic Oath is viewed through the lens of changing times, swearing to old Greek gods appears to be somewhat out of date in today's multiethnic, multicultural, and pluralistic society. Women were not permitted to become physicians during Hippocrates' lifetime. Many female physicians have long objected to taking an oath intended just for male physicians²⁸. Medical education was only available to a few select disciples at the time, and it was free. This appears untenable in modern times, when the government may be unable to continue medical education for thousands of graduates without even a minimal charge system. Although euthanasia and abortion are forbidden under the oath, euthanasia is permitted in some nations and abortion up to 20 weeks is permitted by the Medical Termination of Pregnancy Act²⁹. Vegetative states, needless suffering, pain, and patients' rights to a dignified life have all been overlooked in the oath. In ancient Greece, these problems most likely did not exist. These problems demonstrate the original oath's limited applicability in today's diverse sociocultural and bioethical environment.

The doctor is sworn to treat the patient as best he can and with the best judgement. It places the highest value on beneficence. The pledge makes no mention of patient autonomy or fairness, which are currently regarded as the cornerstones of bioethical concepts. The oath becomes paternalistic as a result³⁰. During the Nazi era, in particular, scientists from the Schutzstaffel carried out tests without obtaining informed consent. These medical professionals behaved 'to the best of their ability and judgement.' Due to the court's recognition of the Hippocratic Oath's shortcomings in the context of contemporary bioethics, the oath was reviewed during the Nuremberg Trial after World War II, and new research ethics guidelines known as the Nuremberg code were put out³¹.

There were only three relationships in medicine at the time the oath was created: the patient, the doctor, and the illness. The introduction of health insurance, malpractice concerns, technology, and pharmaceutical firms all upended this balance³². The current Hippocratic Oath does not adequately address the ethical implications of the challenges that physicians face in the last four decades due to

²⁵ *Ibid* (n 18).

²⁶ EH Loewy, 'Oaths for Physicians—Necessary Protection or Elaborate Hoax?' *Med Gen Med* [2007] 9: 7.

²⁷ *Ibid* (n 14).

²⁸ SH Miles, 'Hippocrates and Informed Consent'. *Lancet* [2009] 374: 1322-3.

²⁹ *Ibid*

³⁰ RM Veatch, 'Medical Codes and Oaths'. In: WT Reich (ed.) *The Encyclopedia of Bioethics*. Vol. 3 (New York: Simon & Shuster MacMillan, 1995) p. 1419-22.

³¹ S Perley, SS Fuss, Z Bankowski, and F Simon, 'The Nuremberg Code: An International Overview'. In GJ Annas and MA Grodin (eds.) *The Nazi Doctors and the Nuremberg Code: Human Rights in Human Experimentation* (Oxford University Press, 1992) 151-152.

³² SA Antoniou, GA Antoniou, FA Granderath, A Mavroforou, AD Giannoukas and AI Antoniou, 'Reflections of the Hippocratic Oath in Modern Medicine'. *World J Surg* [2010] 34: 3075-9.

the recent growth in government regulation, the spread of the third-payer system, and the democratisation of medical information³³. Due to financial constraints, doctors might not be able to recommend the optimal course of action for their patients. Only a small number of wealthy nations have made universal healthcare coverage a state responsibility. Physician autonomy in treatment is impacted by the encroachment of corporate hospitals and health insurance companies, which alters the paradigm for physician treatment.

The decisions made by the patients also influence the therapy plan. The emergence of Google and the public availability of medical research articles on the Internet have made patients avid consumers of medical information. When it comes to diagnosis and treatment options, patients seek the advice of semiliterate doctors. The doctor must act appropriately, considering not only beneficence but also patient autonomy or the possibility of facing legal repercussions.

Physicians are no longer healers, and healing is no longer an art; it is simply a service provided. Medicine, formerly a noble and holy profession, is now classed as "services rendered" under the Consumer Protection Act. Physicians are subject to numerous civil lawsuits. The image of the Hippocratic gentleman is no more, having been replaced by that of a stressed general practitioner³⁴.

It is also believed that the oath encourages medical burnout. According to a recent survey, at least one-third of the doctors surveyed—that is 34% out of 2600 doctors—agreed that the oath encourages burnout³⁵. The oath, which promotes prioritising the needs of patients, invariably results in a rejection of one's own and one's profession's limitations³⁶.

The oath appears to be at odds with the laws in place when its applicability in contemporary psychiatry is evaluated. Total confidentiality is guaranteed by the oath. If psychiatrists follow the wording of the oath and keep it a secret in cases of child sexual abuse if the child and family do not want to disclose it, they could end themselves in jail. The Protection of Children against Sexual Offences Act states that any information of child sexual abuse must be reported right away to the appropriate authorities; failing to do so could result in a fine and up to six months in jail. Administering covert medication while considering the patient's benefit may relieve the doctor's conscience, but it exposes him or her to legal action. It is deemed an infringement on the patient's autonomy and violates the new Mental Healthcare Act. The doctor may agree to conduct teleconsultations for minor concerns, taking into account the patient's benefit. This may be right and ethical, but the law is against it.

The dispute about the importance of the oath and whether to follow it or the law is not new. Its significance in modern medicine has long been a source of contention, with several arguments on both sides. In 1973, the US Supreme Court rejected the oath as a guide to medical ethics and practice, noting that it cannot address the most recent advancements and methodologies of medical practice and study³⁷. Veatch, a well-known ethicist, said that the oath encourages conventional paternalistic ideals³⁸. Despite this, surveys reveal that 62 of 122 medical schools in the United States used the Hippocratic Oath or a modified version of it³⁹. Several countries have developed their own versions of the oath to meet their specific cultural needs. Lay people and the media take the Hippocrates oath out of context to stress that 'patients' interests are above everything else to a doctor'.

³³E Pellegrino, 'Medical Ethics: Entering the Post-Hippocratic Era'. In H Engelhardt and F Jotterand (eds.) *The Philosophy of Medicine Reborn: A Pellegrino Reader* (Norte Dame, Indiana: University of Notre Dame Press, 2008) 424.

³⁴F Jotterand, 'The Hippocratic Oath and Contemporary Medicine: Dialectic between Past Ideals and Present Reality?' *J Med Philos* [2005] 30: 107-28.

³⁵N Chesanow, Does the Hippocratic Oath Promote Burnout? Medscape; 19 March, 2017.

³⁶*Ibid* (n 33).

³⁷A Kumar, 'Hippocratic Oath, 21st Century'. *Indian J Surg* [2010] 72: 171-5.

³⁸RM Veatch, 'Medical Codes and Oaths'. In WT Reich (ed.) *The Encyclopedia of Bioethics*. Vol. 3. New York: Simon & Shuster MacMillan; 1995. p. 1419-22.

³⁹AC Kao and KPParsi, 'Content Analyses of Oaths Administered at U.S. Medical Schools in 2000'. *Acad Med* [2004] 79: 882-7.

The oath has no legal force behind it. It serves more as an ethical guide. However, citing the Hippocrates oath in its ruling, the high court chastised the doctors for failing to fulfil their responsibilities, which was equivalent to criminal negligence, when they were opposing violence against other doctors⁴⁰. Young doctors who are going to make important judgements about whether to follow the law or the oath are likely confused by this degree of universality and importance⁴¹.

Conclusion

Karl Menninger once observed, 'When in doubt, be human,' in reference to morality and ethics. However, we should adjust our opinions when facts change. 'When in doubt, be rational and follow the law' is the best thing to keep in mind in this age of lawsuits. While ethical transgressions could result in small fines or penalties, breaking the law will land us in jail and permanently damage our careers. Those who pursue medicine typically have a higher purpose and a strong sense of ethics. Almost no one uses medicine as a source of income. The pledge is unnecessary for medical students who come to the college with a strong sense of ethical ideals. The oath is nothing more than a hypocritical ritual for individuals who do not share these ideals.

It is undeniable that the Hippocratic Oath exemplifies the values of humility, appreciation, beneficence, and confidentiality. According to a recent study, 59% of the doctors surveyed felt that the oath held great significance for them⁴². It gave them pride in their chosen career, thankfulness, and a sense of fraternity. This doesn't change the reality that the oath occasionally contradicts the law and lacks the subtleties of contemporary bioethics. It is undoubtedly challenging to abandon a concept that has been ingrained in the medical field for almost two millennia. However, change is the only thing that is permanent. As a result, it is about time the medical community assessed the issue. Medicine will never abandon the spirit of the oath. No physician will suddenly care less about a patient's benefit because they are no longer under oath. Physicians should remember that any oath must be reviewed and re-evaluated on a regular basis to reflect the ever-changing nature of society. We must recognise that honouring the oath does not protect us from legal consequences. We should adhere to existing laws until laws and ethics no longer conflict with one another.

⁴⁰C Kanchan, Resign If You Are Not Fit to Work: HC to Resident Docs on Strike in Maharashtra. Hindustan Times; 21 March, 2017.

⁴¹Kashyap Nitish, Bombay HC Urges Doctors to Resume Duty as 50 Patients Die in 4 Days, Takes Undertaking from Mard. Livelaw, 23 March 2017. Available at: <http://www.livelaw.in/> accessed 28 November 2024.

⁴²Is the Hippocratic Oath Still Relevant? Medscape; 22 November, 2016.