



THE WORLD MEDICAL ASSOCIATION, INC.

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WORLD MEDICAL ASSOCIATION STATEMENT

ON

PATIENT ADVOCACY AND CONFIDENTIALITY

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Medical practitioners have an ethical duty and a professional responsibility to act in the best interests of their patients at all times.

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Should medical practitioners perceive circumstances which might adversely affect patient's health, it is their duty to inform responsible authorities so that remedial action may be taken.

Should responsible authorities decline to take remedial action, reasons for the decision should be made known to the medical practitioners who reported the circumstances. Should such notification not be provided or should the rationale for the decision prove unconvincing, the medical practitioners concerned have a duty to take further action.

Such further action might conflict with confidentiality provisions in the medical practitioners' contracts of employment, thereby creating social, occupational and ethical dilemmas for the medical practitioners.

Whenever health care finances are limited, budgetary constraint measures provide the potential for conflict between medical practitioners and authorities which employ them over appropriate and necessary health care services.

Health service administrators are responsible for implementation of governments' policies and may be required to make choices with which employed medical practitioners may disagree. Opponents of governments' health care policies and their implementation by administrators should direct criticisms to the sources of the policy decisions or implementation measures considered to be unsatisfactory.

Mutually accepted and acceptable mechanisms by which medical practitioners may express concerns either for individual patients or for public health, without breaching terms of employment contracts, should be established.

Such mechanisms should be embodied in medical practitioners' employment contracts. These employment contracts should acknowledge that medical practitioners' ethical obligations override purely contractual obligations related to employment.

Particular difficulties may arise where medical practitioners suspect that administrative decisions are made for spurious reasons such as religious, racial or sexual prejudice, or for purposes of financial gain, or that clinical research is being conducted without appropriate ethical consideration and supervision.

Where such considerations arise, adverse comments by medical practitioners might appear libellous or defamatory in some jurisdictions and may be so in fact. Specific concerns on such matters should be referred by medical practitioners to an appropriate professional forum such as the registration or licensure authority for their jurisdiction.

RESCINDED