

## Teaching Islamic Medical Ethics

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### Abstract

Medical ethics is still taught using traditional methods in many medical schools of the region. Medical ethics is known for its controversial issues and this cannot be learned effectively through lectures. The course should aim to give students an appreciation of important historical and theoretical developments of medical ethics. A syllabus of medical ethics relating to Islamic sources and values would widen the students' cultural and moral horizons and improving their medical performance in the long term. The ethical dilemmas the freshly graduated medical students may face at the beginning of their training should be addressed. The importance of employing student-centered learning techniques to motivate medical students to become problem solvers, critical thinkers, and life-long self-learners is highlighted.

**Keywords:** Medical Ethics, Teaching, Syllabus, Islam

### Article

#### Introduction

Medical ethics is becoming an important part of the medical curriculum today (Beigy 2016). The clinical years of medical student education are an ideal time for students to learn, practice and develop ethical thinking and behavior. It is well known that there is no single, best model for medical ethics education (Parker 2012). Traditional undergraduate medical ethics courses teach preclinical students how to identify ethical issues and deal with them at a theoretical level. However, incorporating these ethical principles into clinical training remains a challenge (Fryer-Edwards 2006). Any attempt to develop a comprehensive ethics curriculum must recognize the broader cultural environment within which that curriculum will function. Regular updates, including relevant literature and bioethical controversies, are crucial for the maintenance of a meaningful syllabus.

Medical school curriculum must include all those important issues, where either solution or a direction towards solution of the emerging issues of biomedical ethics with special emphasis on Islamic laws and

shari'a guidance. Islam holds that ethics cannot be divorced from morality. Ethics are not to be split from law. Islamic law is a compendium of ethics, morality and legal rules. Islam considers medical ethics the same as ethics in other aspects of life (Jarallah 2008). Comparing Islamic tradition with secular bioethical attitudes will ensure a balanced view for a comprehensive Islamic medical ethics syllabus. Islamic Ethics upholds "the four principles" of biomedical ethics proposed by Beauchamp and Childress. However, there are some differences in the applications of these principles (Chamsi-Pasha & Albar 2013).

This article discusses the goals and methods of teaching Islamic medical ethics, and how this approach offer students a clear pathway to deal effectively with the complex ethical issues they may face in professional life.

## The Syllabus

Teaching medical ethics at the undergraduate level will not only expand the knowledge of the standards of professional conduct but also prepare the graduates to face the ethical dilemmas arising from progressive advances in medical practice and science applications. The inclusion of medical ethics in the medical curriculum has lead to the appearance of different curricula on medical ethics using varying methods (Al-Haqwi , Al-Shehri 2010). A cross-sectional study was conducted in the College of Medicine, King Faisal University Dammam, Saudi Arabia. Using a self-administered questionnaire in a cross-sectional study, undergraduate students' opinion about medical ethics coverage was obtained. The study involved 14 clinical departments and 201 students. Only 46% of respondents were satisfied with the current coverage of ethical issues in the formal curriculum; 23% were unaware of the value of the subject (Al-Umran et al 2006).

Medical Students' views of the teaching of the various components of biomedical ethics are important and should be sought in the planning of a curriculum. There is essential need for a model medical ethics curriculum that responds to students' concerns and needs to be applied across the whole years of medical school (Fawzi 2011). In the Islamic world, medical school curricula should contain a study of Islamic code of medical ethics. The syllabus should be drawn up in a logical and practical manner, in parallel to the basic medical study program. It should spread longitudinally to five years program and the topics may be divided into three stages:

In the first two years, students acquire preclinical knowledge, and they should study the basic concepts and principles of medical ethics. Human behavior, disease perception and general conducts and behavior of medics should be well integrated in all modules. They should clarify their personal motivation and commitment to medicine by studying the history of medical ethics, and by understanding the historical and clinical need to consolidate the basic values of medical ethics. Discussions on the patient's status, and formation of the physician's image, all fall into this section of medical studies (Gesundheit & Shaham 2008).

In the 3<sup>rd</sup> and 4<sup>th</sup> year of their medical studies, students are exposed to clinical medicine, including rotating clerkships in the hospital departments. At this level, they should deal with ethical problems arising in the different areas of medical training. Students should become familiar with the bioethical approach to clinical topics during their clerkship in the different departments. Patient-physician relationships, the ethics of clinical practice and relationship with allied specialties and patients' rights should also be included (Chamsi-Pasha et al 2016).

In the 5<sup>th</sup> Year, the medical student is preparing for the final examinations and is considering the

direction his or her professional future. The goal should encourage them to become familiar with the professional literature. Contemporary issues such as issues related to fertilization, and termination or prevention of pregnancy, cosmetic surgery, organ transplantation, Do Not Resuscitate (DNR) and end of life issues, stem cell research and cloning etc.) should be integrated with all modules and elective rotations. Ethics of medical research and relationship with pharmaceutical industries should also be considered. Their presentation of the subject to a small class would prepare them to discuss ethical concerns, to involve colleagues in such subjects in the future, to cope with problems in their work, and to gain ethical awareness in the profession in the long term (Mueller & Koenig 2006).

## Teaching methods of Medical ethics

Ethics is an emerging discipline in many medical schools in the Islamic world, being taught in some schools by non-specialists with limited experience in teaching ethics and not housed in a proper ethics departments. In Saudi Arabia, for example, a large proportion of the teaching staff, 28 (37.3%), have not specified whether they obtained any academic qualifications in ethics. Although there is a growing interest and commitment in teaching ethics to medical students in medical schools; there is lack of standardization in teaching and evaluation methods (Alkabba 2013).

In the traditional model of medical ethics education, medical ethics is taught as a separate course during the clinical years of the undergraduate medical curricula in many medical schools. Lecture-based education has been demonstrated to be insufficient in terms of empowering students to employ their knowledge in clinical reasoning (Eckles et al 2005). Ethics is a collection of behaviors and if it is taught with the traditional methods, it may not create any significant change in the students' attitudes and practice satisfaction. Some departments of medical ethics have recently adopted the use of student-centered methods. Student-centered approaches to learning enable students to distinguish ethical dilemmas, solve problems and make proper decisions. Both the lectures and the interactive sessions employ active learning strategies (Heidari 2013). The interactive sessions are totally assigned to student-centered learning techniques, while lectures also include a structured student participation, singly, in pairs or in small groups. A problem-based learning (PBL), a standard technique in medicine teaching, has also proved itself an effective method in the teaching of medical ethics. Case studies, sets of problems; clinical simulations, ethical dilemmas, legal disputes, and public health policy issues should be used as the framework for student learning (Abdel-Halim & Alkattan 2012).

Using an open ended question questionnaire in one hundred fifth year medical students from Ain Shams University in Cairo, 56% preferred the practical teaching method with problem-solving strategies for the daily ethical issues, as the best way to teach the course. While 53.4% thought that teachers specialized in medico-legal issues will be the best to teach this course (Fawzi 2011).

There is an increasing evidence supporting the methods, the students are more involved in.

These include ethics theater case presentation, large group discussion, ward rounds with ethicists, expert opinions, role playing and simulated patients. All of these methods were reported by participants to be advantageous (Beigy 2016).

Recently, the use of role playing for undergraduate teaching of ethics was investigated. The students' satisfaction and their involvement in the education process has increased by role playing. Besides, role playing may give an immediate feedback about the learner's understanding and ability to apply the concepts (Noone et al 2013). "Breaking Bad News" course is a successful example of using role playing (Cushing & Jones 1995). Role modeling (an expert clinician's role play in front of participants) was

another strategy used to introduce professional practice to the students, and has been shown to be an effective mean of teaching professionalism (Mueller 2015).

Medical drama narrative is used in the teaching of biomedical ethics. The use of medical drama in teaching may enhance emotional engagement and moral imagination (Arawi 2010).

Finally, there is a tremendous need for a model medical ethics curriculum that responds to students' concerns in addition to providing basic training in ethical decision making to be applied both horizontally and vertically across the whole years of medical college. Further research of the integrated curriculum is needed to identify the learning issues that affect confidence, consolidation of knowledge, and attitudes in medical ethics and professionalism.

## Conclusion

Intensifying the formal teaching of ethics within the medical school curriculum is warranted. Bioethics syllabus may be integrated into the medical curriculum in three stages. Medical ethics curriculum should be more fruitfully structured to become a smooth part of the ethical training process. The syllabus proposed here could serve as a basis for the teaching of medical ethics as an essential part of the faculty curriculum in medical schools, and could serve as a framework for a more detailed curriculum to be developed in the future according to the needs and interests of doctors, lecturers and students. Continuous improvements in the program is mandatory to maintain its success. Such a course would provide future physicians with a variety of cultural and intercultural background, help in shaping their ethical thinking, and improve the quality of medical care. A Simple booklet containing recent version of the Islamic code of ethics, common ethical dilemmas, and currently evolving ethical issues should be available for all newly graduated health professionals.

## Take Home Messages

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1. There is no single, best model for medical ethics education.
2. Lecture-based education is an insufficient method in teaching medical ethics.
3. Ethics curriculum must recognize the broader cultural environment within which that curriculum will function.
4. Islamic Ethics upholds "the four principles" of biomedical ethics. However, there are some differences in the applications of these principles.
5. Continuous improvements in the ethical syllabus is mandatory to maintain its success.

## Notes On Contributors

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## Appendices

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## Declaration of Interest

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*The author has declared that there are no conflicts of interest.*