

Ethical Issues and Training in Laparoscopic Surgery

Hana Alhomoud

ABSTRACT

Teaching operative laparoscopic skills by taking into account the basic principles of medical ethics in a recognized teaching hospital like the World Laparoscopic Hospital in India under the supervision of experienced laparoscopic surgeons is of paramount importance to surgical training.

Keywords: Ethics, Laparoscopy, World laparoscopic hospital.

How to cite this article: Alhomoud H. Ethical Issues and Training in Laparoscopic Surgery. World J Lap Surg 2013;6(3): 132-133.

Source of support: Nil

Conflict of interest: None declared

INTRODUCTION

Ethics, also known as moral philosophy, is a branch of philosophy that involves systematizing, defending and recommending concepts of right and wrong conduct. It comes from the Greek word *ethos*, which means 'character'.¹

Each generation of surgeons inherits the moral and ethical foundations from the preceding generation and must practice the art and science of surgery based on these principles. While the foundations remain unchanged, the applications become more complex and the decisions more difficult as advancing technology provides greater opportunities to save lives and relieve pain and suffering. Until the past 50 years, the technology did not exist to treat many diseases, surgery was relatively straightforward, and all a surgeon's effort was directed at stopping the advance of a disease or correcting a congenital defect. Sometimes social issues related to advanced surgical technology, such as implementing an unproven technology or itinerant surgery, would arise. With each of the new dilemmas, the foundations have continued to suffice, although the solutions have become more complex. More importantly, the ethical dilemmas have dramatically increased in scope; rather than revolving only around an individual patient or the conduct of medical practice, the impact of technologies have driven the ethical implications to the new dimensions of global health, population imperatives, and impact of the evolution of the human species *per se*.²

Since, laparoscopic was first introduced in surgical practice, there has been a progressive increase in the number of its potential applications in surgical specialties, including both complex oncologic extirpation surgeries and meticulous reconstructive techniques. This situation is

bringing new and promising changes to surgical practice, but correct performance of these procedures require previous training to acquire sufficient manual dexterity so that avoidable harm is not caused to patients who are operated on with these techniques.³

Specifically, laparoscopic training can be carried out using different modalities, such as the pelvitrainer, performance of laparoscopy in experimental animals or cadavers, or using virtual reality simulators in specially equipped centers.

World laparoscopic hospital (WLH) in India which is a well-recognized training laparoscopic center under the supervision of an experienced laparoscopic surgeon Professor Mishra. In the WLH you can find all the modalities of laparoscopic training. Professor Mishra ensures that the trainee receives all the basic training in laparoscopy. Trainee spends a period of basic training in experimental animals, pigs. In this phase, the trainee can become familiarized with the routes of surgical approach and placements of the trocars, and begin to acquire the necessary skills to perform endoscopic dissection and tissue suturing. Thus it seems that the greater the skill acquired through experimental surgery, the shorter the time required to transfer this skill to surgical practice in humans, with the subsequent technical assistance of experienced laparoscopic surgeons.

With these premises for training, it is attempted to preserve the principal of beneficence, which, according to Gracia,⁴ is the ethical principle that obliges one not only to cause harm, but to do good.

WLH ensures that the trainee will learn the basic principal of medical ethics (beneficence, nonmaleficence, autonomy and justice).⁵ During the training program in WLH a qualified laparoscopic surgeons will guide the trainees how to assess the effectiveness and safety of a new laparoscopic surgical device before using it. Because human dignity is the priority in WLH, Professor Mishra obliges himself to teach the trainees how to obtain informed consent from patients in a manner that is comprehensible and in accordance with the language, customs and culture of the patient. Informing in this way of the advantages of laparoscopy as well as its limitations and the possibility of conversion to open surgery.

It can be concluded that correct training in laparoscopy in a well-recognized center like the WLH in India will

provide the trainees with a proper training program where they will be competent in using the laparoscopic surgical devices and new technology as well as knowing the basic medical ethics.

REFERENCES

1. Available from: <http://www.iep.utm.edu/ethics/>.
2. Satava RM. Ethical dilemmas in laparoscopic, robotics, and advanced surgical technology: Prevention and managements of laparoscopic surgical complication. 3rd ed. 2010;1-5.
3. Rascon J. Ethics in laparoscopic surgery. *Actas Urol Esp* 2006;30(5):474-478.
4. Gracia D. Proyecto de Bioetica para clinicos del instituto de Bioetica de la Fundacion de ciencias de la salud. *Moral deliberation: The method of clinical ethics. Med Clin* 2001; 117(1):18-23.
5. Ross S. Ethical issues associated with the introduction of new surgical devices, or just because we can, does not mean we should. *JOGC* 2008 June;30(6):508-513.

ABOUT THE AUTHOR

Hana Alhomoud

Senior Registrar, Department of Surgery, Al-Sabah Hospital, Kuwait
Phone: 966551440610, e-mail: hana_alhomoud@hotmail.com