

## Methods of teaching in medical ethics

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## Introduction

In the conditions of dynamic medical practice the physicians have need from more ethical knowledge to take quickly ethical decisions in the practice and to have balance in the interrelations with patients [1]. Medical students study Medical Ethics thirty hours in the first year. They have fifteen hours lectures and fifteen hours exercises in the second term. Medical Ethics gives theoretical knowledge and practical skills of the students for decision making through ethical cases in connection with medical practice [2]. The students receive knowledge about the Codes of Medical Ethics, patient's and physicians' Right, Principles of Medical ethics, Patient's autonomy, Confidentiality, Physicianpatient Models, Informed consent, New technologies and moral problems, Abortions, Human reproductions, Donorship and transplantations, Ethical committees, Medical experimentations, Euthanasia etc [3].

The lecturers use different forms to teach students as lectures, exercises, working in a small groups etc. In the exercises the lecturer use methods as discussion, analyze cases, writing a essay on topic from Medical Ethics, which student prefer. Why for students is useful to read and discuss the cases in a small group? Because in the second term of their study, they haven't enough medical knowledge to take the decision only, but in the group discussion they can take better decision [4]. In the time of discussion they exchange knowledge and develop their creative thinking. In the time of discussion the lecturer can ask some questions and to change the direction of the discussion and to help to reach the right answer if the case is very difficult

[5]. From observation over the discussion lecturer understand the way of thinking of every student. One of the aims of education is to develop creative thinking in the students. To put the diagnosis a physician must have creative thinking; he must make relations between results of investigations of the patient, process in the body and feelings of the patient.

For what helps "writing an essay". Student chooses a topic which is interesting for him. He make short investigation in the library, in internet, read this topic in the manual, analyze the information and write [6]. On the base of this information and his knowledge from discussion over the cases and over the Codes and legislation he can imagine and create own case [7].

In the beginning of teaching students use ready cases from casebook, after they find cases in library in different ethical journals or in Internet and when they have enough ethical knowledge on the base of International declarations, which they study, Bulgarian Health legislations and moral principles of the Codes and documents, they make their own cases (with possible questions and responses) [8]. Students very like discussions about "Euthanasia", "Cloning", "New technologies and moral" etc.

About methods for evaluation the lecturer has possibility for observation and evaluation of the students in the moment when they work in a small group, as a team and take decisions in the team. In the medical practice, as a physicians, they will do this is. Every medical case contains and ethical case. The physician will give his attention for medical case to save the life of the patient, but when he knows ethical principles and



Codes he will take ethical decision for few seconds. In the time of exercises the lecture can evaluate the oral knowledge of the students, or he can read student's essays, or student's cases and to put marks [9]. In the time of the term students have 2 or 3 marks. In the end of the term all students make test which consists of 15 questions from all topics from Medical Ethics and three short cases. The last mark is most important. Students like Medical Ethics and think that this subject is very interesting and preparing them to meet the patient when they begin their student's practice in the hospitals [10].

The development of Medicine, Pharmacy, Medical Engineering, Genetics, arise new ethical problems and develop Medical Ethics. The Medical culture of the patients grow, they want better communication with physician. They prefer more empathic physicians, who understand their problems and help them. Medical Ethics with its different models of interrelations between physician and patient can help to physician for more competent communication.

## References

1. Ackerman TF, Strong C. A Casebook of Medical Ethics, Oxford University Press. 1989.

- 2. Jivkova C. Biomedical Ethics. East-West, S 2009.
- 3. Jivkova C. Evaluation of the lecturer: The Ideal and Reality, Annals of Community Oriented Education 1992;5:215-222.
- 4. Jivkova C, Uitenbroek D. The Junior Lecturer in faculties of Medicine in Bulgaria: Adaptation, problems and perspectives. S. Asclepios 1996;100-104.
- 5. Jivkova C, Vodenicharov TZ. Proposals for change of Medical Education, Postgraduate Med J, 1996;72:84.
- 6. Moss B. Communucation Skills in Health & Social Care. SAGE, 2014.
- 7. Parker M, Dickenson D. The Cambridge Medical Ethics workbook. Cambridge University press 2001.
- 8. Stern DT. Measuring Medical professionalism. Oxford University Press, 2006.
- 9. Nisheva V, Jivkova C, Gateva L, Philvest S. The Evaluation in the Medical Education under the editorship of Tz. Vodenicharov and S. Popova.
- 10. Thistlethwaite J, Spencer J. Professionalism in Medicine, Radcliffe Publishing Ltd UK 2008.