

Unit 2. Clinical ethics in the practice of Kayachikitsa

Clinical Ethics in the Practice of Kayachikitsa

Integrating classical Āyurvedic wisdom with modern principles

1. Ethical Principles

1. Satya (Truth-telling) & Ahimsa (Non-maleficence)

- “सत्यवाकदं अक्रोधं च निर्वृत्तं मद्यमैथुनात् ...” (Āchāra-Rasāyana 1/4/30-35) – Speak honestly, avoid anger, intoxication and harm .
- In practice: never withhold diagnosis; choose therapies that minimize harm.

2. Beneficence (Hitam) & Non-maleficence (Ahitam)

- “अतुरेणैव विनारभेत्” – Treat the ailing with utmost care, avoiding aggravation.
- Uphold śodhana-śamana sequence (e.g. snehana before virechana) to prevent iatrogenesis.

3. Autonomy & Informed Consent

- Explain diagnosis (rogi-roga parīkṣā), prognosis and all major interventions.
- Respect patient’s right to accept or refuse śodhana, pāñāyadāna, etc.

4. Justice & Equity

- Provide care equitably, regardless of caste, creed or socio-economic status.
- Ensure access to essential formulations and pañcakarma facilities.

5. Confidentiality

- Maintain discretion over patient’s personal, medical and lifestyle information.
- Share information only with explicit patient permission or urgent public-health need.

2. Qualities of a Vaidya (Professionalism)

“चिकित्स्य पुरिषे चतुर्षट् गुणाः सम्पद्यन्ते” – The four limbs of successful therapy are the physician, medicine, attendant and patient .

गुण (Qualities)	श्लोक (Shloka) & Source	Explanation
दक्षता (Skill)	“दक्षतीथाधिश्चाधिरथो ...”(Cha.Su.9/6)	Mastery of theory & hands-on techniques.
शौच (Purity)	“शौचभमतत” ... (Cha.Su.9/6)	Cleanliness of body, mind & instruments.
श्रद्धा (Integrity)	“ज्ञानं चि विदुषां पुष्टिभिः ...”*	Uphold sacred texts; honest practice.
सामर्थ्य (Compassion)	Implied across Āchāra-Rasāyana	Empathetic care, patient-centred approach.

*traditional madhukara-kavya reference

3. Effective Communication Skills

• Active Listening

- Give full attention; reflect back (“So you’re experiencing śītasnata...”).

• Empathetic Language

- Use warm words: “You are not alone in this journey.” (प्रियावचनम्)

• Clear Explanations

- Translate Sanskrit terms: e.g. virechana → mild purgation.

• Non-verbal Cues

- Open posture, eye contact, nodding to encourage dialogue.



- **Cultural Sensitivity**
 - Respect dietary taboos, family-centred decision-making.

4. Ethical Decision-Making Framework

1. **Identify the Ethical Dilemma**
 - E.g., patient refuses virechana despite clinical indication.
2. **Gather Clinical & Contextual Data**
 - Review dosha-dhātu status, rogi's mental strength (sattva), socio-economic factors.
3. **Refer to Ethical & Āyurvedic Principles**
 - Satya, Ahimsa, autonomy, śodhana → śamana sequence.
4. **Explore Alternatives**
 - Offer mild anuvāsana basti instead of virechana; adjourn procedure after counselling.
5. **Make & Document Decision**
 - Obtain informed consent; record rationale in case-sheet.
6. **Implement & Reflect**
 - Monitor outcomes; debrief with team; integrate learnings into future practice.

5. Practicing Professionalism & Ethics

- **Punctuality & Reliability:** Respect patient's time; follow through on referrals.
- **Continuous Learning:** Regularly update knowledge of classical texts (Caraka, Sushruta) and modern guidelines.
- **Teamwork & Accountability:** Collaborate with nadi-pariksa, lab-analysis colleagues; admit errors promptly.
- **Self-care & Boundaries:** Maintain svasthavritta; avoid burnout to ensure sustained compassionate care.

This module equips the Kayachikitsa practitioner with a robust ethical compass—grounded in Āyurvedic śāstra and enriched by contemporary bioethical standards—to deliver safe, compassionate and equitable care.