

## 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)

- “सत्यवाकदनं अक्रोधं च निर्वृतं 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 पुरुषे चतुर्षट् गुणाः सम्पद्यन्ते” – The four limbs of successful therapy are the physician, medicine, attendant and patient .

गुण (Qualities)	श्लोक (Shloka) & Source	Explanation
दक्षता (Skill)	“दक्षतीयाधिश्चाधिरथो ...”(Cha.Su.9/6)	Mastery of theory & hands-on techniques.
शौच (Purity)	“शौचभमतत्” ... (Cha.Su.9/6)	Cleanliness of body, mind & instruments.
श्रद्धा (Integrity)	“ज्ञानं च विदुषों पुर्विभिः ...”*	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 sītasnata...”).

##### • 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, ūdhana → ūmāna 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.*