
Letter to the Editor

Can Physicians treat their own family members?

Madam, there have been numerous occasions where a physician has to deal with members of his own family. It is no doubt true that relatives and family members will approach their own family doctor to inquire about any symptom or illnesses that raise any concerns. After all it is easy to talk to them at a party and just to cure away some concern immediately rather than wait for an appointment and a long queue before being attended to. But the main difference comes when doctors need to treat their own immediate family i.e. parents, siblings and children.

Many physicians prefer to look after their own family members largely for the sake of convenience.¹ There is no doubt that an emotional constituent haunts a doctor's diagnostic and therapeutic skill, of course in good faith. The personal doctor's medical skills get fogged up with the intensity being worse with the severity of the ailment. From 1901 to 1977, the American Medical Association (AMA) advised physicians to avoid treating family members for the simple reason that their decision would be clouded.² But what should a physician's stand be at such a point in time? Should they just refer all cases irrespective of the degree of the severity or should one try to attend to the problem within

one's capacity? It will be hard to tell as to how much one can go on to treat a loved one. Every individual will have 'some' degree of restraint but what is the definition of 'some'? Do we need to have a clear cut rule on this issue?

It is true that many physicians attend to their family members. But while doing so, physicians have not only shown discomfort in doing so² but are also advised to avoid attending to them.³ In short, all doctors should immediately refer their close loved ones to different physicians in order to help get them the best, non judgmental and stress free treatment.

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References

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