Good Evening Ladies and Gentlemen,

This is an issue that requires significant reflection to make the right decision that no patient rights be infringed upon seeking treatment. When I first heard this issue on the news, I was dumbfounded that any college of physicians and surgeons would even consider that moral beliefs trump the patient’s right to treatment. What decade, what century, what millennia do we live in when a patient’s right to receive timely treatment is compromised due to personal belief? Really!!

As a result, I looked into codes of medical ethics in all provinces, and I was absolutely taken aback that this proviso, indeed, is included in each provinces’ medical code of ethics. How can a personal belief interfere and determine a course of treatment, and actually be the cause to end a doctor’s confidential relationship with a patient? And if it is ended, most provinces do not even obligate a physician to find another treating doctor! It is addressed very pointedly how the physician ending the relationship must assist the patient to locate another doctor in only 2 provinces: Quebec and New Brunswick, in that the physician MUST offer assistance in the former, and “obligated to expedite access to another physician” in the latter. For the remainder of the provinces, the direction is loose and in no way indicates the doctor’s responsibility in finding an alternate physician in an expeditious manner. This is a flagrant lack of responsibility of the doctor to the patient, and goes against the Hippocratic Oath or the Declaration of Geneva.

To allow a doctor to refuse treatment due to moral/religious beliefs goes against the right of the patient to receive treatment and contradicts the CMA’s code of ethics section 17: in providing medical service, do not discriminate against any patient on grounds of …… So, the College will allow a doctor to refuse treatment due to moral belief if that doctor has a moral dilemma with a specific lifestyle, birth control, etc…. Does that not go against the CMA’s own code of ethics, as described in point 17? The British Medical Association Code of Ethics/Expression of doctor’s beliefs perhaps explains it best: “where conflicts arise between the interests of patients and a doctor’s freedom to exercise a conscientious objection or to manifest belief, in the BMA’s view, they must be resolved in favour of patients”. And so it must!

The demographics of the medical profession has changed drastically in the last few years, where physicians from all cultural, political, and religious affiliations practice freely in Canada, without question, and rightfully so. But what happens when, unknowingly, beliefs now get in the way of administering appropriate treatment to a patient in the same free manner that these physicians have to practice. How will the College insure that moral/religious beliefs do not mask political belief in refusing treatment? How will the College insure that moral and religious beliefs do not go against section 17 of the CMA’s code of ethics? In urban areas, refusal of treatment by a doctor does allow more alternatives for the patient to find a new doctor, should this happen, even if the current doctor is lax in assisting to locate a new doctor. But what about in rural areas, where there is a paucity of doctors for one, and when there is a doctor, those moral beliefs do interfere with administering treatment. Patients then will have difficulty receiving timely treatment for any reason that that doctor
may find morally offensive, according to the new policy allowing doctors to refuse treatment on these grounds. That patient will have difficulty finding a doctor that is geographically close, and even finding a doctor in a timely fashion that will not compromise health, depending on the diagnosis. By allowing a doctor’s belief to trump a patient’s right to treatment will open the door to malpractice suits against that doctor, certainly if the patient’s health has been compromised due to delayed treatment, and rightfully so. Please, to even suggest that by not allowing a doctor to exercise his or her belief regarding treatment reverts Canada to a Russian-style of medicine, as suggested by some comments, is absolutely ludicrous! To not allow any patient the right to treatment due to personal belief IS what is offensive!

Tread cautiously in rewriting the medical code of ethics in allowing doctor’s beliefs to determine treatment. Women’s health will be at risk, as will the health whose lifestyle choices do not correlate with a doctor’s beliefs. By allowing moral/religious belief in the medical code of ethics to hold an important role, as it currently does in all provinces, contradicts the outdated Hippocratic Oath – Appropriate Ends: the physician must do what is best for the patient, and NOT what is best for the doctor, and the updated Declaration of Geneva. Colleges of Physicians and Surgeons in any province must explain, definitively, what locating another physician in a ‘timely fashion’ is, should this be the case, and not leave it in its current ambiguity. However, by not allowing a moral belief to determine treatment does away with this. The right to treatment should be sacrosanct. Please explain to me how a doctor’s belief is compromised with treatment, when that is only a treatment, and in no way infringes on that doctor’s belief or religious personal practice. Doctors, you chose this profession in what, I hope, was to heal the sick regardless of persuasion, educate the unlearned in practices that benefit health regardless of belief. By allowing moral/religious belief to determine treatment opens the door for medical practice to reflect those same beliefs that, outside the medical profession, are considered ethically reprehensible. In fact, by refusing treatment due to a moral belief, that moral belief is now being forced onto that patient!

To the CPSO, take a stand, and embrace that personal belief has no place in the medical field as it relates to administering appropriate treatment, and that medical treatment does not infringe on the personal belief of any doctor. The practice of personal belief should be, and must be, separate from that of professional practice!

May your professional ethics lead you to the right and appropriate decision.