

AMERICAN MORAL VALUE MEDICAL SYSTEM VS FRENCH MORAL VALUE MEDICAL SYSTEM?

Ionuț Ștefan¹, Gheorghe Vlăduțescu², Iuliu Fulga¹

¹Faculty of Medicine and Pharmacy, Dunarea de Jos University, Galati

²Faculty of Philosophy, University of Bucharest

ionutstefan@yahoo.com

ABSTRACT

This research is a comparative analysis between two systems of values starting from a particular situation, namely an analysis of two fundamentally different medical systems, namely the Anglo-Saxon and Latin from the fundamental principles that founded, principles which in turn are based on different values. So, is done the first dichotomy between the Anglo-Saxon and Latin space. The Anglo-Saxon medical area is at the service of patient care, is a simple service for the patient, which is free and autonomous in taxing decisions of it's own life . In France, for example, physicians should save the patient at any cost. The Existentialism is defined as the philosophical orientation of philosophical research which is constant concern for human existence as it is manifested in ordinary daily. There are patients who want to know the complete truth and there are patients who do not want to know the truth, especially one that brings suffering, pain and despair. There are not only Anglo-Saxon patients or only a French type, there are patients in both sides. Humanity and the default set of patients is diverse and very complicated to find those equals, repeatable, testable and verifiable undoubtedly. They speak of two types of patients encountered in the matter of medical practice. The cases described demonstrate interaction of the medical system, whatever it is, with what means the philosophical existentialism, both humanistic horizons are "forced" to interact in the most important aspect of our existence that is facing our own death.

KEYWORDS: *medical system, moral value, bioethics*

1.Introduction

We propose a comparative analysis between two systems of values starting from a particular situation, namely an analysis of two fundamentally different medical systems, namely the Anglo-Saxon and Latin from the fundamental principles that founded, principles which in turn are based on different values. "We are dealing with the opposition of two concepts of morality and law, the Anglo-Saxon and Latin, based on two fundamentally opposed value systems. The first system is

privileged unqualified the individual freedom of decision, also including death, and the second is on the forefront to save lives." [1]. So, is done the first dichotomy between the Anglo-Saxon and Latin space. The Anglo-Saxon medical area is at the service of patient care, is a simple service for the patient, which is free and autonomous in taxing decisions of it's own life . In France, for example, physicians should save the patient at any cost. This conflict will increase further if the European Union because, for example the Netherlands "legalized" euthanasia, ie removed from its criminal code any possible medical attention while the

"Southern Europe" predominantly Catholic should keep in mind the official position of the Vatican official who condemns both euthanasia and abortion.

From there will follow two completely different consequences. In Anglo-Saxon area, USA for example, the physician should fully inform the patient absolutely any information concerning the diagnosis, prognosis or treatment regardless of consequences. What follows from here? It follows that the fundamental value underpinning the Anglo-Saxon medical system, and consequently of the U.S., is the truth. In the space of Latin and French, the fundamental value underpinning the medical system is patient's happiness. It should be noted that these two values are seen in the morally horizon and not theoretically, a serious diagnosis and maybe irreversible in progress can trigger an adverse prognosis that may result in inducing a state of total despair or unhappiness, especially if the patient's labile psychic or a weak personality, with a strength of character almost nonexistent. In this case works the famous Napoleon's statement: "only a useless fact, more than a useful lie". French doctor can and sometimes you must lie on the patient, to hide the truth regarding the diagnosis, prognosis or chances of survival, healing, when these opportunities do not exist and only a miracle can happen.

2. The Conflictual Situation

In these circumstances we reach a fundamental conflict between moral values such as, truth vs. happiness. Compliance with the unassailable truth may bring more unhappiness than happiness, and respecting and pursuing of happiness at any cost can sometimes get in conflict with respect for the truth. This is shown best by the ancient Greece. The conflict between moral values led to the appearance of tragedy in ancient Greece. There were three main horizons of values that determined the laws: family, city and the gods. Never the three horizons of laws and values could not be observed

simultaneously. Hence arise that conflict, which based the existential tragic situation. [2]

Now the question is defining these general concepts: truth and happiness. Such an operation is extremely difficult. If the medical truth the situation would be easier, in the case of defining the patient's happiness things complicates enormously. To define these fundamental values of humanity must broaden our discussion. We will need an epistemic framework for defining truth. This epistemic framework refers to the theory of Aristotelian correspondence between the statements made by the physician and empirically verified reality. [3] By empirically verifiable reality we understand all the testable parameters using the five senses in medical analysis. The most important use will be the visual sense. All these parameters will determine the implementation of diagnosis. This operation must be performed with utmost precision to be removed any doubt or uncertainty about the patient's diagnosis. Today, medical science of economically developed countries have highly sophisticated apparatus, with which the doctor can distinguish finely between alternative diagnoses, so that this problem can be overcome.

It remains to fix a few benchmarks regarding the patient definition of happiness. The happiness problem is opened in the ancient cultural horizon ancient cultural horizon. Philosophers have had as a matter of finding a satisfactory answer to the constant question: what is happiness? Have been imagined more answers, more scenarios, more "recipes". Neither proved to be completely and universally valid, sufficient for the whole lot of people. Political systems and ideologies that have marked the history of the twentieth century have argued that the definitive answer satisfactorily the question regarding the meaning of happiness. History has shown that ideologies such as Nazism or Marxism-Leninism who claim "solutions" global table are the biggest threats to individual happiness. Individual man is killed in these totalitarian systems. So the best perspective is closely related to individual happiness. Modern democratic

societies place great importance on individual happiness. The few citizens are unhappy with the government so that is better. In the case of individual happiness we have some general benchmarks again. If we remember the study of the psychologist Abraham Maslow of America, 1954, regarding the needs and necessities, in his famous pyramid, at the top of his pyramid of needs was situated the need for self-necessity is different from individual to individual. So we turn to the horizon of discourse that will be most fertile for the problem of defining happiness of patients and existentialism, as the fundamental socio-cultural perspective.

The Existentialism is a philosophical orientation of the twentieth century in Germany and France developed the first time. So we have two representative countries for the two types of medical systems. Karl Jaspers and Martin Heidegger are major German thinkers of the German philosophy of existentialism, while France will give Albert Camus and JP Sartre. Why it would be important for our theme philosophical existentialism? Existentialism is defined as the philosophical orientation of philosophical research which is constant concern for human existence as it is manifested in ordinary daily. Man is defined by its existence, in the manifestation of everyday life. For the first time since ancient Greece, philosophy recover just ordinary everyday life, ie the concrete manifestation of human life. We are not dealing with the metaphysical scenarios, built a palace imperial thinker, but man lives daily in room servants, about Kierkegaard. The existential happiness is strictly individual. Happiness is built step by step through various forms of behavior and mean life of the project [4]. This realization of this existential project means eating whole existence, according to Maslows personality is self-realization. The limit of human existence is given by the end of life, ie death.

We arrived in front of our main problems. Faced with the end of all existence, ie death. This experience is common to all people on Earth. Whatever our status, we face each our own death. This is the best argument

concerning the philosophical sense of existentialism. To the extent that each of us will face our own death, the existentialism is a philosophical philosophical hypostasis absolutely mandatory for all people. The medical system can be defined, to limit, and from that perspective. The doctor must heal the patient, to "postpone" the confrontation with death. Or, in cases incurable and must facilitate them to somehow relieve the patient facing death.

This is the most important aspect of global health care system. Health care professionals must recognize that it may happen that some patients might die and then are witnesses to this terrible inevitable universal human experience. To be suitable markers will remind readers of great thinkers of humanity's view, such as: Martin Heidegger and Lev Tolstoy.

Heidegger speaks of man's existential confrontation with death. This experience must be acknowledged during his lifetime, especially in youth. This usually happens? Nothing of the kind. Each of us, young design our great ideals, that we should follow throughout our existence. We have to face life, death is far away in a very distant future and we can not be touched by any incurable disease.

The concern to our own life is not matched in our youth by an awareness of our own end. This report considers Heidegger's "inauthentic existence", which can be seen best at a funeral. Those who participate in such an event will occur, usually following approach considers Heidegger: they are quiet because they are alive, they have not died.

Death is for the one who died. We, who are observers of such an event we will be happy that yet we are alive and nothing bad can happen to us, those who are alive. [5]

This whole scenario described at length by the German thinker is wrote based on a terrible story of Lev Tolstoy: "Death of Ivan Ilyich". This genial creation of the great Russian novelist represents "a real manual of

existentialism" as Heidegger thought and E.M. Cioran. What is all about?

3. Case presentation

We are dealing with a character who represents the nineteenth-century Russian officer with a very comfortable social position. He is married to a lady of noble society of nineteenth century Russia. He is surrounded by a lot of friends that provides him an important psychological comfort. His job is good paid and not very difficult. "Ivan Ilyich was considered a worthy servant, worker and, after three years was appointed substitute prosecutor. His new duties, their importance, that was powerless to prosecute and imprison anyone, the success you enjoy speaking in public indictments - all that made the job attract him even more." [6]. This scenario usually takes place "for seventeen years". Although marital relationship was not perfect, yet it is held within normal limits. We are therefore dealing with a normal existence, comfortable. In the second part of the script starts to go off the tragedy. The start of the end is described by simple ordinary Tolstoy. "Once, climbing on the scale to show to the upholsterer how to trim drapeau, he made one wrong step and fell, but as he was sturdy and agile, Protect, hitting only one side of the window rod. In hurt, but he passed quickly. Ivan Ilyich was then more cheerful and healthy as ever." [6]. From this moment begins the dramatic development of the existence, in fact of the disease of the character. His condition worsens, falls sick in bed, his powers begin to decline every day. "They were all healthy. It could not be counted as a strange taste disease Ivan Ilyich sometimes say that it is in the mouth, no stomach discomfort on the left side of complaining sometimes.

But it happens that the embarrassment began to grow, if not giving him pain, but in any case the feeling of a relentless hardship in one side, and besides that, a melancholy. Malaise began to be increasingly

pronounced, blurring the pleasant life, light, modestly, that one went Golovin family." [6]. He starts gradually to realize that it is incurable illness that can not heal and that will inevitably turn to death. His life apparently happy and quiet in the first part of the scenario is changing dramatically moving in the horizon of despair, of helplessness and inevitable confrontation with death. Existential drama begins to take shape becoming more intense. "Worsening evolve at a pace so slow that by comparison between one day and another could deceive, because the difference was too small" [6]. Ivan Ilyich first begins to realize the permanence of pain. This thought, of a pain that is felt in every hour of the day is the first sign of serious illness. Because this pain he puts in doubt for the first time in its existence, the proper conduct of work.

"Ivan Ilyich is dying and see that he possessed an endless despair. Deep down, he felt that dies and not only could not accustomed to this thought, but it neither understood nor was it able to understand" [6]. This is the ultimate experience of every man. Philosophers, in ancient Greece, Socrates, Plato, or Aristotle for instance, believed that philosophy, the limit is the horizon in which a person can prepare to confront the inevitable end. In the case of Ivan Ilyich, that final captures him unprepared. Death was not a concern of this character in a state of normalcy. And who takes care of his own death, as long as they are in health? In the case of Ivan Ilyich is of utmost gravity the situation in that it is inevitably going to die, can not recover and his whole life is questionable. The question arises regarding the meaning of life. Lest, ought to live differently? This certainly appears gradually in the soul of Ivan Ilyich is the biggest poison. "His moral suffering was in the fact that , that night, as he looked at Gerasim, at his sleepy face, mild, with protruding cheekbones, he thought suddenly «But if indeed my life, conscious life was not that supposed to be?».

He thought that what was before had seemed to be impossible - that would not have lived life as it should - it

may be true. We come to mind thought that the poor's aspirations to fight against what was considered good by people subject - barely adumbrated by the aspirations he immediately banish from the mind - could be the truth, and the other is not thing. And his job and how he ordained life, and his family, and interests of society and the job - all could not be what you need. However he tried to defend from himself. but suddenly felt all their craziness. And there he had nothing to defend." [1].

This terrible scenario can always be present to each of us. He is potentially in every man bound in any context. American medical system works best in this scenario horizon. The patient should be fully informed, because, in serious cases, if he can turn something in existence, to be able do so. The patient in the Anglo-Saxon system is completely autonomous, is his own master. In consequence he must decide what can be done, particularly in borderline cases, where the last period of existence and is inevitably going to die. All they have to be the case for the patient to prepare, to finally realize this inevitably ending therefore to die with a clear conscience. After all these benchmarks we tend to believe that this is the only possible horizon. But things are not only in this way.

We can imagine the following scenario actually happened in the village of my grandparents. We can imagine a patient, a simple man who lived a lifetime in a village in Romania. This patient suddenly appears to have a medical problem for which surgery was needed in a county hospital of Romania. Doctors have established a form of stomach cancer, unfortunately inoperable. This tumor is in an advanced stage, so they "opened" and then have "closed" him powerless. In the first instance, the surgeon told him about in the following manner: "Grandpa, you have nothing. You had one form of ulcers, but I operated you. You go home and live like before surgery." All well and good, in our patients life for about 6-7 years. But something is happening. Our patient feels the need of a new control, although he felt well. Probably an unconscious desire to show the doctor that he feels

better, who knows? When he enters again the surgeon office door, the doctor is totally surprised, totally confused, I can say. "How are you, sir?"; "You are still alive?" "Well, why not live," replied the patient more surprised than the doctor? ";You, know for what I made the surgery on your case?" "You had stomach cancer, I thought you wouldn't live more than 2-3 months, maximum" "I opened and I closed because I could not work."

Our patient returns to his village and about 5-6 days reaches the cemetery. Now the question arises whether the doctor has done well. In the first instance did pretty good from the French medical system. In the second situation did better in terms of Anglo-Saxon medical system because it has communicated him the truth. This truth, hard to carry for the patient, probably brought more death and despair and suffering in the last period of his life.

5. Conclusions

Unfortunately more unhappiness than happiness would say the French doctors. This existential situation shows that sometimes happiness is more important than truth. We're not only have medical scenarios in which Anglo-Saxon system to be privileged, only that the truth may be privileged in relation to other moral values. There are times when the truth would be sacrificed in favor of happiness. Or, we can formulate some general questions such as: all people want to be happy? All people want to know the truth? The two values are in conflict, this is perhaps the only certainty. Any option we choose we must "sacrifice" a value or more, that is unavoidable and irreversibly to lose something very important. The theme of the originary sacrifice is fundamental to native culture. It starts from the mythology horizon and reaches our days. And then the question is how we decide between the two horizons? Who decides and for who they decide? There are some questions with answers hard to find. Perhaps the most convenient situation in the sense of as

few conflicts would be that the patient doctor to intuit his psychic and comply with its requirements. There are patients who want to know the complete truth and there are patients who do not want to know the truth, especially one that brings suffering, pain and despair. There are not only Anglo-Saxon patients or only a French type, there are patients in both sides. This can be a devastating blow given and any tendency to globalize society, to equalize through a single set of rules. Humanity and the default set of patients is diverse and very complicated to find those equals, repeatable, testable and verifiable undoubtedly.

So, in terms of medical bioethics two systems are perfectly justified in their existence. They speak of two types of patients encountered in the matter of medical practice. The cases described demonstrate interaction of the medical system, whatever it is, with what means the philosophical existentialism, both humanistic horizons are "forced" to interact in the most important aspect of our existence that is facing our own death.

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