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THE IMPACT OF MEDICAL MALPRACTICE ON COMMUNITY

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ABSTRACT

Medical malpractice refers to mistakes made by medical providers in their treatment of patients. This study aimed to investigate the impact of substandard medical treatment on patients' legal rights. A qualitative research approach was chosen, using primary and secondary sources of information. The study revealed that medical malpractice significantly affects patients' rights, underscoring the need for a high-quality healthcare system that protects and enhances patient rights. It has been proven that medical errors cause medical providers to view their patients as potential plaintiffs and practice defensive medicine. This approach has negative consequences for patient care, leading to unnecessary and often harmful outcomes. Furthermore, it has been shown that medical malpractice has particularly adverse effects on patients, affecting them physically, mentally, socially, and financially.

Keywords: Medical Malpractice, Malpractice, Patients, Practitioner, Policies

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INTRODUCTION

According to the World Health Organization (WHO), the rising costs of medical malpractice can hinder patients' access to adequate medical treatment due to the government's limited resources [1]. The healthcare laws of any country guarantee the right to medical services for every citizen, including reproductive healthcare and emergency medical treatment [2].

It is important to examine how medical malpractice affects a patient's right to healthcare and their perspective on accessing healthcare, given the gap between patient expectations and the actual services provided. This research aims to explore when medical practitioners become aware of potential medical malpractice and start adopting defensive practices to avoid the risk of being sued. It will also investigate how this impacts a patient's right to receive proper medical treatment.

There has been a significant increase in the incidence of medical misconduct lately. What actions should be taken to address this issue and ensure access to medical healthcare? To what extent does the risk of being a victim of medical misconduct make it difficult to obtain necessary medical care? Does the guaranteed right to receive medical care become null and void in cases of medical negligence? How much

does the financial burden caused by medical malpractice deprive the government of the resources needed to resolve disputes related to medical negligence? These weighty concerns require attention and answers, and it is crucial to meet these needs.

As a result of the failure of healthcare service providers, patients may receive subpar treatment [3]. When government hospitals fail to provide timely medical treatment, it is a violation of a patient's right to life and access to healthcare, which jeopardizes their right to life. Moreover, it can be inferred that the Supreme Court has validated the state's commitment to continue providing healthcare services. In some cases, petitions have been filed in the public interest to address violations of the right to health [4].

There are various types of medical malpractice, and some examples of medical negligence that may lead to a patient filing a lawsuit include: failure to diagnose or incorrect diagnosis, misreading or ignoring laboratory results, unnecessary surgery, surgical errors or wrong-site surgery, incorrect medication or dosage, inadequate follow-up or aftercare, premature discharge, not obtaining an appropriate patient history or not taking a history at

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all, failure to order appropriate testing, and failure to recognize symptoms.

This study aims to critically investigate the right to access healthcare services in different countries. Its objective is to provide guidance to academics, legal practitioners, government organizations, and judicial officers in interpreting, implementing, and enforcing this right to fully realize the transformative potential of laws [5, 6]. Additionally, the study will explore the possible application of the right to access healthcare services in a horizontal context in countries. This aims to enhance the chances of realizing this right and achieving the transformative goals of the laws. The study will assess the progress made by the government in realizing the right to access healthcare services, including an analysis of the measures put in place. It will also identify any inadequacies in these measures and examine the government's response to current challenges.

RESEARCH METHODOLOGY

This study will use a qualitative research methodology to analyze literature on patient rights and the constitutional obligations of the medical profession in terms of access to healthcare. The research aims to explore the balance between patient rights and medical obligations. The chosen research strategy involves reviewing and analyzing primary and secondary sources of information related to the topic. The sources included international law, policy papers, textbooks and journals. The research is primarily literature-based. The findings are based on the examination and interpretation of the gathered material [7, 8].

IMPACT ON PRACTITIONERS

A shift towards defensive medicine has occurred as a direct response to the increasing magnitude and frequency of medical malpractice claims by healthcare professionals [9, 10]. This shift has had significant emotional repercussions on healthcare professionals, resulting in patients bearing the consequences. Legal practitioners prioritize avoiding lawsuits rather than providing the best possible care. As a result, patients suffer.

Furthermore, the medical industry is concerned about the growing number of medical negligence claims [11]. Due to the fear of these claims, medical practitioners have become overly cautious and have adopted defensive practices to minimize the risk of facing a lawsuit [12].

Malpractice impacts on patients

Malpractice in the medical field is evidence that a patient's rights have been violated or compromised in some way. When a patient experiences harm, it leads to an increase in the number of civil claims settlements and the expenses associated with such claims are ultimately borne by the patients.

There is a widely held belief that the rise in claims is a result of a decline in the medical profession as a whole and a decrease in the quality of care provided by healthcare practitioners. It is the responsibility of medical professionals to ensure that they meet the established criteria for their specific subspecialty. Patient dissatisfaction often plays a significant role in their decision to file a lawsuit, as they may perceive a lack of care and breakdown in communication with the practitioner [13-15].

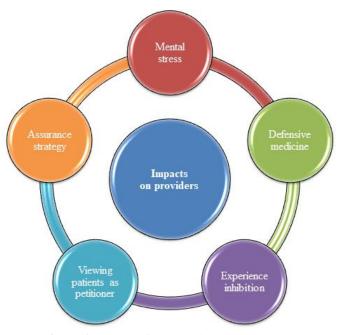


Figure 1: Impact of malpractice on practitioners.

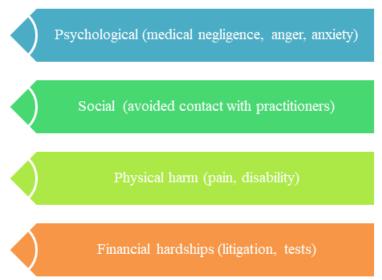


Figure 2: Impact of malpractice on patients.

POLICY MAKERS

Clinics at the community level provide essential medical services to make accessing necessary care easier and relieve pressure on hospitals. Suitable cases are referred from the clinics to designated hospitals in the corresponding geographic regions. These hospitals then refer complex cases to larger designated hospitals with specialized services. Despite the common backlogs and lengthy waiting lists at different levels of the referral system, healthcare services must still be delivered. The government also regulates healthcare delivery and establishes obligations for emergency medical treatment. However, this process can potentially impact patients' violate or Patients should be educated about their rights to medical treatment, protection from malpractice, and the steps to take if malpractice occurs. These rights are closely linked to a patient's right to access healthcare. Research has shown that access to healthcare is a significant human rights issue. The study also examined the impact of malpractice on the quality of life for victims, including potential disabilities, and empowered patients to seek legal action. The research discussed factors contributing to negligent care and emphasized the importance of educating patients about medical negligence as a basis for legal action [16].

The research also revealed infringements on patient rights, helping medical professionals understand the risks and consequences of their actions. Despite a clear legal standard for determining medical negligence, healthcare practitioners often lack a comprehensive understanding of their legal responsibilities.

Although everyone has a constitutionally protected right to medical treatment, instances of alleged

malpractice still occur. This highlights the violation of patients' basic rights.

Other research has focused on errors made by medical professionals. Otto [17] noted an increase in medical malpractice suits brought against practitioners, as reported by the Medical Protection Society (MPS) [18].

These issues and challenges are exacerbated by the large number of affected individuals, particularly those from rural regions, including women, children, and the elderly.

The ongoing problems with management and lack of accountability remain unresolved. Additionally, there is a severe shortage of human resources due to poor policy and budget decisions, leading to increased workloads for inexperienced practitioners. Hospital infrastructure and equipment are in disrepair, and shortages of supplies and drugs further compromise the quality of care.

To gather reliable data on medical malpractice claims and identify areas for improvement, it is necessary to examine medical accidents caused by systemic errors, cost-cutting measures, overworked staff, inadequate safety measures, and a focus on quantity rather than quality of care.

The major problem faced in govt hospitals is overcrowding of patients as well. The patient load is not manageable. This is a resultant effect of over population. Another factor is patient's unrealistic expectations due to rampant quackery in Pakistan. Patients are used to misuse of antibiotics and steroids. Therefore, instead of following prescribed guidelines, they want immediate relief and force doctors to prescribe higher doses and unnecessary medicines.

CONCLUSION

All healthcare professionals have a responsibility to abide by laws and respect the rights of patients. The right to healthcare is directly linked to a decrease in medical malpractice, showing a positive relationship. Patient rights and access to medical treatment are closely connected, benefiting both parties. Moreover, there is a significant and positive correlation between the high costs of medical malpractice and the performance of medical practitioners, emphasizing the importance of maintaining quality patient care. To minimize the dangerous effects of medical malpractice, it is recommended to make it mandatory

REFERENCES

- WHO. The right to health. 2008. Fact sheet No 31. World Health Organisation. United Nations. Geneva.
- Heywood M.2009. South Africa's Treatment Action Campaign: Combining Law and Social Mobilisation to Realise the Right to Health. Vol.1 No.1. Journal of Human Rights Practice. Oxford UniversityPress 14. https://doi.org/10.1093/jhuman/hun006
- van Dokkum N. The evolution of medical malpractice law in South Africa. (1997) Vol.41 No. 2. Pp 175-91 https://doi.org/10.1017/S0021855300009384
- Kavanagh, M.M. The Right to Health: Institutional Effects of Constitutional Provisions on Health Outcomes. St Comp Int Dev 51, 328–364 (2016). https://doi.org/10.1007/s12116-015-9189-z
- Ebi EAO. 2016. Enforcing the right of access to healthcare services in South Africa. LLM unpublished. University of South.
- Brazier Y (2023) What is medical malpractice? Retrieved February 4th 2023, from https://www.medicalnewstoday.com/articles/248175.
- Dahlawi S, Menezes RG, Khan MA, Waris A, Saifullah, Naseer MM. Medical negligence in healthcare organizations and its impact on patient safety and public health: a bibliometric study. F1000Res. 2021 Mar 3;10:174. https://doi.org/10.12688%2Ff1000research.37448.1
- Shi G, Liu N, Yu X, Zhang H, Li S, Wu S, Wang W, Huang P, Li C. Bibliometric Analysis of Medical Malpractice Literature in Legal Medicine from 1975 to 2018: Web of Science Review. J Forensic Leg Med. 2019 Aug;66:167-183. https://doi.org/10.1016/j.jflm.2019.07.002
- Vizcaíno-Rakosnik M, Martín-Fumadó C, Arimany-Manso J, GómezDurán EL (2020) The impact of Malpractice Claims on Physicians' WellBeing and Practice. J Patient Saf 18(1):46–51. DOI: 10.1097/PTS.00000000000000000
- Reisch LM, Carney PA, Oster NV, Weaver DL, Nelson HD, Frederick PD, Elmore JG (2015) Medical malpractice

for all healthcare providers and increase awareness within the community.

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- concerns and defensive medicine. Am J Clin Pathol 144(6):916–922. https://doi.org/10.1309/AJCP80LYIMOOUJIF
- Pienaar, L. 2016. Investigates the reasons behind the increase in medical negligence claims. PERS/PELJ 2016 (19).
- Taylor DW. 2015. Assessment and Plan for medical malpractice: Quality improvement through mediation. Spring Symposium DePaul Journal of Health Care Law. Vol.6 No.2. 343. Journal of African Law 175.
- Bell SK, Etchegaray JM, Gaufberg E, Lowe EC, Ottosen MJ, Sands K, Lee BS, Thomas EJ, Van Niel MM, Kenney L (2018) A Multi-Stakeholder Consensus-Driven research agenda for better understanding and supporting the emotional impact of harmful events on patients and families. Jt Comm J Qual Patient Saf 44(7):424–435. https://doi.org/10.1016/j.jcjq.2018.03.007
- Ottosen MJ, Sedlock E, Aigbe A, Bell SK, Gallagher TH, Thomas EJ (2021) Long-term impacts faced by patients and families after harmful health care events. J Patient Saf 17(8):e1145–e1151. DOI: 10.1097/PTS.000000000000000451
- Schafer AC, Babayan A, Einbinder JS, Sato L, Gardner R (2021) Association of simulation training with rates of medical malpractice claims among Obstetrician-Gynecologists. Obstet Gynecol 138(2):246–252. DOI: 10.1097/AOG.00000000000004464
- Forman L. 2005. Ensuring reasonable health: Health right, the judiciary and South African HIV/AIDS policy. Journal of Law, Medicine and Ethics. Legislating and Litigating Health care rights around the world 711. https://doi.org/10.1111/j.1748-720X.2005.tb00538.x
- 17. Otto SF.2004. Medical Negligence Review Article. South African Journal of Radiology, 8, 2.
- Graham H, Emma H. Challenging the cost of clinical negligence: South African Medical Journal, Volume 106, Issue 2. https://hdl.handle.net/10520/EJC184170.