Ignorance-Based Medicine
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Introduction
Medicine, as we know, is an ever-changing and fast growing field. New concepts and ideas are cropping up with every passing day. At a time when talk of evidence-based medicine and etiquette-based medicine is rife, it would only be apt to add one more to the list-ignorance-based medicine, though this is in stark contrast to the above mentioned types. Whereas evidence-based medicine and more recently etiquette-based medicine (which requires doctors to be more compassionate, attentive and respectful towards patients) (1) are practices that need to be promoted and followed, ignorance-based medicine should be strongly proscribed. It applies to the inappropriate and unfair practice of medicine by certain doctors that is based on the ignorance of their patients or that of doctors themselves. The third world is worst affected due to its high illiteracy, ignorance and superstitions.

The Problem
Ignorance-based medicine can be deliberate (doctor exploiting patient’s ignorance) or unintentional (doctor’s own ignorance). Ignorance on the patient’s part becomes a breeding ground for malpraxis for some doctors. In India this is especially true of the rural areas where patients are poor and illiterate. They have great faith in their doctors whom they consider as Godly figures and so are generally happy with whatever treatment they get (2). But more surprisingly, many cases of ignorance-based medicine are the result of ignorance on the part of the doctor himself. This may be due to the fact that the doctor is poor on meritorious grounds or has not undergone proper training in medical school.

Some of the glaring examples of ignorance-based medicine are:
Labeling any nonspecific joint pain as RA. The patient often carries this diagnosis for years and feels stigmatized.
Labeling and treating benign jaundice (commonly Gilbert’s disease) as hepatitis or some serious liver disease. They are made to believe it as a chronic incurable liver disease and put on long term dietary restrictions.
Palpitations due to anxiety labeled as cardiac disease. The truth is often hidden from the patient and he feels doomed.
Simple cysts of uterus/ovary labeled as malignancy or life threatening that need urgent surgical removal. Even the young nulliparous females are not spared. Such patients often develop post hysterectomy depression. Such quack-like behavior is not becoming of doctors.
Sludge in urinary tract claimed as stones. Such patients are made to receive unnecessary long-term treatment especially alkalizers. Panic attacks treated as bronchial asthma. Even some pulmonologists have been found to be committing this mistake. Functional patients over treated and over investigated. Unduly prescribing analgesics in functional pains or use of long term proton pump inhibitors (PPI’s) in functional dyspepsia is often seen to name a few. It may be pertinent to mention here that long term PPI’s are not as safe as some doctors consider them to be and have been found to be associated with hip fractures(3). Over use of X-rays and CT scans in all cases of headaches and Bone Dexa imaging in all cases of vague arthralgia/backache is commonly witnessed. Hysterical conversion reaction treated as seizure disorder. Functional bowel disease where patient is wrongly told to have incurable infection. It is pathetic to see some of Valley’s top gastroenterologists doing extensive investigations (including colonoscopy) in patients with clinically clear-cut irritable bowel disease. Worse they are then put on PPIs.

Fall Out
Whereas evidence based medicine leads to heightened medical care, on the other hand ignorance-based medicine can lead to very poor patient outcome. An erroneous diagnosis is either made deliberately or unintentionally. Undue and over investigations take their toll on the patient’s physical and mental health besides taxing his finances. Unnecessary medicines often are associated with different adverse effects. Unnecessary surgery sometimes leads to post traumatic stress disorder (PTSD) or other psychiatric illness. Besides, such practice often taints the doctor’s image and that of the profession in general with patients losing faith.

Recommendations
Ignorance-based medicine is only allowed to flourish due to the lack of awareness among people including lack of knowledge of the Consumer Protection Act (CPA). The remedy for the problem is to remove ignorance from both the parties—the patient as well as the doctor. When the patient is educated and has some semblance of understanding of a disease, it would not be easy for the doctor to hoodwink him. Increasing awareness among patients about different diseases and the CPA through print and electronic media will definitely help in alleviating the problem to some extent. Similarly a competent and knowledgeable doctor will diagnose and manage a patient appropriately and scientifically.Moreover those doctors who
deliberately practice unethically exploiting patients’ ignorance can be dealt with by the relevant authorities. Elevating the standards of teaching among budding doctors and selecting of meritorious ones at the time of initial entry is the need of the hour. All this will lead to improved patient management and outcome.

References

Conflict of Interest: None

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