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The Kandilian Oath:  
A Personalized Approach to the Medical Oath

I firmly believe that medical doctors should take an oath in which they swear, by a higher deity, that they will abide by certain moral and ethical standards while practicing medicine. In Ancient Greece, this medical oath was universal and anyone who wanted to become a doctor was required to take the Hippocratic oath. However, I believe this oath should have a more individualized framework whereby medical doctors synthesize their own personalized oaths while at the same time adhering to certain moral standards and guidelines. Since people have so many differences, there is great variability among people's beliefs. Utilizing a personalized approach for the oaths prevents the oath from simply being a formality or a tradition that has no greater meaning. In this personalized oath, doctors will include what they believe to be important, and will exclude any superfluous information they do not believe in. For example, if someone taking the Hippocratic oath believes in the validity of abortion, s/he should not recite the line in the oath that prohibits doctors from procuring an abortion. William Osler, a famous Canadian Physician, once said, "Medicine is an art, not an exact science due to the great variability among individuals." The Kandilian Oath (named after myself) includes many revisions to the original Hippocratic oath. It includes sections from the Hippocratic oath as well as sections that were newly added. In addition, there were sections from the Hippocratic oath that were subtracted because I felt they were not necessary for the oath.

In addition to the personalized portion of the oath, I believe there should be standard guidelines that must be included in all oaths. These standard guidelines should be swearing by a higher entity, vowing not to intentionally harm any patient, and willingness to accept the appropriate consequences for breaking the oath. Medical doctors should all swear by a higher entity because the oath is meant to be a serious pledge that doctors will be required to uphold so long as they practice medicine. Without affirming their intention to uphold the oath by swearing by a higher entity, it would be really difficult to make sure the oath-taker is really serious about the oath. Since the main function of a doctor is to care for and heal the sick, every doctor must swear not to break this fundamental tenet of medicine. In order to ensure that the oath will be upheld, there must be some repercussions for those who break their oaths. And the only way to ensure that these punishments are executed, it should be clear from the beginning that those who break their oaths will be required to accept the punishments given to them.

In the original oath by Hippocrates, doctors swore by higher deities in addition to Aesculapius, who was a famous Greek doctor who had already died. In my oath, doctors swear by their Creators and the creators of the Universe around them. I believe doctors should swear by their own deities, and not have to swear by someone else's deities. Since doctors come from many different backgrounds and have different cultures and religions, it does not make sense that they should all swear by the same deities. If all oath-takers swore by the same deities, they would not take the oath very seriously since many people would not be swearing by their own deities. For these reasons, I believe this beginning portion of the oath should be personalized.

I included in my new oath the portion where the oath-taker pays respect to those who have contributed to his/her medical education. The original oath states, “I will pay the same respect to my master in the Science as to my parents and share my life with him and pay all my debts to him.” My new oath has the same general idea, but does not include the portion of repaying all the debts to the master in Science. The new oath states, “I will forever respect, cherish, and be greatly indebted to those who have contributed to my education in medicine, and promise to pay back my debt to them by putting to use everything they taught me to heal the sick or ease their suffering.” I amended the original statement because nowadays debts are paid back to institutions rather than individuals. Therefore, in my new oath, doctors will pay back their teachers by using the knowledge they learned to heal the sick or ease their suffering.

In the original oath, oath-takers were expected and obliged to teach medicine only to their Science master’s sons, their own sons, and “those pupils duly apprenticed and sworn” if they desired to learn it. Although it is commendable to teach what you have learned and many doctors take pride in teaching medicine to students, people should not be forced to teach anything against their will because doctors can fulfill their duty of healing the sick without teaching medicine to others. In my new oath, doctors could choose whether or not they want to teach medicine. If they do indeed choose to teach medicine, they will teach it to anyone who is “genuinely seeking to study medicine to help others.” This includes a wider array of people including women, who were not allowed to study medicine in the Hippocratic tradition. In the current medical system in the U.S, most doctors host residents or interns in their clinic or operating room for a certain amount of time and teach them the tricks of the trade. However, some doctors

conduct research and do not interact with patients. These doctors do not host medical students, and many times do not teach their medical discipline to others.

The old oath includes a section describing the doctor's obligation to help the sick and abstain from harming his patients. In the new oath, I included a similar section which states, "I will not use my powers as a doctor for any cause that will provide discomfort and suffering to people. I will perform euthanasia only if I feel my suffering patient is terminally ill, and if the current law allows physician-assisted suicide." I think there is no need to extend the suffering of a patient who is terminally ill if the patient desperately wants to die. To-be Doctors should include their personal views in this section of the oath because the issue of euthanasia and physician-assisted suicide are hotly debated topics today. In The Sacred Disease, the author states, "By invoking a divine element they were able to screen their own failure to give suitable treatment and so called this a 'sacred' malady to conceal their ignorance of its nature." In this statement, the author is referring to the witch doctors' attempts to deceive people by using their 'powers' to heal the sick. I agree with the author's condemnation of this type of activity since witch doctors clearly are not trained to treat diseases, and by not treating their patients they are harming them.

I subtracted the statement in the original oath preventing the oath-taker from procuring an abortion. Due to religious reasons, I have a complex opinion about the issue of abortion. There are so many different scenarios that often result in abortion such as rape, marital sex, premarital sex, teenage sex, and extramarital sex that have different religious verdicts. In addition to these different scenarios, there are other variables that contribute to the verdict such as time of abortion, motives, etc. My point is, since there are so many variables that affect the validity of abortion in only one religion, the

inclusion of a statement against abortion in the oath is not a smart idea. Since there are many different views on abortion, this statement in the oath should be either included or omitted depending on the individual preferences of the person writing the oath.

The statement requiring the oath-taker to be religious in his life and practice is omitted in my new oath. Although I agree with this statement, I do not think it belongs in a medical oath. Doctors should not impose their personal religious beliefs on their patients. Although some doctors believe religion and medicine are closely related, others feel that religion should be separated from medicine. Although I would like to be religious in my life and medical practice, I think that doctors should do what's best for their patients even if that means going against some of their own religious beliefs.

The patient-physician trust is stated in both oaths in one form or another. In the old oath, the oath-taker vows to keep secret anything he sees or hears from his patient. In the new oath, I amended this statement by stating that the oath-taker will honor the patient-physician trust "except when the information...might be of harm to others." Adding this statement is important because retaining patient information that might harm others is dangerous for humanity. Although honoring the patient's trust is of utmost importance to doctors, a line must be drawn somewhere. If retaining patient information might harm someone else, the trust should be broken.

The original oath ends with a section stating, "If, therefore, I observe this Oath and do not violate it, may I prosper both in my life and in my profession, earning good repute among all men for all time. If I transgress and forswear this Oath, may my lot be otherwise." Although I believe this statement needs to be included in the oath, I revised it by mentioning concrete punishments for breaking the oath such as being punished in a

court of law, and which can include the revocation of the medical license. Concrete punishments are necessary because without some ‘worldly’ punishment for breaking the oath, it would be difficult to maintain high standards in the practice of medicine.

The modern medical oath should have an individualized framework in which oath-takers write their own personalized oaths with the exception of including a few standard statements that all doctors agree should be included in the oath. Employing a personalized approach for the medical oath prevents it from being a formality that has no greater meaning. Doctors will include in the oath what they believe to be important, and will exclude any superfluous information they do not believe in. In Tradition in Medicine, the author states, “the practitioners of medicine differ greatly among themselves both in theory and practice.” Since doctors are inherently different and have various views on many issues, it makes sense that modern medical oaths should have an individualized framework.

## **Bibliography**

J. Chadwick and W.N. Mann, "The Sacred Disease," in Hippocratic Writings, ed. G.E.R. Lloyd (England: Penguin Classics, 1983), 238.

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