

Physician Sexual Abuse: The Continued Downward Spiral Of A Beloved Profession



By Krystal Alexander — July 12, 2016



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Reporters of [The Atlanta Journal-Constitution](#) ^[1] (AJC) have unearthed more than 100,000 disciplinary documents across the US, spanning a period from 1991 to present. The reports highlighted the disciplinary actions taken on more than 3,100 physicians accused of some degree of sexual misconduct and/or assault, with over 75% of those cases involving a patient directly. The report has brought to light an issue that remains to be adequately addressed by physicians, hospitals, state health boards, and the American Medical Association.

According to the AJC, cover-ups were plentiful across the spectrum of cases they saw, from outright denials to secretly issued “letters of concern,” and “private agreements” to allow some accused of sexual assault to remain practicing physicians. Keeping such matters out of the public eye serves to allow the doctor to keep his reputation intact, should he choose to reform his deviant ways. However, who is protecting the patients that remain vulnerable during this time? And taking that further, who is protecting the integrity of the medical profession?

The current medical fraternity has expanded to include more than doctors: physician assistants (PA), medical assistants, nurses, and medical students at any given time are beside a doctor when he is with a patient. Responsibilities are borne by many. And as such, many are accountable.

Negligence is a very real internal cancer that has been slowly eroding this profession that I hold so dearly. It rears its ugly head in many forms. From turning a blind eye to deliberately withholding information that could be detrimental to a colleague’s career (or your own), negligence is simply not doing better (for your patient and yourself) in spite of knowing better.

For those doctors that managed to face repercussions of a suspended or revoked medical license, the AJC report cites cases of physicians having their license reinstated after completing further educational classes or spending time in recovery centers where they admit their transgressions and work through their issues. Personally, I don’t think a two-month remedial course on ethics and/or boundaries will do much for many accused of physician sexual assault. If years of medical school didn’t teach you the four ethical pillars of medicine⁽¹⁾, then you simply should not be

practicing medicine. Ethics isn't something you just forget. It's not like a cell-phone you forgot home or a jacket you left in the car. You don't check it at the door and come back for it later. Not in a profession like this. It should be imprinted in every action or inaction you take as a doctor.

I understand the worry that if we criminalize our doctors, the health system and patients are likely to suffer the brunt of the impact. Some of the accused were at the top of their chosen medical specialty and highly sought after. The prospect of these professionals' medical contribution being cut short for an indiscretion can present a predicament, especially for those doctors working in under-served and rural communities.

Doctors who have proven to understand the gravity of the offenses they have committed and further taken steps to rectify it and themselves, I would agree that they do deserve a second chance, but with stipulations. When your child is learning to ride a bike, and you have taken the training wheels off, you don't send him out on his own and allow him to plummet onto the pavement. You stay beside him and guide him along. You supervise him and steady him. These doctors require the same. Some measure to be sure that they remain on this reformed path.

To those in the medical fraternity, I advise you to be your brother's keeper. If you see something, say something. Don't allow one mistake or one transgression to become a habit. Hold each other accountable. And for the doctors with student loan debt and rising malpractice insurance fees, you do not want to add a sexual harassment/assault lawsuit to your list of bills. Be mindful of your actions with patients. If you feel uncomfortable, ask a PA or a nurse to step into the examination room with you. Remember that your patients charge you with their trust blindly. Please do right by them, and by your profession.

NOTE:

(1) The four ethical pillars of medicine are respect for autonomy, beneficence, non-maleficence, and justice.

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[1] http://doctors.ajc.com/doctors_sex_abuse/?ecmp=doctorssexabuse_microsite_nav