

**Possible Common Pathways of Service to Human Life
of the Health Professionals of Different Religions
in Paradigmatically Changing Medicine
and Health Care Systems
Postcovid-19 and Beyond**

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DEFINING CHALLENGES NOW → MULTI-CRISIS

... FEARS, DESPAIR, SUFFERING ...
... SOLUTIONS IN THE WORKS ...
... HOPE, HELP, WAYS FORWARD ...
... LESSONS TO BE LEARNED ...



... BUT THE 'OLD' PROBLEMS & CHALLENGES
ARE NOT GOING AWAY ... AND NEW ONES KEEP COMING ...
→ CONTRIBUTIONS OF THE PEOPLE OF FAITH/s NEEDED ...

* EXAMPLES – MEDICINE UNDER PRESSURE/S

- **new technologies** (... disruptive, convergent, emerging...)
- **social** and **economical** pressures (scarcity, inequality, high prices, (non)affordability, health divide/s,...)
- pressures from some **other professions** – competence struggles (e.g., nurses, pharmacists, physiotherapists, health economists, IT specialists,...) – e.g., *Joint Statement of UEMS, EFMA, CMEA on leading role of a physician in health care provision* (2020)
- pressures from **legislators, politicians, health insurance** ‘experts’
- pressures from ‘**alternative medicine/s**’, ‘**traditional medicine/s**’
- pressures from **Dr Google**, Facebook, ‘**influencers**’, ‘**celebrities**’
- pressures from ‘**anti-movements**’ (e.g., anti-vaccination, anti-psychiatry, anti-science – ‘natural’,...)
- pressures from **life-style**, ‘**wellness**’, **fashion** trends/movements
- pressures from ‘**postmodern**’ ways of **reasoning**, communication, and decision-making
- pressures from **ideologies**, ‘**social engineering**’ efforts
- pressures from various kinds of (bio)**ethical pluralism**

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EXAMPLES – HEALTH CARE UNDER PRESSURE/S

- **health care needs exceeding health care resources** (e.g., Covid-19 and other pandemics, populations' aging, DEMOGRAPHIC CHANGES, growing DEMANDS from patients (and their relatives and 'significant others'), 'special groups' (e.g., 'disadvantaged', minorities,...), demands for very expensive treatments – e.g., orphan diseases/orphan medicines, for innovative medicines/special materials/treatment procedures/instruments/new technologies, demands for 'life-style' treatments,...
- **new SCARCITIES** (e.g., health personnel (!), health care funding, material resources (incl. health care facilities, instruments, life-saving equipment/s, medicaments (incl. 'cheap ones'),...)
 - necessity of **RATIONING**, even **TRIAGE**
 - new **physician's** role: 'gate-keeper'
 - new **decision-makers: non-physicians** (health insurance/health administrators, health managers, engineers, lawyers, politicians,...)
- tensions **public versus private sector** (+ patients' co-payments,...)
- pressures from public **health policies, legislation, 'standards',...**
- → **UNFRIENDLY ENVIRONMENT FOR PATIENTS & HEALTH PROFESSIONALS**

GOALS OF MEDICINE - 'OLD' and 'NEW'



- **contemporary medicine**

- saving life, restoring or improving health
- renewing/improving quality of life
- treatment + healing *versus* care + accompanying
- diagnostics, treatment, prevention,... prediction...
- effectiveness, safety, economic efficacy...
... and sustainability...

- **future medicine (?)**

‘human enhancement’ – new abilities, new characteristics, increased abilities, performance...., “changing human nature”, medicalization of ‘happy life’, prolongation of life, longevity, ‘immortality’, “eternal youth”...

→ ‘Brave New World’ (A. Huxley) (or other dystopias) ??

RESPONSIBLE (BIO) MEDICINE



- **responsibility** towards:
 - **patient**, relatives, friends,...
 - society (incl. the future generations and 'mankind')
 - environment (e.g., biodiversity,...)
 - profession (practice standards, ethics,...)
- **effectiveness, efficacy, safety, sustainability**,...
- 'old' and 'new' **tasks and goals** in/for the society
- **ethical, social values** – protection and development,...
- **misuse/abuse** – early detection and prevention,...

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UNITED NATIONS (2015 – 2030)



SUSTAINABLE DEVELOPMENT GOALS



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Missing No. 18 SDG ?

→ People's of Faith Contribution ?!

What could be done ?

What is/are we missing ?

What are/might be our Opportunities ?

What is our Responsibility today ?

WHAT ARE THE UNIQUE AND COMMON INSPIRATIONS
STEMMING OUT FROM OUR FAITH/s ?

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WHAT COULD BE DONE?? WHAT COULD WE DO??

To know **what** is going on...

What **others** are doing...

What others are planning...

What's the **Good**, the **Bad**, the **Evil**...

To discern, to understand... To act!...

Wisely, **competently**, effectively...

Ethically – morally, responsibly, adequately...

...as Physicians & Health Professionals of Faith...

With **Reason**, **Wit**, **Competence** and **Compassion**!

In accordance with our Faith, with its Strength,
and its Spiritual Appeal and Support, with collaboration of people
of good will, especially including the people of faith.



Giordano, Luca (1632-1705): *The Good Samaritan*, 1685, Musée des Beaux-Arts, Rouen

WHAT ARE THE UNIQUE AND COMMON INSPIRATIONS STEMMING OUT FROM OUR FAITHs ?

(Draft Conclusions from the Symposium)

- our vision/s and understanding/s of our patient's and their loved ones as having an eternal destiny and an „absolute value“
- belief that we are responsible not only to us, to our patients, to our communities, to our nations, to our countries,... but also to our God
- our shared respect and appreciation of human life and health of our patients, and of everyone, that go up to all creation

- THIS MAY ALLOW US TO BETTER:

- ✓ share our common human destiny, and paths upon Earth, and that of our patients and their relatives/beloves
- ✓ share and mutually support our medical knowledge and competency – for the good of our patients, their relatives, our communities, and beyond
- ✓ to share our paths in realms of **1)** medicine & health care, **2)** defense of human life and health against the old and new contemporary threats, **3)** in social and charity works and care, **4)** compassion and love to our patients
- ✓ practice our professions with dignity, competency, satisfaction and true joy





THANK YOU FOR YOUR ATTENTION!