**MEDICAL MALPRACTIC IN PAKISTAN**

**“Quackery must stop, full stop”**

**Introduction**

According to Oxford learners dictionaries, malpractice is defined as a *“careless, wrong or illegal behaviour while in a professional job”* [1]. In other words, it is an unlawful, unprofessional and unethical behaviour of a professional of a particular field.

The term “quackery” is entirely different from “malpractice” with regards to its definition, implications and legal consequences. Quackery is defined as, *“the promotion of fraudulent or ignorant*[*medical practices*](https://en.wikipedia.org/wiki/Medicine)*”.* A “quack” is an individual who practices quackery [2]. In other words, a quack is someone who is involved in medical malpractice without possessing required qualifications, professional authority and legal right to undertake such activities in first place.

Much has been written about the medical malpractice in Pakistan. It has been proposed instituting programmes to raise awareness among the medical professionals and implementing the laws related to malpractice [3]. In this article the author highlights the issue of quackery in Pakistan followed by useful suggestions and practical recommendations to eliminate this alarmingly growing problem which is adversely affecting the health of victims of quackery.

**DISCUSSION**

Every year thousands of people either lose their lives or suffer significant harm at the hands of quacks in Pakistan. Unfortunately, there are no reliable data sources and official figures on the number of people affected annually. However, the national newspapers and other media channels are full of such reports on almost daily basis [4][5][6]. In spite of growing reports, the fact of the matter is that it is only a tip of the iceberg and the reality is much more painful than what is highlighted.

Quackery is not only leading to avoidable deaths, it is also one of the leading causes of increasing morbidities in Pakistan. Be it delayed patient presentation to a professionally trained doctor, progression of existing disease or complications of the treatment provided by quack , the final outcome is that it is the patients and their families who bear the brunt of someone else’s mistakes.

***Causes of increasing quackery***

This is a multifactorial issue. After a close observation and critical analysis of quackery, one comes to a conclusion that following factors are playing an important role in this ever increasing problem:

* *Quack’s lack of insight:*

It is morally and ethically incorrect and socially unacceptable to perform an action which is beyond ones professional capabilities. By losing this insight and the sense of “patient care by a trained professional”, the quacks also become deprived of a sense of empathy and honesty. If it is not rectified in the initial stages, the person continues and deeply indulges in quackery to such an extent that even the resulting deaths and complications cannot stop him doing so.

* *Flaws in law:*

The law of the state acknowledges that quackery is illegal, yet there is no strong evidence of implementing this rule. There are flaws in the systems related to law enforcement agencies in Pakistan. Due to a lack of robust legal system and inadequacies in the judicial deterrence, the quacks in Pakistan continue to practice rather openly to such an extent that it has almost become a norm which reflects that quackery has become an accepted practice in various places.

* *Issues of health system and health professionals:*

Since the health system is poorly organised and the state run hospitals do not provide the care of required standards, this has led to flourishing of private health care sector. Majority of Pakistani population is poor meaning not everyone can afford private health care. This helps the quacks to exploit the situation by offering cheap and “affordable” care. There has also been a lack of drive from the health professionals to actively tackle this situation by devising the practical strategies.

* *Lack of education:*

A lack of understanding of differences between a “qualified doctor” and a “quack” has also contributed in spreading of this problem. Often, patients and their cares do not question the treating person’s qualifications and competencies. This attitude of general public encourages malpractice and quackery.

***Suggestions and practical recommendations for improvement***

* *Moral training & moral responsibilities:*

In order to have an insight into professional responsibilities, there is a dire need to include medical ethics training in various curricula. This applies to doctors, nurses, allied health professionals, technicians, paramedics and pharmacists belonging to allopathic, homeopathic and herbal systems of patient care.

There is growing evidence that a significant number of quacks belong to medical field. These are usually non-physician grade health professionals who start practising medicine out of their professional competencies and qualifications. Some of these quacks do this after retirement from a government job whilst others practice quackery as a private practice along with their regular government job.

In addition to moral training, it is also a moral duty of other health professionals to identify the quackery and take practical steps to stop this. If a health professional recognises that another individual is incompetent or unqualified to treat patients, this should be brought into attention of the relevant responsible officers and governing bodies, i.e.; supervisor, medical superintendent, district health officer, registration authorities (PM&DC, Nursing council etc.).

Simply ignoring such a serious health problem would not benefit patients in particular and the reputation of health profession in general.

* *Regulatory bodies and Licensing authorities:*

The relevant regulatory bodies and licensing authorities have a legal duty to lay down clear guidelines with regards to the professionals competencies in relation to qualifications.

It should be made very clear what is expected from a registered professional and what is considered as unprofessional and unethical so that in the event of a malpractice and quackery, appropriate legal actions may be taken in line with the set standards.

All such bodies should categorically prohibit quackery in all circumstances and recommend legal action against those who are found guilty. There should be clear and unambiguous definitions of standards of practice and what constitutes malpractice and quackery.

Like registered doctors with Pakistan medical and dental council (PMDC), there should be up to date registers for other health professionals providing the details of their credentials, scope of practice and permitted professional duties.

In order to achieve these goals, a close collaboration between various licensing bodies is required. There is a desperate need that all health related institutions and governing bodies come up with a collective policy to stop quackery in Pakistan.

*Law and legal system:*

It is understood that any policies and guidelines would become effective if they are implement according to the required standards. The law enforcement agencies and the judicial systems need to appreciate the gravity of quackery and its impact on people lives in Pakistan.

Quackery should be classed as a crime. The perpetrators should be brought to justice and be held responsible for compensation to the losses incurred by quackery.

**SUMMARY**

Quackery is one of the leading causes of increasing mortality and morbidity in Pakistan. Most of the victims are poor with no access to high quality health care. Thousands of innocent lives are lost and many more seriously affected due to quackery.

Due to lack of a reliable data base, the exact number of quackery related deaths are not known, however there is clear evidence that quackery is an increasing health problem.

It is a collective responsibility of health professionals, health institutions, governing bodies, law enforcement agencies and judiciary to take clear, urgent and practical steps to stop this crime against humanity.

**REFERENCES**

1. Oxford leaners dictionaries

<http://www.oxfordlearnersdictionaries.com/definition/english/malpractice?q=malpractice>

1. Quackery. From Wikipedia, the free encyclopedia

<https://en.wikipedia.org/wiki/Quackery>

# [Asfandyar Sheikh](http://www.ncbi.nlm.nih.gov/pubmed/?term=Sheikh%20A%5Bauth%5D),[Sajid Ali](http://www.ncbi.nlm.nih.gov/pubmed/?term=Ali%20S%5Bauth%5D), [Sadaf Ejaz](http://www.ncbi.nlm.nih.gov/pubmed/?term=Ejaz%20S%5Bauth%5D),[Marium Farooqi](http://www.ncbi.nlm.nih.gov/pubmed/?term=Farooqi%20M%5Bauth%5D),[Syed Salman Ahmed](http://www.ncbi.nlm.nih.gov/pubmed/?term=Ahmed%20SS%5Bauth%5D), [Imran Jawaid](http://www.ncbi.nlm.nih.gov/pubmed/?term=Jawaid%20I%5Bauth%5D). Malpractice awareness among surgeons at a teaching hospital in Pakistan. Patient Saf Surg. 2012; 6: 26.

1. [Quack kills woman, newborn](http://www.dawn.com/news/1157729/quack-kills-woman-newborn). Dawn. [A REPORTER](http://www.dawn.com/authors/160/a-reporter) — UPDATED JAN 18, 2015.

<http://www.dawn.com/news/1157729/quack-kills-woman-newborn>

1. Lahore: Quack kills man. November 28, 2011.Pakistancriminalrecords.com.

<http://pakistancriminalrecords.com/2011/11/28/lahore-quack-kills-man/>

1. Quack kills pregnant woman with wrong injection. Pakistan Telegraph. 27th September 2014

<http://www.pakistantelegraph.com/index.php/sid/226124527>

Conflicting interests: None

--------------------------------------------------------------------------------------------------------