

The problem of paramedicine in Poland – from the ethical point of view

Problem pseudomedycyny w Polsce – ujęcie etyczne

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- paramedicine
- pseudo-medicine
- medical ethics
- contemporary quackery

ABSTRACT

The aim of this article is to analyze the concept of "paramedicine" and to present it in a mainly ethical aspect. The problem will be considered mainly in the context of Poland and Polish legal regulations. After an attempt to define what paramedicine is, an ethical and legal analysis of the problem follows. The whole article ends with conclusions.

SŁOWA KLUCZOWE:

- paramedycyna
- pseudomedycyna
- etyka lekarska
- współczesna szarlataneria

STRESZCZENIE

Celem artykułu jest analiza pojęcia „paramedycyna” oraz ujęcie jej w aspekcie głównie etycznym. Problem ten zostanie rozważony przede wszystkim w kontekście Polski i polskich regulacji prawnych. Po próbie zdefiniowania, czym jest paramedycyna, następuje analiza etyczna oraz prawna tegoż problemu. Całość zakończona jest wnioskami.

Introduction

The concept of paramedicine is relatively broad. Basically, it refers to any medical practice that is not accepted by academic medicine, is not established in the legislative system and its effectiveness has not been confirmed by reliable scientific research (1). These practices are called complementary medicine, alternative medicine (in English literature the term complementary and alternative medicine is used, abbreviated as CAM), unconventional medicine or natural medicine (1).

The problem of practicing paramedicine concerns both doctors and persons who are not authorized to provide health services. In the first case it is a situation where a doctor – in the course of his professional practice – decides to apply methods of diagnosis and therapy whose effectiveness has not been scientifically confirmed.

The second case concerns persons who have not been granted the right to practice medicine (therefore, they are not physicians within the meaning of the Act on the Profession of Physician and Dentist of December 5, 1996; Polish: Ustawa o zawodzie lekarza i lekarza dentystry z dnia 5 grudnia 1996 r.), and who perform diagnostic and therapeutic activities. These persons usually carry out business activities, which at the same time involve obtaining financial benefits for providing health care services.

This article outlines the problem of paramedicine in Poland, taking into account both situations mentioned above. The main goal is to analyze this phenomenon from two

perspectives: ethical (paramedicine as a particular moral problem) and legal (the question of legality of paramedical practices).

Subject of the term paramedicine

Systematizing practices of a paramedic nature is difficult. This is mainly due to the multitude of methods that claim therapeutic value in an unauthorized manner. Let us add that in Poland there is a number of professions performed by people practicing unconventional or complementary methods of therapy (2).

Most paramedicine methods can be assigned to one of two main groups:

- traditional (folk) medicine – is characterised by a centuries-old tradition, dating back even to antiquity. According to the definition given by WHO, *it is the sum total of the knowledge, skill, and practices based on the theories, beliefs, and experiences indigenous to different cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, improvement or treatment of physical and mental illness* (3). Some of the tenets of traditional medicine have been endorsed by modern medicine, while others have been deemed ineffective yet harmless. Examples of traditional (folk) medicine are:
 - ♦ chinese traditional medicine – the system of healing which dates back to 200 B.C., proposes that

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the body should balance two opposing yet inseparable forces: *yin* and *yang* (3). Illness is understood as disharmony, a disturbance of the balance between *yin* and *yang*, and healing is about regaining this harmony;

- ♦ ayurveda – comes from ancient India, is based on a holistic vision of man (health as harmony between body, soul and mind), recommends practicing yoga, meditation, breath control and special massages;
- modern complementary medicine – as defined by WHO, it is the *set of health care practices that are not part of that country's own tradition or conventional medicine and are not fully integrated into the dominant health-care system. They are used interchangeably with traditional medicine in some countries* (6). The methods of this kind of paramedicine are most often based on the belief in the existence of supernatural forces and their effectiveness is zero (apart from the placebo effect) or even harmful to the patient. Examples often seen in Poland are:
 - ♦ bioenergy therapy – postulates the existence of an undefined type of energy, which is released through the touch of the person performing the treatment (bioenergotherapist) – this energy is attributed to the healing effect;
 - ♦ homeopathy – involves the use of water solutions of various substances, diluted until nothing remains of the original substance in the solution;
 - ♦ acupressure – consists of pressing and stroking appropriate areas of the body, its alleged effectiveness is to stimulate nerve endings located in the affected areas, which in turn is supposed to reduce pain;
 - ♦ bioresonance – a pseudo-method of a diagnostic nature, designed to detect and treat medical conditions using electronic apparatus. This apparatus is supposed to emit an electromagnetic field, allegedly stimulating the *natural bio-resonance frequency* of cells in the body.

Although some of the methods mentioned above have no effect on the human body, it would be a mistake to believe that they are completely harmless. Belief in the effectiveness of pseudo-medicine can lead to the belief that conventional medicine is unnecessary. This in turn contributes to a situation in which the patient allows the disease to develop.

Ethical problems

As in the case of the division of paramedical methods, the ethical evaluation is also twofold. First, it should be stated that the so-called folk (traditional) medicine, has a certain common path with modern medicine. Undoubtedly, natural medicine is the forerunner here. Furthermore, academic medicine draws extensively on herbal knowledge and many even very sophisticated medicines have their origins in herbal medicine. In this respect, it can be said that traditional medicine is clearer here than so-called complementary medicine (if such a term for medicine can be used at all). Herbalism is therefore a well-recognized field with a specific literature and the possibility of its verification. Therefore, this is not a substantive problem – it is a problem of organizational nature.

It seems that herbal medicine that is scientifically verified, licensed, and has clear rules could be a certain supplement

to academic medicine. It cannot be denied, however, that for substantive reasons, herbal medicine would have to remain under the total control of academic medicine.

The situation is different with regard to so-called complementary medicine. Unlike herbal medicine, this field only pretends to refer to medical knowledge, or to the knowledge of other sciences that cooperate with medicine today, such as medical physics, chemistry, or biology. Rather, complementary medicine is a collection of unverifiable procedures, often based on the principles of psycho-manipulation, using jargon inspired by medical knowledge, whose common goal is to carry out activities that pose as therapy especially among those diseases and conditions that still escape of the standards of modern academic medicine. Complementary medicine is nothing more than a response to the need for hope in the human being who seeks help in the most trying of circumstances. It is the result of the same phenomenon that is behind the formation of conspiracy theories.

It is worth adding that this medicine even creates an alternative, pseudo-medical reality, for example, when, involving selected elements of medical and medical sciences, it develops apparatuses, tools, procedures, standards of practice, and even the whole know-how to imitate the affiliation of complementary medicine to real medicine.

This is where the foundations for responsible ethical evaluation of paramedical sciences are laid. It can be seen here that, in the case of herbal medicine, the focus of this evaluation will be directed at those who act as therapists and who do not have the plenipotentiary powers or the license to engage in medical and therapeutic activity.

On the other hand, the knowledge itself does not arouse as much emotion, especially if it was to be used by a licensed physician. Its use seems permissible, although to a limited extent. In the case of complementary medicine, a negative ethical evaluation will concern both the persons acting here as therapists and the knowledge itself. For this knowledge seems to be empty, having the character of mere imitation.

There is also the question of the therapist's consciousness. It is very likely that a therapist applying the principles of herbalism can be convinced of the rightness of his actions and of the rightness of the therapy he prescribes. The situation is different in the case of so-called complementary medicine. It is difficult to assume that a potential therapist does not have at least a elementary knowledge of the achievements of modern medicine and what is truly valuable in it.

For this reason, it is reasonable to assume that herbalists conduct their business not only in the context of profit but guided by principles sometimes even somewhat similar to those of physicians. Here, therapists in the field of so-called complementary medicine seem to be people who are oriented solely on profit, the desire to outwit a possible patient.

This is crucial for the final ethical evaluation of both ways of conducting therapeutic activity. Herbal healing activity, even that conducted by medically unqualified persons, which is not legally permissible, is not an activity that is ethically condemned in advance. This is the case only when we are able to prove that the person conducting such activity is fully aware of the lack of his or her skills and knowledge. In the case of complementary medicine, the moral assessment is clear and unquestionable. This activity is morally fundamentally wrong, aware of its moral ratchiticity.

Legal regulations

Issues related to the so-called complementary and alternative medicine are assessed not only from an ethical perspective, but also from a legal perspective. In Poland, they are regulated indirectly by the Act of 5 December 1996 on Medical and Dental Professions (Journal of Laws 1997 No 28 item 152, Polish: *Ustawa z dnia 5 grudnia 1996 r. o zawodach lekarza i lekarza dentyisty*, Dz.U. 1997 Nr 28 poz. 152), the basic legal act concerning medical practice. In the chapter on penal provisions, we read:

Art. 58. (1) Whoever provides health care services consisting in the diagnosis of diseases and their treatment without a license shall be subject to a fine.

(2) If the perpetrator of the act specified in section 1 acts with intent to obtain a financial benefit or misleads as to his entitlement, he shall be subject to a fine, the penalty of limitation of liberty or deprivation of liberty for up to one year [...] (4).

Note that the above provision refers not so much to so-called complementary and alternative medicine, but to medicine as such – therefore, its wording also includes those people who use scientifically verified methods of conventional medicine, but do not have the appropriate qualifications. The Supreme Court took a similar stance in 1994, stating that the terms: *diagnosis, treatment, prevention of illnesses, as well as issuing medical certificates [...] mean the exercise of medical profession, regardless of whether they are made by a physician or a non-physician* (5).

Let us also note that the above quoted article omits the question of consequences of unauthorized provision of health care (thus, it does not matter whether the possible effect was positive), nor does it mention the question of informed, mutual consent. Therefore, an offence is committed even if the healthcare service is provided at the request of the patient and has an actual therapeutic effect.

In the case of doctors, the prohibition to use methods typical of the so-called complementary and alternative medicine is expressed in paragraph 1 of Article 57 of the Code of Medical Ethics (hereinafter: KEL):

Art. 57. 1. A physician must not use methods considered by science as harmful, worthless or not scientifically verified. He also is not allowed to cooperate with persons engaged in treatment who are not qualified to do so (6).

It should be noted that the above provision is violated even when the doctor does not practice his/her profession, but only cooperates (even passively, e.g., as a partner in a civil partnership) with persons providing health care services who do not have the relevant qualifications. In this context it is worth mentioning the ruling of the Supreme Court dated November 4, 1998, according to which *placing name and medical title with such persons violates the dignity of the medical profession and [...] undermines confidence in the profession* (7).

Prescribing homeopathic remedies by a physician seems to be a controversial issue. The controversy arises from the fact that homeopathy is not classified as a medical treatment, yet homeopathic remedies are – according to the Pharmaceutical Law Act (Polish: *Ustawa Prawo farmaceutyczne*) – admitted to trading (8).

Consequently, a conflict arises between the above-mentioned paragraph 1 of article 57 of KEL and paragraph 1 of article 45 of the Act on the Profession of Physician and Dentist, permitting a physician to prescribe drugs and foodstuffs for special nutritional purposes, *which are admitted*

to circulation in the Republic of Poland under the rules set forth in separate regulations [...] (4).

Another controversy concerns the professional status of paramedics in Poland. The Ordinance of the Minister of Labor and Social Policy of 7 August 2014 on the classification of professions and specialities for the needs of the labor market and the scope of its application (Journal of Laws 2014, item 1145; Polish: *Rozporządzenie ministra pracy i polityki społecznej z dnia 7 sierpnia 2014 r. w sprawie klasyfikacji zawodów i specjalności na potrzeby rynku pracy oraz zakresu jej stosowania*, Dz.U. 2014 poz. 1145.) specifies that the group of *middle health personnel should include persons practicing unconventional or complementary methods of therapy* (2).

This applies to: *acupuncturist, bioenergotherapist, bio-massage therapist, chiropractor, homeopath, hypnotherapy instructor, kynotherapy, music therapist, naturopath, osteopath, reflexologist, herbalist, art therapist, podiatrist and other practitioners of unconventional or complementary therapies* (2).

It should be added that in Poland there is a significant number of guilds preparing for paramedical professions and organizing journeyman and master's examinations in this field (e.g., Naturopaths' and Hypnotists' Guild, Radio Aesthetes' and Bioenergotherapists' Guild). Since 2003, the Institute of Polish Herbology and Natural Therapies has been operating, which trains herbalists, phytotherapists and naturopaths.

It should be remembered, however, that people in these professions are not allowed to diagnose specific diseases, as well as recommend or discourage the use of medicines. However, it is legal to recommend taking dietary supplements – these are not medicinal products (8), but foodstuff, *which is intended to supplement the normal diet and is a concentrated source of vitamins or minerals or other substances with a nutritional or other physiological effect, excluding products having the characteristics of a medicinal.*

Summary

Undoubtedly, we have two different orders with the help of which we can judge the activities of modern paramedicine. These are the legal order and the ethical order. For the most part, these two orders agree in their assessment of these activities: both law and ethics disavow these activities. However, there are some subtleties here. The legal order rules out such activity beyond a reasonable doubt. The moral order tries to go deeper in its evaluation and considers the problem in terms of both the object and the subject of the activity.

As far as the subject matter is concerned, herbalism seems to be a somewhat morally acceptable activity, for the reason that herbal medicine has in the course of history been an equivalent or complementary activity, or at least close to medicine itself. In the case of so-called complementary medicine, there has never been any such relationship.

For the same reasons, for ethics a therapist applying the principles of medicinal herbs is not a person fully morally condemned as a person applying the principles of complementary medicine. Ethics here refers to the consciousness of the therapist, who has some reason to believe that the activity of medicinal herbs is not just pure charlatany, this is not the case with complementary medicine.

There can be no doubt that the tools and therapies it uses are merely imitations of scientific knowledge, including

medical knowledge. Here we must speak of a certain premeditation. And where there is premeditation, the ethical evaluation of such actions becomes severe.

It is not entirely true to include paramedicine, herbal medicine and complementary medicine in the same concept. Complementary medicine has no such chance either now or in the future, and its use of the term "medicine" is probably the biggest scam.

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