



BMJ 2013;347:f4933 doi: 10.1136/bmj.f4933 (Published 7 August 2013)

EDITORIALS

Attacks on medical personnel in Turkey

A call to honour medical ethics and end violations of medical neutrality

Vincent Iacopino senior medical adviser¹, Vivienne Nathanson director of professional activities², Otmar Kloiber secretary general³, Eleanor Chrispin senior ethics adviser, medical ethics department², Michele Heisler professor of internal medicine and health behavior and health education⁴, DeDe Dunevant director of communications¹, Eliza Young publications coordinator¹, Emily Nee intern¹, Clarisse Delorme advocacy adviser³, Birgit Beger secretary general⁵, Katrín Fjeldsted president⁵, Frank Ulrich Montgomery president⁶

¹Physicians for Human Rights (PHR), New York, NY, USA; ²BMA, London WC1H 9JP, UK; ³World Medical Association (WMA), Ferney-Voltaire, France; ⁴University of Michigan, MI, USA; ⁵Standing Committee of European Doctors (CPME), Brussels, Belgium; ⁶German Medical Association (Bundesärztekammer, GMA), Berlin, Germany

Doctors and other healthcare workers in Turkey, and the facilities in which they work, are facing sustained and intense attacks for treating patients injured during the current civil unrest in the country.1

By providing emergency assistance to the injured, medical workers in Turkey are fulfilling their duty under the International Code of Medical Ethics.² Had they not done so, they would have risked international condemnation, faced professional disciplinary proceedings, and violated the Turkish penal code.³ Equally, as ethical practitioners, failing to provide such care would have breached the principles by which health workers practise and would have undermined their sense of responsibility to the society they serve. In the current circumstances, rendering treatment should be regarded as an ethical response to a need, not a political response to the unrest.

The Turkish government's response to the protests has included using tear gas as a weapon (firing directly at protestors at close range and in closed spaces), firing rubber bullets and live ammunition directly at protestors at close range, using water cannons spiked with tear gas, and beating and detaining hundreds of protestors. Many people have been injured and needed medical help. At the same time, the Turkish Medical Association,⁴ the Human Rights Foundation of Turkey,⁵ and Physicians for Human Rights¹ have gathered evidence of law enforcement officials deliberately attacking identifiable medical personnel and facilities with tear gas, water cannons, and rubber bullets. Police have detained dozens of doctors and other medical personnel for providing emergency care to those injured by the police.

According to Physicians for Human Rights, the Ministry of Health has not only failed to provide adequate medical care to injured demonstrators—as it routinely does in other medical

emergencies—but has also required medical personnel to report the names of injured demonstrators. This is in clear breach of the ethical obligation to respect patient confidentiality.

The Turkish government's response shows a lack of any understanding of medical neutrality and its central position in the practice of medicine. States need to understand the importance of medical neutrality, not only in everyday practice but also during unusual and extreme events. Medical neutrality ensures that healthcare workers treat patients according to need rather than according to any judgment of worthiness.

Given that health workers make decisions about treatment priorities every day, it is essential that patients and populations trust that those decisions are based on need. Triaging treatments is one example of such decision making, but it exists less overtly when decisions to order tests, or refer for further treatment, are made. If patients and their relatives believe that such decisions are based on judgments of worthiness, rather than need, they will stop cooperating in the medical triage systems that allow every healthcare system to function effectively.

It is alarming that a health bill, recently submitted by the Ministry of Health to the Turkish parliament, will—if passed—criminalise the provision of unlicensed or unauthorised emergency medical care, not only to demonstrators, but to anyone in need of emergency medical assistance in Turkey. The requirements of this law would put doctors in direct conflict with their ethical and professional obligations to provide care to those in need. Civil unrest inevitably puts health workers in a difficult position. By responding to medical need—their ethical duty—they may find themselves in danger.

The role of governments is clear. They are required to do their best to protect healthcare facilities, the workers offering care, and the patients to whom it is being offered. Failing to do so

EDITORIALS

shows a disregard for human life and dignity that may exacerbate the conflict that led to the medical need in the first place.

International standards in human rights and medical ethics make it clear that doctors, nurses, paramedics, and other health workers must be able to carry out their professional responsibilities to provide emergency medical care to those in need without interference or fear of reprisal. The Turkish government has a duty to support and protect health workers who are discharging their moral, ethical, and professional responsibilities to provide care for the sick and injured.

The international medical community must respond strongly to this attack on medical neutrality. We urge doctors to join Physicians for Human Rights, the World Medical Association, the BMA, the Standing Committee of European Doctors, and the German Medical Association (Bundesärztekammer) in signing a letter to Prime Minister Recep Tayyip Erdoğan and the Turkish government, urging them to halt attacks on

independent medical personnel who provide care to the injured (http://physiciansforhumanrights.org/turkey-action).

Competing interests: All authors have read and understood the *BMJ* policy on declaration of interests and declare the following interests:

Provenance and peer review: Not commissioned; not externally peer reviewed.

- 1 Physicians for Human Rights. http://physiciansforhumanrights.org.
- World Medical Association. International Code of Medical Ethics. 1949. www.wma.net/en/30publications/10policies/c8.
- 3 Turkish Criminal Code. Articles 97 and 98. http://legislationline.org/documents/action/popup/id/6872/preview.
- Turkish Medical Association. Health status of the demonstrators. 2013. www.ttb.org.tr/ index.php/Haberler/veri-3944.html.
- 5 Human Rights Foundation of Turkey. http://www.tihv.org.tr/index.php?english.

Cite this as: *BMJ* 2013;347:f4933

© BMJ Publishing Group Ltd 2013