

第VII卷 第1期 2009年

ISSN 1386-6354

中外醫學哲學

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應用倫理學研究中心
CENTRE FOR APPLIED ETHICS

Global Scholarly Publications

Vol.7 No. 1 (2009)

儒家生命倫理學與研究方法論

Confucian Bioethics and the Turn of Research Methodology

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摘要

本文首先廓清了“醫乃仁術”在傳統儒家思想脈絡裏的含義，並指出從來源上說，它迥異於西方生命倫理學主流，而採取了一種獨特的“不離人倫，親親為本”的視角。然而這種視角使得“醫乃仁術”總是被一種歧義所困擾：它既是一種行善原則，也是一種未顧及自主性原則的行善原則，家長主義的陰影無處不在。“醫乃仁術”的歧義成為中國生命倫理學建設的最大瓶頸。面對這種困境，本文試圖在現代西方生命倫理學話語實踐之外，另闢蹊徑，借助關懷倫理學和美德倫理學的最近研究成果，闡發“醫乃仁術”的合理內涵。

目錄

摘要

針對中國現代社會轉型期的醫患信任危機，本文試從儒家“誠”、“信”的倫理思想出發，揭示儒家誠信思想之本質在於將“誠”作修身之本，以“信”為人倫之道。並通過分析儒家誠信思想側重對人品人格的內在德性的強調，進一步結合傳統社會的醫患交往模式得出傳統社會醫患誠信的特徵是基於醫者篤行“誠信”儒志的人格信任的結論。進而指出儒家誠信思想對改善現代社會轉型期市場經濟衝擊下，醫生逐利失信、患者寓信於利，雙方產生信任危機是具有現實意義的。本文總結出，在社會轉型和醫患關係日趨複雜化的當今，患者弱勢和醫學本質的內在要求從根本上決定了，只有形成一種以醫生為主的道德性信任，即醫生在充分正確認識醫學目的和醫患利益關係後形成作為醫學專業人員的一種人生态度和專業精神，進而贏得患者的信任。同時，這種相對穩固的信任關係的形成，也離不開有效的監督機制與合理的制度建設等社會誠信機制的建立。

目錄

摘要

中國現代社會醫學領域中出現的種種怪異現象，不幸印證了這樣一個事實：現代醫學的發展與人類發展醫學之真實目的顯現出背道而馳的趨向。本文以上海某醫院一系列引人深思的事件解析其中的原因，規範醫院的行為確實離不開外在的監督，但筆者認為更深層次的原因是科學主義所導致的現代科學迷信和個別醫務工作者的私慾膨脹，最終歸結為工具理性膨脹對上海某醫院一系列引人深思的事件難辭其咎。針對以上弊端，我們可以從中國儒家思想中尋找到應對的思想資源：首先闡明儒家對科學技術的態度；其次闡明儒家的義利觀；最後闡明儒家的科技態度和義利觀得以實現的路徑——中庸之道。通過對儒家思想的現代轉化，可以用於超越和克服現代醫學領域中的工具理性弊病。

目錄

當代中國的公共衛生——基於儒家家庭觀的一點想法

摘要

在中國，無論是對公共衛生內涵的理解還是公共衛生建設的相應理念等在很大程度上都存在因襲、甚至照搬西方模式的問題。在公共衛生責任主體的界定問題上，中國政府強調其對公共衛生的有限責任，認為公共衛生建設是需要政府、社會、團體和民眾的廣泛參與、共同努力的系統工程；學者們卻對政府提出了更高的期望。基於政府應當在公共衛生中承擔主要責任的立場，筆者強調各責任主體在公共衛生中的合作關係。相比於西方社會，中國缺少第三部門（或非牟利團體）的社會現實決定了我們必須找尋適合中國自己的出路。通過對傳統儒家家庭觀的批判繼承，筆者認為應當借鑒指導中國家庭的組織與建構，進一步重塑家庭在當代中國公共衛生中的角色。筆者希望借助家庭作為中國社會傳統資源的優勢，讓其在當代轉型社會中充當連接政府和個人的橋樑。一方面，筆者試圖從傳統儒家思想出發建構其理論基礎，另一方面，筆者亦希望該努力能為中國的公共衛生建設找到一條有效途徑，以期為構建中國自己的公共衛生找尋到一條現實而合理的出路。

目錄

摘要

本文從儒家倫理的視角對安樂死問題加以考量。本文指出，由於儒家對於死後生活的淡漠，使得其更接近世俗倫理的思路，從而可以與安樂死的支持者對話。儒家培養忍耐痛苦的弘毅德性，從而不鼓勵通過選擇死亡來解除痛苦；通過對倫理關係構成人本質的洞察，更反對生死自主的迷誤，指出倫理關係的相關者必須為此負責。但是安樂死對於生命尊嚴的追求在儒家思想上是值得尊重的，關鍵在於這種追求能否鞏固人們生活在其中的倫理關係。

目錄

中國文化是否構成了對知情同意的挑戰？

摘要

知情同意原則自引進中國以來，遭遇到能否與中國文化相適應的質疑。這樣的質疑，基於以下兩個事實判斷：一是，在現實的臨床和研究的同意過程中，往往是家庭共同參與或代替病人或研究參與者決策，而不是由他們本人單獨作決定；二是，從文化傳統來看，中國文化似乎不具備知情同意的理論基礎。由此，一些學者認為中國文化對知情同意形成了挑戰。本文認為，這兩個事實判斷不足以證明中國文化對知情同意構成了挑戰。這不僅因為這樣的事實不是全部的、或真正的事實，而且還因為事實判斷不能代替倫理判斷。倫理的判斷需要更為廣泛的視角。當我們試圖以一些事實說明家庭同意是合理的，那麼我們須要考察，家庭同意是否保護了病人和受試者的利益和權利？當我們斷言說中國文化缺乏自主性的特質時，除了事實的說明外，還須要對自主性的內涵及其意義作出分析，從而能夠判斷這樣的結論是否具有普遍性。自主性之所以是重要的，並成為知情同意的理論基礎，是因為借此病人和受試者可按照自己的利益、意願來行動、決定和選擇，從而達到保護他們的目的。從這個意義上說，沒有必要去深究家庭同意是否撼動了知情同意的基礎，或重新構建知情同意的理論基礎。知情同意的文化敏感性更應該著眼於操作層面。

目錄

摘要

本文在介紹《新世紀醫師專業精神——醫師宣言》(Medical Professionalism in the New Millennium: A Physicians' Charter) 產生的背景、發展狀況、醫師專業精神的基本內容與含義基礎上，從儒家醫學倫理的視角出發，結合案例分析，著重對將患者利益放在首位的原則與利他主義原則、患者自主原則、社會公平原則進行比較、分析和解讀。

Abstract

This essay addresses the ethical implications of the physician-patient relationship from the Confucian perspective, which holds that the physician must regard the patient as a family member to treat the patient properly. It is well known that there are two primary approaches to moral authority in contemporary Western medical ethics. One is internal, and assumes that the good inherent to medicine is the source of moral authority in medical activities. The other is external, and denies that the ends and ethics of medicine can be determined by typical medical activities. It holds that medical ethics should be based on general moral principles, such as autonomy and justice. However, the Confucian model seems to be at odds with both of these approaches. On the one hand, Confucians do not think that medicine constitutes a self-contained domain of activity with its own ethics; rather, medicine is seen as a continuum of familial relationships and ethics. On the other hand, Confucians also hold that the physician-patient relationship should follow the example of the flexible relationships among family members rather than the rigid general principles of autonomy and justice. The Western model is aimed at action, whereas the Confucian view focuses on personal affective relations.

The greatest problem with the Confucian model is its notorious paternalism; that is, it appears to fail to pay sufficient attention to the potential conflict between patient and physician about the good, ignoring the issue of patient autonomy. In the modern Western tradition, the model of the physician-patient relationship is based on two self-sufficient agents (patient and physician) who are united in pursuing a certain good, where each is the final source of what is good for him- or herself. However, the real physician-patient encounter demands a deeper commitment between the two than this model suggests. When entering a physician-patient relationship, what the patient seeks is care from the physician, not autonomy. That is to say, the patient first of all trusts the physician. To earn that trust, it is not enough that the physician treat the patient based only on the principle of autonomy or what the patient requires. Rather, a deep attachment – analogous to a familial relationship – must be developed that can serve as the basis of the encounter between the patient and physician. The Confucian physician-patient model, which is rooted in such a relationship, does not contrast but rather complements its Western counterpart.

Confucian Sincerity as the Root of Physician-Patient Trust:**Reconstructing a Trust Relation between Physicians and Patients in Contemporary China****Yang Yang****Abstract**

A crisis of trust exists in the doctor-patient relationship in contemporary transitional China. This essay applies the Confucian notions of sincerity and trustworthiness to analyze the causes of the crisis. It argues that sincerity is the root of trust in human relations. For trust to develop between patients and doctors, sincerity must be cultivated. Without sincerity mediating human relations, trust between doctors and patients is impossible.

The Confucian doctrine of sincerity is based on one's inherent moral personality, and is part of the virtuous treatment of others. In Confucianism, love is a relational virtue, meaning one should practice filial piety, be kind to one's children, sympathetic to strangers, and so forth; however, one must also be reliable and trustworthy in whatever type of relationship in which one is engaged. To gain the trust of their patients, doctors must demonstrate Confucian virtues in their activities. In addition, with regard to benefits, doctors must not forget virtue or righteousness. They should not make a profit that is not within the scope of Confucian virtue. This point is particularly applicable to today's crisis of trust, because many consider that doctors have violated Confucian principles by making a profit.

The essay concludes that a strong doctor-patient trust relationship cannot be built in contemporary transitional China without the cultivation of the Confucian notion of sincerity. Without doubt, the doctor-patient relationship is complicated by the high-tech medical environment, inevitable vulnerability of patients, and rapid development of the healthcare market. All of these factors make it even more important that doctors form a life attitude that incorporates sincerity and trustworthiness, which are manifested in the virtuous practice of their profession. The Confucian notions of sincerity and trustworthiness will equip doctors to properly understand and achieve professional goals and interests in the care of their patients. Finally, to help in the maintenance of a strong trust relation between doctors and patients, proper public policy, social mechanisms, and effective supervision and regulation based on sincerity and trustworthiness are indispensable.

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Abstract

Recent years have witnessed various unusual events in the medical field in China. This essay explores one particular event that has attracted intense attention and generated broad discussion: the use of a new but unapproved and unaccredited medical technique in a large Shanghai hospital that caused the death of a patient. Also examined are the series of incidents that led up to this tragic occurrence. Such events and incidents indicate that modern scientific medicine in China has taken a direction that may not be consistent with medicine as health care. Specifically, recent medical developments show an instrumentalist rationality – medicine as a tool for scientific development rather than the treatment of illness and disease.

This essay argues that the trend in China towards scientism and instrumentalism in medicine must be overcome by drawing on the moral and intellectual resources of Confucianism. It contends that the Confucian middle way is exactly what is needed to change the current direction in Chinese medical development. First, Confucianism sees science and technology as tools for human flourishing. The current focus on scientism – which seems to hold that science and technology have intrinsic values – is mistaken and should be corrected. Chinese medical technological innovation and application must be directed and mediated by the Confucian moral values of human flourishing and happiness. Second, Confucianism does not reject the gaining of material wealth or medical profit through the practice of medicine, but does require that medical activities be constrained by Confucian virtues, including humanity and righteousness, to ensure that unrighteous profit is not made. The essay concludes by contending that the practice of medicine should be based on embracing the so-called middle way, namely, Confucian virtues and moral concerns, rather than pursuing advanced scientific and technological development.

Abstract

The SARS epidemic in China in 2003 highlighted the significant role played by public health in contemporary society. It also stimulated public health research in Chinese academia. Although the area is too complex to be concisely defined, it is widely recognized that public health focuses mainly on prevention, protection, and promotion. In China, we have usually attempted to copy Western models to deal with Chinese problems in general and public health issues in particular. A serious problem, however, is that such models may fit Chinese contexts well. Chinese scholars have engaged in Western theoretical debates without considering China's unique conditions. I think that this is not an effective way to conduct public health research in China.

China faces three major problems in public health services. First, different kinds of chronic diseases severely affect people's everyday lives, and there is wide regional disparity in public health. Second, it is very difficult to carry out public health services in many regions in the absence of a decent nation-wide minimum healthcare system and a trust relationship between physicians and patients. Finally, because of the one-child policy, the Chinese population has become old before the nation becomes wealthy.

It is impossible for the government alone to deal with all of these difficult problems. Although public participation has been suggested, little has been done to encourage it. It is high time that China adopted a suitable strategy that is based on its unique traditional resources. The family is the key to public health in China. For more than five thousand years, Chinese society has been family based. Although the structure and functions of the family have greatly changed in contemporary times, the resources of the family cannot be overlooked in addressing public health in China. Confucian ethics, which underlie contemporary Chinese society, stem from ideas of proper family life, relationships, and management. If we seriously consider certain public health areas, including health education, disease prevention, and health promotion, then the role of the family is inevitably highlighted. The various elements of Confucianism, such as human flourishing, harmonious family life, filial duty, and mutual respect among family members, constitute the ethical guidelines for the construction of a theory of Chinese public health services and the practical application of such a theory. In addition, compared with Western countries, China still has a long way to go regarding third parties or nongovernmental organizations (NGOs) contributing to public health work. Perhaps family-based associations, such as traditional family clans, will be able to act as Confucianist NGOs and play a significant role in promoting Chinese public health.

Abstract

This essay reexamines the issue of euthanasia from the perspective of Confucian ethics. The author, as a Confucian scholar, responds to and analyzes the ethical challenge posed by euthanasia. In this way, the essay constitutes a preliminary attempt to establish a Confucian understanding of and attitude towards euthanasia.

Confucians generally see death as the end of life in this world, leaving open the question of the immortality of the soul or the resurrection of the body. This view differs little from that generally held in the secularized modern world and seems close to a pro-euthanasia position, making Confucianism different from any other great ancient tradition. On the philosophical level, however, Confucianism views a meaningful life as the process of becoming a saint or sage, which entails the cultivation of important virtues, including endurance and strength. In this sense, attempting to seek death as a means of escaping suffering is not encouraged, however neither is it viewed as evil, for Confucians do not have such an absolute transcendental standard as the Christian Decalogue to prohibit suicide. Rather, for Confucians, the moral sense of an action can only be determined through the context of ethical relations.

Hence, it is necessary to rethink euthanasia in the sociopolitical dimension of Confucianism. For Confucians, ethical relationships constitute not only communities and societies but also humanity. In this sense, it is essentially wrong to advocate the autonomy of individuals because to do so ignores the relational network in which and by which decisions emerge on the individual level. Confucianism stresses the dependence of individuals upon the ethical network such that people are responsible for their family members' and friends' "own" decisions. Euthanasia, then, cannot be reduced to suicide because it contains the element of homicide.

Nevertheless, Confucianism supports respect for human dignity, which is a pro-euthanasia argument. In the Confucian tradition, it is vitally important to ensure the dignity of dying people, not only for their own comfort but also for the consolidation of their ethical relationships, in which they have experienced love and care and which will last long after their death. For Confucians, what is at stake in the issue of euthanasia is whether it can consolidate the ethical relational network on which dying people depend, and whether thereafter a meaningful death can be shaped for the patient.

Abstract

Since its introduction into China as a bioethical principle, informed consent has been a controversial topic. Many doubt its adoptability in the Chinese context. They claim that in China, it is often the family and not the patient that makes the decision about patient care in real clinical practice or medical research. In addition, Chinese culture appears incompatible with the principle of informed consent. As a result, many scholars conclude that Chinese culture constitutes a challenge to the application of informed consent in China.

This essay contends that such an argument does not hold water, or at least, is not well justified. First, such a claim obviously fails to tell everything about the situation in China. In addition, a factual judgment cannot take the place of an ethical one, while an ethical judgment should be made taking a wide perspective. When we seek to determine the justifiability of family consent with certain facts, we need to consider also whether it is conducive to the protection of the rights and benefits of the patient. When people assert that autonomy is not part of Chinese culture, they should not rely on just a factual presentation. Rather, they should go a step further, to work at the meaning and significance of autonomy, so that they can determine whether such a claim is universally true. In fact, Confucian Chinese culture features rich intellectual and moral resources that support individual independence, creativity, and freedom. For example, in the Confucian classics, including the Analects, we can easily find sayings of Confucian sages that emphasize a free, independent, and strong will, which underlies informed consent.

Autonomy, which is the theoretical basis of informed consent, is important because it plays a decisive role in helping to safeguard the rights and benefits of patients. It should be quite clear that it is irrelevant to try to determine whether family consent damages the theory of informed consent, or to try to reconstruct the theoretical framework for informed consent. This essay contends that the key issue to be addressed is to improve the necessary operational measures for implementing informed consent.

**A Confucian Reading of Medical Professionalism:
Comments on “Medical Professionalism in the New Millennium: A Physicians’ Charter”**

Zhang Pingchuan

Abstract

This essay introduces the basic content and key features of the document “Medical Professionalism in the New Millennium: A Physicians’ Charter” issued by a few American and European medical organizations in 2002. It provides a Confucian evaluation of the fundamental professional principles that the Charter upholds: the primacy of patients’ welfare, patients’ autonomy, and social justice. Drawing on rich Confucian moral and intellectual resources, this essay shows that these fundamental principles must be reinterpreted in terms of Chinese medical ethical concerns and commitments in relation to Chinese healthcare contexts. For example, the principles of the primacy of patient’s welfare and patients’ autonomy may be difficult to uphold in real-life situations. How should we resolve such conflicts? Chinese and Western views and methods may differ. This essay provides three cases to illustrate how Confucian ethical views bear on healthcare decision making. These case studies demonstrate how Confucian moral resources can be drawn on to interpret, enrich, and adapt the fundamental principles promoted by the Charter to guide Chinese health care in real-life settings.

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