

Physical assault on a medical resident

To the Editor

With much concern I read the article physical assault on a medical resident.¹ The problem of physically attacking doctors while they are doing their job is serious and not only residents are victims. I have witnessed a specialist being beaten by a patient with a shoe; more seriously I have witnessed a patient's relative threatened a consultant surgeon to kill him, and the list is not short. Certainly, accepting such extreme behavior is not part of any doctor's job, and should not be accepted as part of the profession! Furthermore, I agree with the authors about the need to incorporate communication training and problem solving in our medical training programs. But, I think we should also find the actual reasons for the public frustration, which can be attributable to the following: 1) Newspapers - quite often, irresponsible reporters report some incidents in a very inappropriate way, with time such reports create a stereotype image of the medical service (namely, a lot of medical mistakes is happening and one should watch out). 2) Overacting in private practice - the public developed another stereotyping image (that doctors do not fear Allah in their practice). 3) The very bad working environment of the doctors in some hospitals - such as bad on-call rooms, bad food in dining rooms, authoritarian management and lack of appreciation. These force doctors to be unhappy which will certainly reflect itself in the way of dealing with patients, and a conflict initiated. 4) The lack of official laws and regulations that forbid and punish assault on doctors. There is no incidents I saw or heard of where an official disciplinary action was taken against the offender, this make it easy for anyone to assault a doctor and all he needs is to say sorry! No one can assault a traffic officer, for example, he knows he will be in jail to say the least. No one can assault any civil worker in a ministry for he knows that he will be in deep trouble for sure, but anyone knows that he can beat a doctor and he will only need to say sorry. 5) The non-considerate approach of some colleagues to the tradition of the community, do initiates anger. In some individuals, the result is either to explode at the moment of anger or he can wait for another incident to happen and take revenge. This is particularly true when the non-considerate behavior comes from an expatriate whom he thinks he cannot attack and another doctor in another hospital will pay the price. 6) The stereotype believed in public mind, it means that you have to take your right by your own hands, official complaints do not work and to say the least it is time consuming. The solution in my opinion

are mainly the following: a) Laws that are strictly applied to punish those who attack doctors while they are performing their duties. This will make it clear to anyone's mind that assaulting doctors means severe punishment. b) Encouraging patient to report unacceptable service of management. A responsible dealing with such report will develop a positive image which means report your complaints and your rights will be given fully. c) Specialized medical reporters in newspapers and filing legal complaints against irresponsible reports. d) Hospital management should not allow (as a rule) any assault on doctors to pass trivially even if the doctors forgive. Hospital should protect the doctors, but they can only do so if there are laws to protect them.

Finally, the authors who reported the case advanced a giant step forward by reporting the incident. Saudi Medical Journal deserves a thank you for its initiative to publish the report.

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Reply from the Author

We would like to thank Prof. Mohammad A. Bakhotmah for his interest in our case report and we agree with most of what he had mentioned. More recently, one of our residents was exposed to a very embarrassing situation in the presence of his intern and nurses. It happened when he tried to convince a patient to have a calcium resection retention enema for high potassium. The patient replied very rudely, "put it in your ass!". Both the verbal and physical assault are remarkably rising in our community without any significant action from neither our side nor the concerned authorities. We are sure that the list will not be short, in fact, it will be endless if no action is taken. We still reemphasize the important role that can be carried out by the Saudi Council for Health Specialities. We look forward for more active role of the Council to promote the physicians and other health personnel protection from all kind of assaults. Again, we thank Prof. Bakhotmah for his correspondence, which will stimulate more discussion and create a better awareness on the real risk of the problem.

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Reference

1. Al-Zayed AH, Jammah AA, Al-Nozha M. Physical assault on a medical resident. *Saudi Med J* 2003; 24: 895-897.