

Review of: Hébert, P. (2016) Good Medicine: The Art of Ethical Care in Canada

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COMPTE RENDU / REVIEW

Review of: Hébert, P. (2016) *Good Medicine: The Art of Ethical Care in Canada*Massimo Orsini¹**Mots clés**

éthique, soins de santé, médecin, Canada

Keywords

ethics, health care, physician, Canada

Good Medicine: The Art of Ethical Care in Canada [1] is a collection of true stories that implore the reader to consider and challenge the appropriate boundaries between medical *treatment* and medical *care*. These stories are shared from the perspective of Dr. Philip Hébert, Professor Emeritus at the University of Toronto's Department of Family and Community Medicine. Drawing on his experiences as a physician, a patient, and an educator, Hébert's *Good Medicine* advocates the importance of empathic care in medical practice, emphasizing the primacy of good communication at every stage of the patient-physician relationship.

The book explores a variety of topics faced by practitioners, ethicists, jurists and patients alike: consent to medical treatment, the boundaries of informed consent, capacity, end of life care, assisted dying, and more broadly, the patient-physician relationship. Each of these topics are addressed through the lived experiences of the author as well as his patients, each meriting their own chapters. The book reads easily and eloquently, and is appropriate for general public. While *Good Medicine* is accessible to the average reader in ways dissimilar to most texts in the field of medical ethics, the practical value of this book to clinicians and patients should not be underestimated. Traditional educational texts are seldomly capable of capturing the ambiguous realities of medical practices. Relying on lived experiences, Hébert captures these realities effectively, displaying the real-world ambiguities incumbent upon a physician navigating the healthcare system as an institution, while also managing patient expectations and unprofessional personal biases.

Within his book, Hébert suggests that the practice of the eponymous "good medicine" entails more than a steadfast endeavour to treat illness. It requires a careful, curious, and holistic approach, placing credence upon the patient's experience and wishes. The stories told by the author exemplify the value of communication and active listening in the medical practice. Absent such communication, the author argues, the practice of medicine is at best frustrating for the patient, and at worst, the source of negligent outcomes. These stories include that of a patient whose dermatological symptoms were but a red herring for more insidious ailments, overlooked by dismissive physicians for want of more careful examination. They include the story of the author's own father, who lived most of his life mortally aware of an arterial-venous malformation that could one day claim his life, and the value of advanced directives for when such a day would come. At the crossroads of personal convictions, religion, and resource allocation, the book also tells the infamous story of Hassan Rasouli, and the plight of his family before the medical system and even the Supreme Court in their efforts to secure life support for a patient deemed to be beyond the realm of recovery.

Using stories as allegorical vehicles to impart important lessons, Hébert's *Good Medicine* succeeds in highlighting the human element of medicine, placing emphatic care on the same footing as technical expertise. His stories are as poignant as they are enjoyable to read. Though secondary sources and citations are lacking, Hébert's use of a passive voice in *Good Medicine* makes it accessible for a wide audience. The book deserves a space on the bookshelves of aspiring and practicing physicians, lawyers, ethicists, and merits the attention of the public at large.

Conflit d'intérêts

Aucun déclaré

Conflicts of Interest

None to declare

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References

1. Hébert P. *Good Medicine: The Art of Ethical Care in Canada*, Toronto, Doubleday Canada, 2016.

