

ПРИНЦИПИ БІОЕТИКИ В ЛІКУВАННІ І РЕАБІЛІТАЦІЇ ПАЦІЄНТІВ З ХРОНІЧНОЮ ХВОРОБОЮ НИРОК

PRINCIPLES OF BIOETHICS IN TREATMENT AND REHABILITATION OF PATIENTS WITH CHRONIC KIDNEY DISEASE

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The modern concept of "bioethics" is closely intertwined with the concepts of "deontology", "doctor's code of ethics". From the moment of conception until the death of the patient, the doctor's activities should be aimed at preserving the life and health of the patient and requires him to treat the patient humanely as a person, respect his personality, show compassion and complicity, benevolence, charity and mercy, patience, mutual trust, decency, and justice.

Conscience must be the chief judge in his professional path. These moral principles are systematized in the Code of Ethics of Physicians of Ukraine (hereinafter - the Code) taking into account the provisions of the International Code of Ethics, the Helsinki Declaration, the Universal Declaration on Genome and Human Rights and the Convention for the Protection of Human Rights and Dignity. This Code was created for use in the professional activities of physicians and scientists whose professional activities cover prenatal and postnatal life and human health, birth, and death.

The social role of the patient and the social role of the doctor can be understood differently. M. Siegler and J. Childress use a number of metaphors for different types of patient-physician relationships: partners, friends, contractors, child-parent, and client-technician. There are five basic models of relations in the field of health care: paternalistic (from the Latin pater - father), contract, collegial, technical, friendly.

T. Parson proposed to systematize the social relationship between patient and physician in three models: negotiation, cooperation and consensus. The relationship between patients and physicians should be based on basic bioethical principles (justice, non-harm, respect for autonomy, charity) to expand and specify on the basis of the rules of truthfulness, confidentiality of informed consent.

Communication between the patient and the doctor takes place every day and is unique. The patient's contact with the doctor should begin with an interview. On the part of the doctor, such an interview should be based on the principles of empathy. True empathy does not take extra time, because true empathy is not in actions but in feelings. The doctor must be able to dispel patients' passivity, depression, enhance

social contact, expand the space of their intellectual interests. Empathy reduces patient anxiety, improves treatment outcomes, compliance, and reduces patient complaints to physicians.

The behavior of a doctor who shows a lack of understanding of the patient's problems and does not take into account psychosocial relationships often causes mistrust and even causes conflict between doctor and patient. Fear, distrust of the doctor, physical discomfort and personal qualities on the part of the patient can cause conflict with the doctor. Non-observance by the doctor of business etiquette of non-follow-up on the appearance, untimely beginning and end of the reception, insufficient communication with the patient can provoke the patient.

Issues of medical ethics in the case of the need for kidney replacement therapy remain difficult. The proposal of peritoneal dialysis, hemodialysis, can be perceived positively from the first word and can be categorically negative, depending on the nature and emotional status of the patient.

The submission of such a proposal should be careful, with several days of explanatory interviews to prepare. The question of the need to continue treatment unexpectedly for the patient can lead the patient to despair and even suicide.

Features of the occurrence of kidney disease, their prevention, course, treatment, secondary prevention should be known not only to the nephrologist but, at least in part, to the family doctor. Patients need, depending on age, sex, education, marital status, conditions of daily work, foresight, attention from the doctor in connection with the peculiarities of the occurrence, the course of pathological kidney disease.