

## Attitudes in the Doctor-patient Relationship Jehovah's Witnesses

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Thinking of a Jehovah's Witness patient (JWp) is to imagine a doctor trying to transfuse blood to save the life of a patient who refuses to receive it<sup>1-4</sup>.

In practice, is there any flexibility for finding ways of inclusive and co-responsible coexistence?

We investigated this issue in depth<sup>5</sup> and through qualitative data we have observed different attitudes of both physicians and patients (Box 1).

### Pragmatic physician (MP)

A MP seeks support for his decisions on laws, reports, protocols and standards. This type of physician demonstrates predefined convictions "officially validated" by his advisers. He sees JWp as a homogenous group.

### Autonomist physician (AP)

The AP appreciates patient's autonomy above all, and respects patient's choices regardless of the consequences. He believes that each person is responsible for their decisions and does consider the religion in his assessment. The AP accepts the potential risk of acting in a negligent manner, due to his considerations of beliefs and personal values.

### Deliberative physician (DP)

The DP evaluates each case within each context before taking decisions. He acts with flexibility before acceptable risks.

The DP promotes dialogue, devotes much of his time to the patient, seeks options and transfusion of blood means the last resort.

A survey with 564 cardiologists to learn potential conducts to address a particular case of JWp revealed the following results<sup>6</sup> (Box 2).

The option refuses to provide assistance represents the unwillingness to take risks; the option provides assistance and conducts blood transfusion in the imminent risk of death

### Keywords

Religion; religion and medicine; Jehovah's Witnesses; decision making.

#### Box 1 - Classification of attitudes

Physician	Patient
Pragmatic	Orthodox
Autonomist	Liberal
Deliberative	

#### Box 2 - Choice of treatment and classification of the attitude

Option	%	Attitude
Refuses to provide assistance	43.3	Pragmatic
Provides assistance and conducts blood transfusion in the imminent risk of death	34	Deliberative or Pragmatic
Provides assistance and does not perform blood transfusion under any circumstances	22.7	Autonomist

chooses to protect life; and the option provides assistance and does not perform blood transfusion under any circumstances prioritizes full autonomy.

### Orthodox patient (OP)

OP prioritizes the faith. With that, he has established choices. He has no fear of death to the point of giving up a "savior" treatment. The OP remains strictly within what is prescribed by the community of Jehovah's Witnesses (JW) and fears that a treatment may result in a not allowed conduct. He believes that the religious violation jeopardizes eternal life and the current life because of a possible detachment from the JW community. Thus, death is more acceptable than blood transfusion.

### Liberal patient (LP)

The LP has some degree of flexibility in making decisions about blood transfusion. He seeks to respect his beliefs but does not seem inflexible in stopping the treatment.

The LP, by transferring the decision to the doctor, feels he is not exactly liable for any disrespect to the precepts of religion. The survival instinct overrides.

We believe that the recognition of these five attitudes is helpful to better understanding the degree of flexibility available in the doctor-JWp relationship.

#### Potential Conflict of Interest

No potential conflict of interest relevant to this article was reported.

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## References

1. Ariga T. Refusal of blood by Jehovah's Witnesses and the patient's right to self-determination. *Leg Med(Tokyo)*.2009;11(Suppl1):S138-40.
2. Gillon R. Refusal of potentially life-saving blood transfusions by Jehovah's Witnesses: should doctor explain that not all JW's thinks it's religiously required? *J Med Ethics*. 2000;26(5):299-301.
3. Grinberg M. Tolerância, testemunhas de Jeová e bioética. *Diagn Tratamento*. 2005;10(4):218-9.
4. Hughes DB, Ullery BW, Barrie PS. The contemporary to the care of Jehovah's witnesses. *J Trauma*. 2008;65(1):237-47.
5. Chehaibar GZ. Bioética e crença religiosa: estudo da relação médico-paciente Testemunha de Jeová com potencial risco de a transfusão de sangue [tese]. São Paulo : Faculdade de Medicina da Universidade de São Paulo; 2010.
6. Grinberg M, Chehaibar GZ. Enquete Testemunha de Jeová Arq Bras Cardiol. 2010;95(6):765-6.