

TRUTH IN MEDICINE

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Truth must be the starting point of any definition in medicine and therefore in medical ethics. The space-time definition of the human body and the continuity of the process in it is the first obstacle in medicine on the path to truth, and we immediately encounter this when we try to determine the state of health of patients. The second obstacle lies in the very definition of the concepts of health and disease, which in the end mutually define each other. The desire to penetrate into the continuity of processes in the body is in fact the desire for absolute truth. That which provides existence has an insider (internal, representative) approach to truth. The need to have complete control over the truth in medicine must sometimes end in faith or self-evidence. Philosophy accepted this a long time ago and for the sake of ethics, in the light of a scientific approach to medicine, it is necessary to constantly revise our views.

Keywords: truth in medicine, correspondence, pragmatism, consistency, conventionality, induction, deduction, insider (representative) truth, state of health

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ИСТИНА В МЕДИЦИНЕ

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Истина должна быть отправной точкой любого определения в медицине и, следовательно, в медицинской этике. Пространственно-временное определение человеческого тела и континуальность процесса в нем — первое препятствие в медицине на пути к истине, и мы немедленно сталкиваемся с этим, когда пытаемся определить состояние здоровья пациентов. Второе препятствие содержится в самом определении понятий здоровья и болезни, которые в конечном счете взаимно определяют друг друга. Желание проникнуть в континуальность процессов в организме на самом деле является стремлением к абсолютной истине. То, что обеспечивает существование, имеет инсайдерский (внутренний, репрезентативный) подход к истине. Потребность иметь полный контроль над истиной в медицине иногда должна заканчиваться верой или самоочевидностью. Философия приняла это уже давно и ради этики, в свете научного подхода к медицине, необходимо постоянно пересматривать наши взгляды.

Ключевые слова: истина в медицине, соответствие, прагматизм, согласованность, условность, индукция, дедукция, инсайдерская (репрезентативная) истина, состояние здоровья

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In this article, an attempt was made to determine the problems that shape the path to truth in medicine. Every problem is interdisciplinary to the extent that modern science is interrelated.

First, the problems we come across due to the nature of a human body itself will be enumerated by way of analysing its space-time specificity. Then the definition of 'health' and 'a disease', the issue of a language and logics, and, finally, the issue of a disease classification and use of modern technologies will be analyzed. All this is considered from the point of view of philosophy as the cradle of science and medicine itself and the influence of other sciences and primarily physics and mathematics.

THE ISSUE OF SPACE-TIME DETERMINATION OF A HUMAN BODY

The first question which a patient asks his/her doctor concerns the condition of health. It takes some time to think the question over. A human body is a complex and hence dynamic system with many undergoing processes. To present data about

all parameters of the complicated system, for the sake of absolute truth, it's necessary to consider all constituents. As it is impossible, we appeal to propositional and the so-called pragmatic truth.

Let's provide some facts that explain the issue of space-time definition. The first is the continuity of a human body, and according to the second one, all laws of physics apply in all inertial reference systems.

The continuity is determined both in time, and space. When it comes to a human body, the importance of space-time determination can be clarified by mentioning the special theory of relativity by Albert Einstein (1871–1955.), and Werner Heisenberg's uncertainty principle (1901–1976.). No absolute knowledge of any bodily process results can be obtained; there is still a hope that the knowledge can be approached as close as possible.

In ancient times, the philosophical thought was avant-garde and made breakthrough in understanding the world. As science developed, it was followed by philosophy and agreed its view of world with it. Philosophy couldn't define

the relationship between matter and spirit. Descartes gave unequivocal expression that it was not possible to correct the gap for a long time (*res extensa*, *res cogitans*). I. Kant made three synthetic a priori judgements such as the immortality of the soul, the human freedom and the unity of the world (The Kingdom of aims).

The condition of spirit at the end of the XIX century and beginning of the XX century gave birth to existentialism, a school of thought, stating that 'what' (I am) can't define 'who' (I am) (Shelling, Kierkegaard, Nietzsche, Bergson, Scheler, Jaspers, Heidegger, Sartre, Camus) [1, 2]. This allows to interpret the existence of the reality we come across. If something continuous exists in space and time, then something that controls the existence, has an idea of its condition at the continuous level. For the person with today's level of knowledge, we suggest it to be the endocrine and vegetative nervous systems. They at once react to the change of parameters in the body. Thus, we can state that they have a privilege for truth, let's call it 'internal truth', 'representative truth; or, according to a widely applied expression, 'insider truth'. Impossibility to obtain absolute knowledge as it is used in science doesn't mean that the fact of existence lacks the truth if we follow the ideas of existentialists, as it is not an assertion, but the existence itself.

THE ISSUE OF DEFINING THE NOTIONS OF 'HEALTH' AND 'A DISEASE'

The terms 'health' and 'a disease' are opposed. As both terms result from an agreement, a patient with a serious and incurable disease can be declared healthy and vice versa.

As well-being is a relative notion, no reliable basis is provided for independent assessment of health. It is based on the personal judgement of the one whose health is estimated and on our belief in what he or she is saying.

To understand what health is we need to know what a disease is. On the contrary, a disease is defined as a deviation from the state of health based on several parameters. The cycle defining the state of health and illness makes us a good judge of the ways used to comprehend truth in medicine to avoid its relativization.

THE ISSUES ASSOCIATED WITH A LANGUAGE, LOGICS AND SCIENTIFIC APPROACH TO TRUTH IN MEDICINE

The human ability to differentiate between the body and the environment by means of self-consciousness is important for comprehension of truth in medicine. Kant mentioned that at the level of mind, the notions are considered from the point of view of categories (quality, quantity, relations and modality). It is where all possible data obtained by the organs of sense are sorted [3, 4].

Laws of identity, contradiction and excluded middle and other fundamental 'laws of thought' determined by logics enable us to understand the gender and the difference [5]. Thus, according to Aristotle, 'we study the existence as the existence' [6]. Based on the abovementioned data, 'the logical principles are formal and universal' [7]. This means that they are not independent from truth.

Induction doesn't go beyond premises, i. e., the conclusion is already contained in assumptions. That's why they say that induction 'can't be both true and useful' [3]. It could be thought that deduction is a non-reliable way of conclusion, as giving one hypothesis and achieving premises, it is not always possible to come back using the same way. However, an advantage of checking premises in the empiric sense and their

measurement using the competing hypothesis premises and, thus, their adoption or denial, is present. According to Popper [8], this allows science to be an open system and constantly progress as technical and other possibilities develop. A simple set of analytical data can facilitate inspection, but doesn't lead to epochal discoveries. The discoveries require a brilliant mind. It has certain metaphysical elements.

That's why we make premises using deduction. Then, inducing the premises in the opposite direction, the starting point can't be reliably reached, i. e., this is possible in the statistically significant degree, but not to the absolute extent.

The fundamental judgements woven into the language of the discussed science are considered obvious and there is no need to prove them. We need a belief in self-evidence to accept them. For biology and medicine, it is about birth, growth, nutrition, reproduction, ageing and death. Evolution taken in science as a proven fact and having a status of theory is quite different. It is not something fundamental and self-evident, though it is currently an essential part of any scientific approach in biological sciences.

Something we start with by way of induction or something we achieve by way of deduction can be a thing marked with a property determined using a descriptive term or any fact [8]. Including a language into the process of cognition, we actually get a mediator who provides the first verification, because the notion should correspond to a thing, property or fact. Intersubjectivity is actually the first place where we come across truth as the concept of correspondence.

How the notions are named is decided in a collaborative way. It is rather simple if things are meant. However, when speaking about conditions (properties), the agreement is commonly the question of pragmatism and thus our knowledge about these conditions belong to pragmatic true facts. It can be said that agreement is a product of our wish to have an absolute cognition.

THE ISSUES ASSOCIATED WITH THE USE OF MODERN TECHNOLOGIES TO ACHIEVE TRUTH IN MEDICINE

If, analysing how the sensory organs work, the possible illusions used to be discussed in the past, we are now fighting a vast amount of data provided by machines. When making conclusions withing daily medical procedures, it is necessary to analyze and check the obtained data every day and be attentive when conclusions are made.

To avoid any abuse in treatment in countries with developed medicine, the procedural behaviour is required. This prevents us from making unnecessary mistakes. The only objection is represented by one-sided approach to pragmatic truth by weighing the correlation of the expected benefit and afflicted damage. It occurs when a lower level of diagnostics (primary care) is required to make a diagnosis in some cases as compared to some other situations demanding a higher level of diagnostics due to a larger potential danger (secondary or tertiary care). This is more associated with a rational use of resources than with truth.

THE ISSUES ASSOCIATED WITH A CLASSIFICATION OF DISEASES IN MEDICINE

The WHO developed the International Classification of Diseases at the international level. It establishes a unique system of conceptual marking of diseases and conditions. In this case, truth is of a very pragmatic type. This is reflected in a unique definition of notions (language-code) used in all countries and

hence allows to avoid various designations of national medical data, as medical issues are related to the entire humanity. A list of participants represented by our best and outstanding specialists who took part in printing of a joint collection in 1997 proves that the matter is important and needs to be concentrated on.

INSTEAD OF CONCLUSION

Areas of preventive medicine present a special problem in relation to truth in medicine because it must be sought in the interdisciplinary approach. The relations between a human being and his surrounding are finely balanced and consist of mutual actions. The evolutionary theory and extensive knowledge about genetics made the truth evident. It's been a long-time experience that such things as boomerang can turn against those who cause changes in nature.

It is of special significance that prevention requires to assess the risk for human health in the first place. As any assessment in medicine, it is very ungrateful due to a highly unpredictable nature of a living organism, especially when it is required to assess the risk in relation to one or another group of people. We mainly link our possible failures with a risk of statistical research, which can be justified in many cases, and, to the less extent, with an uncomplete comprehension of a problem occurring due to our limited cognitive abilities.

A special problem in medicine is represented by truths inside psychiatry. The definition given by Dr. Bogdan

Drakulich [9] stresses complexity of the issue: 'Considering the philosophical idea of integrity, a mental disturbance is defined as predominance of particularity (irrationality) escaping from the iterative function of the personality'.

FINAL CONSIDERATION

It can be concluded that cognition of truth in medicine, just like in other sciences, including philosophy, is based on the same principles. It includes (I) our beliefs that basic terms, properties and facts are obvious, (II) justification of beliefs achieved by way of induction and deduction during the actions taken to approach the truth and, finally, (III) respecting 'externalism of principles and internalism of reasons' [10] used to take a decision about the nature of the truth required to perform certain procedures. Why is externalism of principles mentioned? Because we'll make less mistakes when the procedures are followed. Why does the internalism of reasons occur? Because the approach to truth in medicine is of a nuanced type. Apart from the multidisciplinary type of the problem, it denotes the presence of experience and all other psychological factors that determine our activity.

Sometimes we accidentally save a person when trying to find the truth. And sometimes we lose a person, even when we know the truth. Truth is something we can't do without in any science, including medicine. But in accordance with the principles of existentialism, existence (of a human being, in this case) is the greatest truth, as no medicine can exist without it.

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COMMENTARY ON THE ARTICLE "TRUTH IN MEDICINE" BY MIKHAILO LUKOVICH, KATARINA MAJSTOROVICH, DUNI KNEZHEVICH

TRUTH IN MEDICINE: EXPERIENCE OF A STUDY OF BIOETHICS

Consistency of reasonable pragmatism of decisions and strive for 'truth' in the widest sense is one of the most important theses of V. R. Potter's concept of bioethics. Humanistic rationalism and civilizational optimism translated by him belong to the integrating grounds for the research in the wide register of theoretical and practical problems of modern bioethics, including pressing applied issues of medical science and deontology.

The work by the Serbian researchers 'Truth in medicine' updates the problem of axiological grounds for the scientific paradigm. Considering 'truth' as an immanent basis of human existence and referring to historical experience of philosophical and naturalistic world view development, the authors repudiate

the failure of a stereotype about the conceptual discordance of philosophical and common cognition with common ground in functional redundancy and thus non-obviousness of the immanent relation between separate formalized logical procedures and the fundamental laws of life.

The approach allows authors to translate optimism in relation to solution of the problem repudiating its immediacy following the best traditions of V. R. Potter's bioethics. 'Truth' is brought to life as 'wisdom' providing the increasing knowledge with an actual and truly humanistic value.

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