
In Pathologies of Power, Paul Farmer charts new directions for medicine in areas of ethics, human rights, and our responses to suffering. There are many challenges that are relevant for the teacher of family medicine.

For example, Farmer urges us to critically examine what we usually consider to be “medical ethics.” While we in family medicine might not find much of interest in issues at the limits of biotechnology, we are often involved with ethical issues surrounding the patient-doctor relationship, particularly those related to the end of life. Farmer suggests that more important than such issues is that the poor of this world, the more than 2 billion people in the world who live on less than $2 a day, receive little or no medical care at all.

The struggles of such people might be geographically remote from the settings in which most of us practice and teach medicine. But, in an increasingly globalized world, with the burgeoning interactions and integration that we see, it is less and less tenable to say, “That’s not my problem.” Even if we choose not to learn about these people, their suffering goes on. All of Farmer’s work is based on the simple premise that all humans be included “under the rubric ‘human.’”

While most of Farmer’s previous writings have been based on his experiences living and working in the highlands of Haiti, in Pathologies of Power, he has enlarged his scope to include other areas of the world, such as Chiapas, Mexico and prison in Siberia, where he insists that prisoners with multidrug-resistant (MDR) TB receive treatments that will cure them.

No, such therapy is not cheap, but neither was there any justifiable reason for why second- and third-line drugs for TB were so expensive. Through negotiation and through demonstrations that MDR TB could be successfully treated in places such as the slums of Lima, Peru, the prices of these medications have been considerably reduced.

Since Farmer is an infectious disease specialist, he concentrates on HIV and TB, but he also points out, for example, that much maternal mortality around the world would be preventable through the availability of proper maternity care and cesarean sections. Again, why should such resources be devoted to the care of the poor? Indeed, because they’re poor and, therefore, more deserving. Given that medicine has made such scientific advances, will they be delivered or denied to those who need them most? What good are the political rights that are often considered to be “human rights,” if the masses of people around the world do not have the right to a life free of want and disease?

On what basis, then, should care to the poor be delivered: through charity, through development, or through social justice? Drawing on liberation theology, Farmer favors a social justice approach, predicated on the view that the poor are not poor because of their shortcomings but because they are victims of structural violence, the large-scale social forces that create and enforce their poverty. A social justice approach, then, involves addressing those social forces as well as responding to the immediate needs of the poor.

In summary, Farmer challenges us to rethink the fundamental bases of the practice of medicine, ethics, and human rights. He entreats us to help deliver first-class medical care for those who need it most. Each of us must figure out how to respond.

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Family Medicine Welcomes the New Editor of “Book Reviews”

Effective with the July-August 2003 issue of Family Medicine, we bid a fond farewell to longtime “Book Reviews” Editor Jo Ann Rosenfeld, MD, and welcome the new editor, Cathleen Morrow, MD. The editors and publishers of Family Medicine are grateful for the diligent and thoughtful work that Dr Rosenfeld demonstrated in her long-term coordination of the “Book Reviews” section (nearly 11 years). We also look forward to working with Dr Morrow as she takes on this role with the journal.

Reviewers interested in writing reviews for publication and publishers who wish to submit books for possible inclusion in the “Book Review” section should contact Dr Morrow at cmorrow@Mainegeneral.org or:

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The New England Journal of Medicine also published a peer-reviewed Desai study based on Surgisphere data, which included data from Covid-19 patients from 169 hospitals in 11 countries in Asia, Europe and North America. It found common heart medications known as angiotensin-converting-enzyme inhibitors and angiotensin-receptor blockers were not associated with a higher risk of harm in Covid-19 patients. Lancet editor Richard Horton told the Guardian: "Given the questions raised about the reliability of the data gathered by Surgisphere, we have today issued an Expression of Concern, pending further investigation."

"As the scope of practice in family medicine is broad, this book provides a wide range of cases that a family medicine physician must understand for their daily encounters with patients" - Vincent F Carr, DO, MSA, FACC, FACP (Uniformed Services University of the Health Sciences)

Doody's Score: 90 â€“ 4 Stars!