

# INTERVIEW

**PROF. DR. FARHAT MOAZAM**

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## INTERVIEWED BY

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The Center of Biomedical Ethics and Culture (CBEC), connected to the Sindh Institute of Urology and Transplantations (SIUT) was inaugurated in Karachi in October 2004. It is the only such center in the country. The primary aim of CBEC is to serve as a national academic and intellectual resource to foster education and research in bioethics. The following interview was conducted with Dr Farhat Moazam who heads CBEC.

**Market Forces:** What is bioethics?

**Moazam:** Ethics includes a set of principles and guidelines that help us to recognize what is right and wrong in our conduct. The term bioethics is a new term which was coined in the middle of the last century. A component of this is Biomedical Ethics. This is a multidisciplinary field that focuses specifically on the ethics of medical practice, biomedical research, and biomedical technological advances. Biomedical Ethics began as a specific discipline in the United States in the late 1960s, and philosophers, theologians, lawyers and members of the civic society played major roles in the birth of this discipline. This occurred at a time of rapid advances in medical science and biotechnology which while saving many lives were paradoxically also increasing public distrust of physicians, medical researchers and healthcare institutions. Radical changes were taking place within patterns of interactions between healthcare professionals and patients. In the US, very few physicians were initially involved in the bioethics field but this is changing over the years. In marked contrast, in Pakistan and most developing countries, it is members of the medical community, many of whom have trained in institutions in Western countries, who have taken the lead in introducing contemporary Biomedical Ethics in their countries.

**Market Forces:** What kind of awareness of Biomedical Ethics is there in Pakistan?

**Moazam:** Undoubtedly there is increasing interest in Biomedical Ethics in our country. In my opinion, this is partly because it is “fashionable” to talk about ethics, and insert a session or a talk on it in medical conferences and seminars. On the other hand, there is a genuine realization among healthcare professionals of the increasing unethical practices within the medical profession and healthcare institutions, and real concern that

measures are needed to correct this. Frankly, my hopes rest with our younger colleagues who, in my experience, are keen to learn about Biomedical Ethics and find solutions to stem unethical practices.

To date, educational activities in Pakistan to create awareness about Biomedical Ethics have been largely concentrated in Karachi. This needs to be corrected. Another problem in my opinion is that we are “importing” bioethics from America just as we imported science in the last century. Scientific knowledge may be universal but ethics and moral values cannot be separated from indigenous history and culture of a people. We can learn a great deal from contemporary bioethics but we also require methodical and critical study of our own value systems which are present in the Quran and Sunna. There are some who are of the opinion that we only need contemporary Biomedical Ethics and others who believe we need only to turn to our Islamic heritage. What we really need is an amalgamation of values from both sources to find solutions for our problems. As an example, a major ethical issue for Pakistan right now is transplant tourism, a practice of certain physicians and hospitals in Punjab.

#### **Market Forces: How widespread is transplant tourism in Pakistan?**

**Moazam:** It is on the rise. Kidneys are being bought from the most disadvantaged in our society for transplantation into the affluent, many of whom travel to Pakistan especially from the ME. This is both an unethical and non-Islamic practice which openly exploits bonded laborers, kiln workers and others, and reflects a deplorable societal apathy towards the powerless. Muslim *Ulema* have repeatedly given *fatawa* that buying and selling of organs is prohibited by *Shari'a*. Yet the commercial trade of kidneys, as commodities to be bought and sold in the marketplace, continues openly.

Pakistan is one of the very few countries that do not have a law that regulates organ transplantation, criminalizes organ trade, and encourages development of a cadaver donation program. CBEC and its parent institution SIUT are involved in this struggle.

#### **Market Forces: What are you doing to increase biomedical ethics awareness in Pakistan?**

**Moazam:** Our primary focus in CBEC is to build national capacity in Biomedical Ethics through education of healthcare related professionals, general public, and more recently, high school teachers in collaboration with UNESCO. We undertake seminars, workshops and certificate courses in Karachi and other cities in the country. Last year we also initiated the first one-year Biomedical Ethics postgraduate diploma program in Pakistan targeting mid-career level professionals. Students are provided basic grounding in moral thought, clinical ethics and research ethics. We graduated 14 professionals last year and will graduate a second batch this year. Student will introduce biomedical ethics programs in their own institutions following graduation.

Every year we hold several free seminars and conferences open to professionals and the general public. In addition, the “Ethics and Culture Hour,” also open to public, is a quarterly event in which we invite eminent national scholars and literary figures to give talks or recite their works. Past speakers have included Zohra Nigah and Mushtaq Yousufi, and the Islamic scholar Javaid Ghamadi. We believe that it is only by raising ethics awareness in all sectors that we can bring about a change in our society.