

CORRESPONDENCE

Did the COVID-19 pandemic makes scientists forget “Primum Non-Nocere”, one of the most important principles of bioethics?

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To the Editor,

The famous Latin phrase, the origin is uncertain “Primum non-nocere (first, not harm)” is one of the principal precepts of bioethics that all students are taught in medical schools and is a fundamental principle world (1). Another way to put it is that, “given the current problem, not doing anything, or even doing nothing, may be better than risking harm than good. It reminds medical staff to consider the potential harm any intervention can cause. The use of an intervention that carries a clear risk of damage but a less specific chance of benefit is invoked when discussed.

The novel coronavirus (CoV)-2019 pandemic has become a substantial public health challenge. The virus was identified as SARS CoV-2, and the disease caused by this virus is named CoV disease-2019 (COVID-19). Even though most patients are asymptomatic, in many patients, COVID-19 manifests into pneumonia, acute respiratory distress syndrome (ARDS), septic shock, and death (2,3). Unfortunately, there is currently no fully proven treatment for severe cases other than corticosteroids.

In this challenging process, non-evident-based medical applications have entered our life. The useful patient rescue of physicians and scientists, who does not know what to do with a panic, maybe resulted in adverse situations. Sometimes scientists ‘and even more so governments’ race for science and their enthusiasm for being firsts also provided a basis for disregarding this basic principle.

Even the internationally reputable treatment guidelines recommended that FDA approved drugs are not recommended after a while as the studies accumulate during the pandemic process. We have witnessed evidence that they are even harmful.

For example, with a single RCT (4), we are witnessing that even steroids, whose efficacy is proven in short-term and low doses and only in severe disease and that we know for many years are not innocent at all, are used very widely and carelessly. We have been experienced in viral infections for long years. We have been subject to negative results of using corticosteroids, so prepared and thought that we have been operating in most cases in viral infections.

Likewise, it is also evident that all immunosuppressives, including the IL6 inhibitors, shown not to affect mortality in recent studies, are administered to many patients without being thoroughly examined, planning long-term follow-ups, and not being selected correctly.

We see that promising antivirals, especially remdesivir and hydroxychloroquine, have also been published, which have resulted in disappointment after uncontrolled use too many patients, and those who were not recommended later joined the caravan.

Similarly, in the study of Cucinotta

D. (5), the toxicities of the drugs used in COVID-19 were emphasized, and it was stated that especially when comorbidities and multiple drug use are considered for the elderly population, it may lead to worse results. In this study, it was noted that wrong

strategies applied in many aspects lead to ethical problems.

Although the development of secondary bacterial infection in COVID-19 has been shown at a shallow rate by many studies, the widespread use of irrational antibiotics in the world is another problem. It should not be considered that the use of these unconscious antibiotics may also be a public health problem that may be a bigger public health problem in the future, even more than the COVID-19 pandemic, in the COVID-19 pandemic which has the world under the effect of multilateral (Social, economic, political,..) all this, science is also under the impact of politics and preparing the ground for wrong directions. Articles in which science is used in politics are also interesting recently. Yet science must be far from politics, much freer and much more honest.

So, in this case, should we be a little more careful and cautious in using agents that will bring many toxicities with it?

What about after that? After all our experiences and learning over one year, but there are still many unanswered questions, will we continue in the same way?

In fact, over time, science will give the answers to the ongoing confusion and all these unanswered questions.

As a result;

The most crucial principle taught in medical ethics is "Primum non-nocere (first, not harm)" and we science people look like we forget that long during the pandemic process. Avoiding harm to patients and science, scientists' efforts for centuries and the experiences gained should be one of the principles of fighting the pandemic.

It should be all scientists' duty to apply the rational drug use strategies recorded as an essential stage in recent years, even with the pandemic process, and expose effort for it.

Management of the pandemic is more challenging; it will be more rational to apply the treatments

that may hazard the patients with more organized, more precaution, and in the scope of RCT Studies.

We should return to our factory settings immediately and determine the suitable strategies as soon as possible to prevent this pandemic, which hurts many things, from harming science.

Conflicts of interest: Each author declares that he or she has no commercial associations (e.g. consultancies, stock ownership, equity interest, patent/licensing arrangement etc.) that might pose a conflict of interest in connection with the submitted article.

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