



Journal of Intercultural Management and Ethics

JIME

ISSN 2601 - 5749, ISSN-L 2601 - 5749

published by

Center for Socio-Economic Studies and Multiculturalism
Iasi, Romania
www.csesm.warter.ro

Special Editors

Drs. Huib Wursten,
Author and Consultant, Netherlands
E-mail: huibwursten@gmail.com

Beatrice Gabriela Ioan
"Grigore T Popa" University of Medicine and Pharmacy, Iași, Romania
Dept. of Forensic Medicine
E-mail: ioanbml@yahoo.com

TABLE OF CONTENT

Editorial	5
Huib Wursten, Beatrice Gabriela Ioan	
A Global Pandemic in India	7
Divya Susan Varkey	
The Fight against Corona from a Danish Cultural Perspective	23
Pernilla Rorso	
Corona Revisited	33
Huib Wursten, Christi Degen	
Pandemics & Culture: Could Historical Pathogenic Prevalence Reinforce Collectivism?.....	41
Paulo Finuras	
Forgiveness, Unforgiveness and Health	51
Adina Karner-Huțuleac	
How Can Plato Be Relevant for Contemporary Medicine?	59
Tudor-Ștefan Rotaru	
Confidentiality of the Medical Act - Between Patient Preferences and the Collective Risk .	67
Andreea-Luiza Palamaru, Ioana-Florina Mihai, Elena Toader	
Burnout Syndrome in Palliative Care	71
Ana-Roxana Gănceanu-Rusu, Elena Rezuș, Nicoleta Dima, Codruța Bădescu, Daniela Tănase, Anca Ouatu, Andreea Clim, Ana-Maria Pop, Minela Aida Mărânducă, Ciprian Rezuș	
Burnout Syndrome in Forensic Pathology - Current Stage of Knowledge, Approach Proposals	79
Silviu Morar, Lilioara-Alexandra Muja	
Managing the Migration of the Doctors in a Multicultural Context	85
Elena Toader	

A Century Old Dream That May Turn Into a Nightmare 91
Mircea Gelu Buta

Infertility and In Vitro Fertilization. Arguments to Support Proper Counseling 99
Mihail Adeodatus Ungureanu, Beatrice Gabriela Ioan

General Principles Regarding Ethical Evaluation of Projects Involving Laboratory Animals in
Scientific Research 105
Serban Morosan, Cristin Coman

The Utility of Respecting the Ethical Code in Student-Teacher University Relations 113
Elena Gologan, Oana Timofte

HOW CAN PLATO BE RELEVANT FOR CONTEMPORARY MEDICINE?

Tudor-Ștefan Rotaru

PhD in Psychology; PhD Student in Philosophy; Lecturer in Bioethics

„Gr. T. Popa” University of Medicine and Pharmacy Iași, Romania

„Alexandru Ioan Cuza” University of Iași, Romania

E-mail: tudor.rotaru@umfiasi.ro

Abstract

Until recently, Aristotle's notion of φρόνησις dominated the conversation regarding the merits ancient philosophy might have for contemporary bioethics. On the other hand, the platonic approach of medicine was severely underappreciated by specialists in ancient philosophy. In this paper we argue that some of Plato's teachings can be relevant for contemporary medicine. Specifically, we show that the Dialogues provide a special understanding about approaching the relationship between part and whole when dealing with individual patients and communities. Secondly, we argue that the contemporary notion of autonomy might get clearer if we use Plato's distinction between appearance and good. The paper concludes that root philosophical definitions that doctors and patients need might be inspired by Plato, and that the medical profession as a community of peers might play a role in balancing political definitions as well as individual ones with respect to the very core of medical practice.

Keywords: Plato, platonic, autonomy, doctor-patient relationship, holistic medicine

Introduction

The way Plato uses medicine in his Dialogues is quite famous. For his time and the time of his predecessors, medicine served the arguments brought forward in order to support several theses about politics, city and Justice. In the Dialogues, medicine is used as a metaphor (Lidz, 1995), as an example of privileged practice (Joly, 1961), as philosophy's analogy (Thivel, 2004), is mentioned as a craftsmanship (τέχνη) sometimes regarded with despise, sometimes worthy of respect. In fact, the discourse Plato had about medicine seems to parallel the evolution of his Theory of Forms. Some recent research hypothesized a rivalry that Plato had with medicine (Levin, 2014). This is because his opinion changed from disrespect to praise and then back to reconciliation along his works. The connection Plato had with medicine is less famous than Aristotle's. Therefore, the works that thoroughly analyze Plato and medicine came later and brought up interesting new cues (Lombard, 1999). It is not surprising, therefore, that some of the teachings of the great philosopher have come to be considered relevant from the point of view of current medical practice, including bioethics (Levin, 2014). In the following paper I will argue that some of Plato's teachings are relevant for contemporary medicine.

First argument: dislocation from the Whole

In some previous publications, we argued that, for Plato, „patient” means a part that got dislocated from the metaphysical order of the whole (Rotaru, 2018; Rotaru & Toader, 2018). To briefly state the argument, we will highlight the important elements. In English, the noun *patient* means a person receiving or registered to receive medical treatment (Pearsall, 2001). It is derived from the Latin *pātiens*, a present participle of *pātior* which in turn, means

to suffer, to endure, to be the victim of (Gaffiot, 2002). When referring to a person who receives medical care, Plato often uses a present participle of the Greek verb κάμνω (Plato, 1903b, p. 342d, 1903c, p. 720d). The word's meaning is *to work, win by toil, labor, toil, to be weary, to be sick, to be suffering, to be distressed* (Liddell & Scott, 1940). In the *Republic*, Plato asks „neither does any physician in so far as he is a physician seek or enjoin the advantage of the physician but that of the patient?” (Plato, 1982a, p. 342d). The same term appears in the *Laws*: „*But the free-born doctor[...]* talks with the patient himself and with his friends” (Plato, 1967a, p. 720d).

Therefore, the term in ancient Greek has a broader meaning than our current understanding of the notion *patient*. It refers to someone or something who suffers, is weary of or sick from the effect of some other agent. The possible questions to be raised about these meanings deal with the relationship among those who suffer, those who provide care, the kind of suffering and the kind of care being provided. Across the Dialogues, the patient appears to be the whole of one person and a part of a person or a community of people. Intertwining these four elements: the sufferer, the care provider, the suffering and the care, this paper argues that who suffers and who gets care in Plato's Dialogues is meaningful for today's medical practice.

In *Charmides*, Plato shows us the important relationship between the part and the whole. In order to alleviate young Charmides' headache, Socrates teaches that one cannot consider a cure for the part without a cure for the whole: „*This Thracian said that the Greeks were right in advising as I told you just now: «but Zalmoxis,» he said, «our king, who is a god, says that as you ought not to attempt to cure eyes without a head, or a head without body, so you should not treat a body without a soul»; and this was the reason why most maladies evaded the physicians of Greece—that they neglected the whole, on which they ought to spend their pains, for if this were out of order, it was impossible for the part to be in order.*” (Plato, 1955, p. 156d-e). Suffering is a headache, the sufferer is a part of the body, care is a charm (ἐπωδή) and the one offering care is Socrates himself. This part-whole relationship is an important aspect of the way Plato thinks (Lidz, 1995). In this example, therefore, the patient is a part of a human being connected with the mind-body whole.

In *Phaidros*, an important religious treatment is mentioned (Schuhl, 1960). Plato talks about „*diseases and the greatest troubles*” that have stricken whole „*families through some ancient guilt*” (Plato, 1925, p. 244d). The treatment provides release for those in need (οἷς ἔδει ἀπαλλαγὴν ἤρρετο). Here, it is an entire family who suffers, the suffering itself consists of diseases (νόσων) and troubles (πόνων). It follows that the patient is, in this case, an entire group of people related to each other and who have, by some means, inherited a spiritual imbalance.

Plato teaches in the *Laws* about different global lifestyles : „*Let us pronounce that one of them is the temperate life, one the wise, one the brave, and let us class the healthy life as one; and to these let us oppose four others—the foolish, the cowardly, the licentious and the diseased.*” (Plato, 1967a, p. 733d-e). In this fragment, the „patient” is the community as a whole, a group of people needing guidance about how to live their lives in accordance with a fair distribution of pleasure and pain.

The relationship between part and whole, relevant to medicine, is illustrated in other spots of the platonic works. In *Phaidros*, Socrates asks the question: „*ψυχῆς οὖν φύσιν ἀξίως λόγου κατανοῆσαι οἶε δυνατόν εἶναι ἄνευ τῆς τοῦ ὅλου φύσεως:* ” (Plato, 1903a, p. 270c). This fragment has been translated in a variety of ways, like „*the nature of the Universe*” (Platon, 1983), either by „*the nature of the whole man*” (Plato, 1925), although our interpretation would be „*Now do you think one can acquire any appreciable knowledge of the nature of the soul without knowing the nature of the whole?*”. This translation fits the point of view of other scholars on this passage, like Schul (1960).

We suggest that the common thread of all the examples is metaphysical. „*The «patient» is a part of the whole which, for one reason or another, got dislocated from the metaphysical order. This metaphysical order is common for body parts, soul parts, city parts. To break the connection with this metaphysical harmony is to suffer, to be weary, to be a victim, to toil, to endure. The care is provided through various means, and it always seeks to restore that specific element to its original place and function.*” (Rotaru, 2018). For contemporary medicine, this is a relevant teaching. A patient asking for help might be considered as a piece of a larger structure that fell into disarray. Healthcare would, therefore, mean restoring the person or the community into the general order of appropriate functions and places. It means reconnecting someone to the whole.

Second argument: contemporary autonomy as the ancient platonic βούλομαι

The precise meaning of the term „autonomy” in contemporary biomedical ethics is still disputed. A minimal definition would consider autonomy a self-governance which is free from both the controlling interference of others and free from interference that would prevent a meaningful choice. Such an example would be, for instance, inappropriate understanding. For many bioethicists, the autonomous person is the one who acts freely according to a plan of their choice. Oppositely, a person with diminished autonomy is, in some significant respect, controlled by others or incapable to deliberate or to act based on their own desires and plans. Almost all theories that discuss the ethical meaning of „autonomy” take into consideration two essential prerequisites. One of them is freedom, understood as independent from controlling influences and the other one is agency or ability to act with intention (Beauchamp & Chidress, 2013, pp. 101–102).

Plato does not hesitate to give examples of how the exercise of autonomy is concerned. He shows us in the *Laws* that a similar condition with what we currently understand by autonomy is a privilege owned only by the citizens but not by the slaves. „*But the free-born doctor is mainly engaged in visiting and treating the ailments of free men, and he does so by investigating them from the commencement and according to the course of nature; he talks with the patient himself and with his friends, and thus both learns from the sufferers and imparts instruction to them, so far as possible; and he gives no prescription until he has gained the patient's consent, and only then, while securing the patient's continued docility by means of persuasion, does he attempt to complete the task of restoring him to health.*” (Plato, 1967a, p. 720d-e).

Two types of expressions in no apparent connection with the medical problem are very helpful in determining a meaning close to the present-day definition of „autonomy”. It can be observed in a fragment in *Gorgias*: *φημὶ γάρ, ὦ Πῶλε, ἐγὼ καὶ τοὺς ῥήτορας καὶ τοὺς τυράννους δύνασθαι μὲν ἐν ταῖς πόλεσιν σμικρότατον, ὥσπερ νυνδὴ ἔλεγον: οὐδὲν γὰρ ποιεῖν ἂν βούλονται ὡς ἔπος εἰπεῖν, ποιεῖν μέντοι ὅτι ἂν αὐτοῖς δόξη βέλτιστον εἶναι* (Plato, 1903a, p. 466d-e). In English: „For I say, Polus, that the orators and the despots alike have the least power in their cities, as I have stated just now; since they do nothing that they wish to do, practically speaking, though they do whatever looks better to their opinion.”

There is a lexical relation between δόξα (opinion, appearance) and δοκεῖν (to appear, to make a resemblance of). This dichotomy is not particular to the Dialogues, and it appears in early ancient Greek literature (Euripides, 1902). This interesting dichotomy between phrases containing βούλομαι and δοκέω, respectively is superposed to a larger classification in *Gorgias*. Some pairs of notions build a true map of reading for this dialogue. The classification in question can be observed in Table 1. On a discussion about rhetoric, Socrates made a distinction which later came to prove a classification for almost all-important human professions at the time. A τέχνη is connected to knowledge and is preoccupied with real health. This includes the soul's health, meant to be corrected by politics and the body's

health, where we take gymnastics and medicine into consideration. These occupations are connected to knowledge and truth (like true health). Therefore, τέχναι are those occupations that really target the „good“. For them, the most suitable act of will is one labeled by βούλομαι (to do what one really wants). We find ourselves in a comfortable superposition with the contemporary concept of autonomy, as it is debated in current bioethics. Briefly, there is a nuance of autonomy in the light of Plato’s teachings: for a patient to *really engage* in something they *really want*, they must *really engage* in what is *good* for them. This engages a real knowledge, from the patient’s part, of what is good for themselves. It does not purport to a freedom to do only what looks best to their opinion but, in reality, is not good for them.

<i>Verbs</i>	To desire what looks better for one’s opinion (expressions using δοκέω)		To desire what one really wants (expressions with βούλομαι)		
<i>Relation to health</i>	apparent health		real health		
<i>Epistemological value</i>	flattery basic practices (ἐμπειρία)		knowledge arts (τέχναι)		
<i>Metaphysical value</i>	they are meant for pleasure		they are meant for good		
<i>Occupations for the soul</i>	sophistry	creates apparent health	politics	legislation	creates real health
	rhetoric	restores apparent health		justice	restores real health
<i>Occupations for the body</i>	cosmetics	creates apparent health	-	gymnastics	creates real health
	cooking	restores apparent health		medicine	restores real health

Table 1: The dichotomy δοκέω - βούλομαι in the classification of Gorgias 462c-469b

We can easily notice, by opposition, that Socrates describes all the basic practices which are only apparently good, but they are only meant for pleasure. Therefore, there is no epistemological value to them. These basic practices usurp the real arts, deal with apparent health and consist in all kinds of flattery behaviors. In the way the soul is concerned, they present themselves as sophistry (which creates apparent health) and rhetoric (which restores apparent health). In the way the body is concerned, cosmetics and cooking play, correspondently, the same role.

Where should we put contemporary autonomy in this context? Did Platon speak, even in his own terms, about the patient’s freedom to choose? We argue that this is the case. However, freedom of choice is exercised only in the realm of good¹. „Good“ as the patient understands it might not be understood as real. An apparent good can usurp the real good.

In Crito, the exercise of freedom for the good means listening to proper sources of information and authority: „If a man is an athlete and makes that his business, does he pay attention to every man’s praise and blame and opinion or to those of one man only who is a physician or a trainer? [...] And he must act and exercise and eat and drink as the one man who is his director and who knows the business, and who thinks best rather than as all the others think“ (Plato, 1982b, p. 47b). In Alcibiades, Socrates warns: „Then do you note that mistakes in action also are due to this ignorance of thinking one knows when one does not?“ (Plato, 1955, p. 117d). In other words, we are talking about the one who acts according to what seems best to his opinion and not what one really wants. On the other side, the exercise of freedom which is not directed towards good cannot be considered a choice in terms of

¹ We don’t consider her the purely transcendental meaning of Good that transpires in the Republic 509b (οὐκ οὐσίας ὄντος τοῦ ἀγαθοῦ), but only the meaning that is used in Gorgias.

βούλομαι but a mere orientation towards appearance. This appearance is often destructive, and Socrates also denounces this aspect in Alcibiades: „*For if a man, my dear Alcibiades, is at liberty to do what he pleases, but is lacking in mind, what is the probable result to him personally, or to the state as well? For instance, if he is sick and at liberty to do what he pleases—without a medical mind, but with a despot's power which prevents anyone from even reproving him—what will the result be? Will not his health, likely, be shattered*” (Plato, 1955, pp. 134e-135a)?

There is an apparent paradox. From the dialogue, one can understand that being autonomous means letting oneself be led by the one who owns a superior definition of the „good” in question. Being autonomous has nothing to do with an apparent blind liberty which goes either way: „*And before getting virtue, to be governed by a superior is better than to govern, for a man as well as a child*” (Plato, 1955, p. 135b). If we can think the contemporary notion of autonomy as *a form of freedom disciplined towards the good*, it is easier to understand the whole fragment of Gorgias. In this fragment, true knowledge is set in opposition with spoiled behaviors, with respect to those who, apparently, choose freely: „*so that if a cook and a doctor had to contend before boys, or before men as foolish as boys, as to which of the two, the doctor or the cook, understands the question of sound and noxious foods, the doctor would starve to death. Flattery, however, is what I call it, and I say that this sort of thing is a disgrace*” (Plato, 1967b, pp. 464d-465a).

From the platonic works we can sort out a nuance of autonomy which refers to exactly what the patient is supposed to know when deciding. Are they to decide by their own definition of good, or must they be guided with information about the decision to be taken? This autonomy-paternalism discussion has another nuance in Lysis, where Socrates explains the manner in which people are free or must they allow themselves to be ruled by competence and maturity: „*I went on: what, pray, of the Great King? Would he allow his eldest son, heir-apparent to the throne of Asia, to put what he chose into the royal stew, or would he prefer us to do it, supposing we came before him and convinced him that we had a better notion than his son of preparing a tasty dish? - Clearly, he would prefer us, he said. - And he would not allow the prince to put in the smallest bit, whereas he would let us have our way, even if we wanted to put in salt by the handful. - Why, of course. - Again, if his son has something the matter with his eyes, would he let him meddle with them himself, if he considered him to be no doctor, or would he prevent him? - He would prevent him. [...] The case then, my dear Lysis, I said, stands thus: with regard to matters in which we become intelligent, everyone will entrust us with them, whether Greeks or foreigners, men or women and in such matters we shall do as we please, and nobody will care to obstruct us. Nay, not only shall we ourselves be free and have control of others in these affairs, but they will also belong to us, since we shall derive advantage from them; whereas in all those for which we have failed to acquire intelligence, so far will anyone be from permitting us to deal with them as we think fit, that everybody will do his utmost to obstruct us not merely strangers, but father and mother and any more intimate person than they; and we on our part shall be subject to others in such matters, which will be no concern of ours, since we shall draw no advantage from them*” (Plato, 1955, pp. 209d-210c).

Conclusion

For a contemporary doctor, finding relevant information for medical practice in texts that are over twenty-three centuries old might seem a strange endeavor. However, we have shown that Plato's Dialogues contain a lot of wisdom with respect to at least two main topics of contemporary medicine. One of them concerns the holistic approach: it brings forward the idea that a „patient” might not be an individual person only, but also a community, a line of succession or even part of a human being, material or spiritual. Healing deals with

reintegrating what is considered „patient” into the whole of proper functions and places. So, contemporary medicine might ask itself who owns the definition of „the whole”. It doesn’t appear to be something an individual person is capable of formulating. On the other hand, it is dangerous to allow it to become an exclusively political definition.

The other topic of relevance relates to what we perceive today as autonomy. We all know the notion is still disputed, at least in bioethics. Current definitions, although prestigious, are unsatisfactory. Plato teaches us that there might be two ways of wanting: wanting something that appears attractive to one’s opinion and wanting something for real because it is for the real good of the patient. In parallel to the first topic, the medicine must ask itself who owns the definition of „good”. And again, we can be warned about the dangers of making it an exclusively political notion or an exclusively individual one. In both cases, a possible solution might be getting back to the profession as a community of conscience. A consensus of peers might be the first step in providing the definitions that find themselves at the very root of a medical practice and medical choice. Plato can help. Even over millennia.

References

1. Beauchamp, T. L., & Childress, J. F. (2013). *Principles of biomedical ethics* (7th ed.). New York, Oxford: Oxford University Press.
2. Euripides. (1902). *Euripidis fabulae I* (G. Murray, ed.). Oxford: Clarendon Press.
3. Gaffiot, F. (2002). *Le Gaffiot de poche : dictionnaire latin-français* (4th ed.). Hachette Education.
4. Joly, R. (1961). Platon et la médecine. *Bulletin de l’Association Guillaume Budé*, (20), 435–451. doi:10.3406/bude.1961.4200
5. Levin, S. B. (2014). *Plato’s Rivalry with Medicine: A Struggle and its Dissolution*. New York, NY: Oxford University Press.
6. Liddell, H. J., & Scott, R. (1940). *A Greek-English Lexicon: revised and augmented throughout by Sir Henry Stuart Jones. with the assistance of Roderick McKenzie*. Retrieved from <http://www.perseus.tufts.edu/hopper/resolveform?redirect=true>.
7. Lidz, J. W. (1995). Medicine as metaphor in Plato. *The Journal of Medicine and Philosophy*, 20(5), 527–541.
8. Lombard, J. (1999). *Platon et la médecine: le corps affaibli et l’âme attristée*. Paris: Editions Harmattan.
9. Pearsall, J. (Ed.). (2001). *The Concise Oxford Dictionary* (Tenth, rev). New York, NY: Oxford University Press.
10. Plato. (1903a). *Platonis Opera: Tomus II* (J. Burnet, ed.). London: Oxford University Press.
11. Plato. (1903b). *Platonis Opera Tomus IV* (J. Burnet, ed.). Oxford University Press.
12. Plato. (1903c). *Platonis Opera Tomus V* (J. Burnet, ed.). Oxford University Press.
13. Plato. (1925). *Plato in Twelve Volumes, Vol. 9 translated by Harold N. Fowler*. Cambridge, MA: Harvard University Press.
14. Plato. (1955). *Plato in Twelve Volumes, Vol. 8 translated by W.R.M. Lamb*. Cambridge: Harvard University Press.
15. Plato. (1967a). *Plato in twelve volumes: Volume 10, The Laws, books I-VI translated by R.G. Bury*. London: William Heinemann Ltd.
16. Plato. (1967b). *PLato in Twelve Volumes. Vol. 3, translated by W.R.M. Lamb*. (Vol. 3). London: William Heinemann Ltd.
17. Plato. (1982a). *Plato in twelve volumes: V The Republic translated by Paul Shorey* (P. Shorey, ed.). Cambridge: Harvard University Press.
18. Plato. (1982b). *Plato in Twelve Volumes I: Euthyphro, Apology, Crito, Phaedo, Phaedrus* (2nd ed.). London: William Heinemann Ltd.

19. Platon. (1983). Phaidros. In P. Creția (Ed.), *Platon - Opere IV* (pp. 343–527). București: Editura Științifică și Enciclopedică.
20. Rotaru, T.-Ș. (2018). Who is the Patient in Plato's Dialogues? *Hermeneia: Journal of Hermeneutics, Art Theory & Criticism*, (21), 227–233.
21. Rotaru, T.-S., & Toader, E. (2018). Part and Whole: A Reading of Care in Plato's Dialogues. In B. G. Ioan (Ed.), *PROCEEDINGS OF The XIIIth National Conference on Bioethics with international participation* (pp. 82–86). Iasi: Filodiritto Editore – Proceedings.
22. Schuhl, P.-M. (1960). Platon et la médecine. *Revue Des Etudes Grecques*, 73(344–346), 73–79. <https://doi.org/10.3406/reg.1960.3599>
23. Thivel, A. (2004). Platon et la médecine. *Actes Du 14ème Colloque de La Villa Kérylos à Beaulieu-Sur-Mer Les 10 & 11 Octobre 2003*, 15, 95–107.