



Comments Regarding Hearings on Health Care and Competition Law and Policy.
Specifically in reference to the practice of unauthorized pelvic exams in medical training

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In the medical ethics literature, the practice of medical students practicing pelvic exams on anesthetized patients without the woman's knowledge or consent has been called, "an outrageous assault upon the dignity and autonomy of the patient..."[1] "The practice shows a lack of respect for these patients as persons, revealing a moral insensitivity and a misuse of power." [2] "It is just another example of the way in which physicians abuse their power and have shown themselves unwilling to police themselves in matters of ethics, especially with regard to female patients." [3]

In 1914 a judge ruled that, "every human being of adult years and sound mind has a right to determine what shall be done with his own body." Interestingly, one of the only tests of this case law was a 1932 decision at a Stanford hospital involving a pregnant woman who had come to the hospital to have her baby. An account from Reclaiming our Health:

"She told the first medical student that she wanted a doctor. Instead, he called a dozen more medical students, each of whom performed pelvic and rectal examinations on her. She kept screaming that she did not want this done, but they laughed and told her to shut up." [4]

Many schools now incorporate "genital teaching associates" to teach medical students pelvic exam skills. One school used to use prostitutes. [5] Traditionally though, medical students have been taught how to do pelvic exams by examining women who are anesthetized. [6] A survey of sixteen hundred American medical students found that 10% of the patients the students practiced pelvic exams on were anesthetized. [7] Consent is rarely obtained. [8], [9]

Even when the patient was awake, 23% of medical students in one survey never specifically informed their female patients of their student status and just proceeded with pelvic exams unless questioned. Thirty-six percent of the 1600 medical students surveyed strongly disagreed with the statement, "Hospitals should obtain explicit permission for student involvement in pelvic exams." [10]

Wherever the practice of pelvic examinations under anesthesia without consent has become widely known, public outrage has followed. [11] Sandra Coney's book *The Unfortunate Experiment* details what happened in New Zealand's National Women's Hospital. When the news leaked the public went wild. It was called, "the first bombshell to capture widespread public attention...." The Nurses' Association condemned the practice as a, "violation of women's rights," and the Human Rights Commissioner called it, "a form of rape." From the local paper, the *Auckland Star*, at the time:

The disgust felt by women and the damage wrought to the image of the medical establishment has only been exacerbated by the unseemly, uncaring reaction of some in the establishment and the offhand, vague pledges to end this outrageous invasion of personal privacy and affront to dignity.

A government inquiry was set up. The head of the hospital explained that informed consent wasn't sought because, "it would take a ten-minute explanation each time." He explained that if he had the money, "they would be 'delighted' to get consent." It became clear during the inquiry, Coney comments, that most of the professionals had, "only the dimmest view of what informed consent meant."

Sir Frank Rutter, long-time chairman of the hospital board: "If a patient goes into National Women's Hospital not aware it's a teaching hospital, they're very naive. How else can students learn their practical skills?" The *Auckland Star* replied, "Just which hospital DO you go to if you're a woman, want medical treatment and do not want to become a class room exhibit."

Dr. Tony Baird, chairman of the New Zealand Medical Association got on television and said, "Until recently it wasn't an issue.... I'm very sorry that women feel they've been assaulted and violated in this way. This was never the intention." He had no idea then, asked the reporter, that women might object? "All I can say is that there have been no objections...."

"Could the reason be," asked the interviewer, "that it's very hard for an anesthetized woman to know what's going on?" "That's absolutely ridiculous," snapped Baird. [12]
Great Britain

A survey of British hospitals revealed a serious lack of consent for pelvic exams under anesthesia. Commented the British Sunday Times: "The consequences of teaching medical students that women's bodies are little more than educational toys has been detrimental to female patients and the medical profession." [13] Pressured by the feminist organization Women in Medicine, the Royal College of Obstetricians and Gynaecologists issued a set of guidelines. "Fully informed written consent must be obtained from the woman before she comes to the operating theatre... preferably... for a named rather than generic medical student." [14]

The British Medical Association's handbook Medical Ethics Today now contains an explicit statement that teaching hospitals should obtain prior written consent for pelvic examinations on anaesthetized patients. "We now make clear that only one medical student will perform the examination and we require that the student introduces him or herself to the patient beforehand," said one British senior Ob/Gyn lecturer. [15] This is the least we should do in the United States.

Sincerely,



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[1] Tishelman, R. Letter. Hastings Center Report 1994(July-August):45.

[2] Dwyer, J. Letter. Hastings Center Report 1994(July-August):45.

[3] Tishelman, R. Letter. Hastings Center Report 1994(July-August):45.

[4] Annas, GJ. "The Care of Private Patients in Teaching Hospitals." Bulletin of the New York Academy of Medicine 56(1980): 403-411.

[5] Kelly, ES. "Teaching Doctors Sensitivity on the Most Sensitive of Exams." New York Times 2 June 1998, late ed.:7F.

[6] Bewley, S. "The Law, Medical Students and Assault." British Medical Journal 304(1992):1551-1553.

[7] Cohen, DL, et al. "Pelvic Examinations by Medical Students." American Journal of Obstetrics and Gynecology 161(1989):1013-1014.

[8] Rogers, L. "Anaesthetised Women Suffer Unauthorized Medical Probes." Sunday Times 5/21/95

[9] Bibby, J., et al. "Consent for Vaginal Examination by Students on Anaesthetised Patients." The Lancet 12 November 1988:1150.

[10] Cohen, DL, et al. "The Ethical Implications of Medical Student Involvement...." Proceedings of the Annual Conference on Research on Medical Education 24(1985):146-153.

[11] Kerridge, I and J McPhee Examination on Anesthetized Patients by Medical Students Clinical Unit in Ethics and Health Law. University of Newcastle, 1998.

[12] Coney, S. The Unfortunate Experiment New York: Penguin Books, 1988.

[13] Rogers, L. "Anaesthetised Women Suffer Unauthorized Medical Probes" Sunday Times 5/21/95

[14] Frayn, L. "Trust Me - I'm a Doctor." LM 108(1998).

[15] Stepney, R. "When it's the Vagina, Use a Personal Touch." The Independent 18 April 1994:20.