Mahdi Khalili and Saeedeh Babeii Who Is Responsible for the Care Crisis in Modern Medicine?

According to the care crisis in modern medicine, the existential needs of patients are not satisfied. Marcum (2012) believes that if physicians become virtuous, and implement their medical practices in agreement with prudent love, this crisis will be solved. He maintains that this idea has a profound implication for the premedical and medical education of medicines. He suggests that the curriculum of medical students must include some general humanities, specific medical humanities, and practical clinical courses. According to him, by so doing, physicians will become more virtuous and care crisis will be eased. Although this solution is partly acceptable, it does not completely figure out the problem.
In this paper, it is argued that the care crisis is to some extent due to the undeniable role of technologies in modern medicine, so even if all physicians were virtuous, the problem would to some extent continue to exist. Indeed, the advent of Imaging technologies affects physicians' understanding of disease and diagnosis. Disease is now a materialistic thing detectable by technologies, and patients' narratives are not a necessary part of physicians' diagnosis. Physicians do not need to have a conversation with their patients since every disease can be detected by technologies. Therefore, technologies make a huge distance between physicians and patients, thereby exacerbating the care crisis which is the consequence of the poor relationship of physicians in association with their patients.
At the end of the paper, a comprehensive ethical approach including the evaluation of all contributing parts is proposed. According to this approach, health care system should be seen as a network whose components are physicians, patients, nurses, procedures, technologies and so on. The factors having an influence on the relationship between physician and patient should be recognized and evaluated. Especially, the influence of each technology and its mediation on the relationship between physicians and patients should be evaluated, and accordingly, new prescriptions about the system and its components and their relationships should be written. Technologies ought to be lain in a suitable relationship with other components in order not to harm the care value. The new network including various mentioned factors (especially technologies) should take into consideration the role of patients' narrations and the importance of the relatedness between physicians and patients.